

Official NAIC Annual Statement Blank

Property/Casualty

For the 2018 reporting year



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Ca ita' ...ar ets & Investment Analysis information egarding portfolio values and

reduces for complying with NAIC reporting equil ments.

hite Papers

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http://www.naic.org//prod_serv_home.htm

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NAIC Executive Office 444 North Capitol Street, NW Suite 700 Washington, DC 20001 202.471.3990

NAIC Central Office 1100 Walnut Street Suite 1500 Kansas City, MO 64106 816.842.3600

NAIC Capital Markets & Investment Analysis Office One New York Plaza, Suite 4210 New York, NY 10004 212.398.9000

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ANNUAL STATEMENT For the Year Ended December 31, 2018

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OFFICERS	
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Other	
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e officers of this reporting entity being duly swom, each depose and say that they are the cribed officers of said reporting entity, and that on the reporting	ng period stated above, all of the herein d
sets were the absolute property of the said reporting entity, free a coverage from any liens or claims thereon, except as herein stated, and that this statem planations therein contained, annexed or referred to, is a full and the said set statement of all the assets and liabilities and of the condition and affairs of the said	
ove, and of its income and deductions therefrom for the period enamed have been completed in accordance with the NAIC Annual Statement Instructions	and Accounting Practices and Procedures
cept to the extent that: (1) state law may differ; or, (2) that state or regulations require differences in reporting not related to accounting practice formation, knowledge and belief, respectively. Furthermore appears the state of the described officers also includes the related corresponding elec-	
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ASSETS

			Current Year		Prior Year
		1	2 Nonadmitted	3 Net Admitted Assets	4 Net Admitted
		Assets	Assets	(Cols. 1 - 2)	Assets
1.	Bonds (Schedule D)				A
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks				×
3.	Mortgage loans on real estate (Schedule B):				The same of the sa
	3.1 First liens		***************************************		
	3.2 Other than first liens				
4.	Real estate (Schedule A):		4		
	4.1 Properties occupied by the company (less \$ encumbrances)				V
	4.2 Properties held for the production of income (less \$ encumbrances)				
	4.3 Properties held for sale (less \$ encumbrances)				
- 5	Cash (\$, Schedule E-Part 1), cash equivalents (\$, Schedule E-Part 2)	20/2/10003500.9710020500000	10.100.000.000.000.000.000.000	diameter designation	
	and short-term investments (\$, Schedule DA)		N.		
6.	Contract loans (including \$ premium notes)	5,000,000,000,000,000,000			
7.	Derivatives (Schedule DB)				
8.	Other invested assets (Schedule BA)			·	
9.	Receivables for securities				***************************************
10.	Securities lending reinvested collateral assets (Schedule DL)			A	
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	******************			
13.				***************************************	
	Title plants less \$charged off (for Title insurers only)				
14.	Investment income due and accrued			***************************************	***************************************
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection				
	15.2 Deferred premiums, agents' balances and installments booked but deferred				
	and not yet due (including \$ earned but unbilled premiums)	J			
	15.3 Accrued retrospective premiums (\$) and contracts subject to		100		
	redetermination (\$)				
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				
17.	Amounts receivable relating to uninsured plans	S			
18.1	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Electronic data processing equipment and software	×			
22.	Net adjustment in assets and liabilities due to foreign exercise rates				***************************************
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (S) and other amounts receivable				
25.	Aggregate write-ins for other-than-invested assets		***************************************	. and and a second and a second and a	
26.	Total assets excluding Separate Accounts, Segregated Accounts an Protected	152520000000000000000000000000000000000	\$10:10000 A-41000000000000000000000000000000000000	10111961555540300000000000000000000000000000000	
	Cell Accounts (Lines 12 to 25)		USSESSION OF THE SECOND OF THE		
27.	Cell Accounts (Lines 12 to 25)				
28.	Total (Lines 26 and 27)				
	LS OF WRITE-INS				
101.					
02.		***************************************			***********************
03.					
198.	Summary of remaining write Life 1 from or orflow page				
199.	Totals (Lines 1101 through 11 hrs 1198, 1198) above)				
501.		***************************************			
502.					
503.		. 10200144011102101101101111	330000000000000000000000000000000000000		***************************************
598.	Summary of reman write-ins for Line 25 from overflow page				
599.	Totals (Lines 250 Part h 2503 plus 2598) (Line 25 above)			Control of the Contro	

LIABILITIES, SURPLUS AND OTHER FUNDS

		I Current Year	2 Prior Year
v v	70 - 21 F - 26 C L - 0		
	insurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	***************************************	

	oss adjustment expenses (Part 2A, Line 35, Column 9)		
	ommissions payable, contingent commissions and other similar charges		
	her expenses (excluding taxes, licenses and fees)		<i>M</i>
	rrent federal and foreign income taxes (including \$		-
	et deferred tax liability		
	orrowed money \$and interest thereon \$		
	nearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of		***************************************
	and including warranty reserves of \$	4. 0	
	cluding \$		
	Ivance premium		
	vidends declared and unpaid:		
	1 Stockholders	4.00	
	2 Policyholders		
	eded reinsurance premiums payable (net of ceding commissions)		
	nds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
	nounts withheld or retained by company for account of others		
	mittances and items not allocated		
Pr	ovision for reinsurance (including \$ certified) (Schedule F, Part 3 Column 78)		***************************************
No	et adjustments in assets and liabilities due to foreign exchange rates		
	afts outstanding		
Pa	yable to parent, subsidiaries and affiliates		
De	rivatives		
	yable for securities		
	yable for securities lending		
Li	ability for amounts held under uninsured plans		
	pital notes Sand interest thereon S		
A	gregate write-ins for liabilities		
	stal liabilities excluding protected cell liabilities (Lines 1 through 25)		
	otected cell liabilities	***************************************	***************************************
To	tal liabilities (Lines 26 and 27)	***************************************	***************************************
. A	ggregate write-ins for special surplus funds	***************************************	

	eferred capital stock		***************************************
	gregate write-ins for other-than-special surplus funds	***************************************	***************************************
. Su Gr	rplus notes		
U	oss paid in and contributed surplus		***************************************
Le	ss treasury stock, at cost:		
36	ss treasury stock, a cost. .1	US STANDARD SANDARD CONTROL OF	AMAZINE ACCUSTACE DATE (CO.)
36	2 shares preferred (value included in Line 31 \$		***************************************
	rplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 3)		
	tals (Page 2, Line 28, Col. 3)		
_	S OF WRITE-INS	-	-
01.		AND DESCRIPTION OF THE PARTY OF	
02.			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
33.		***************************************	010111111111111111111111111111111111111
98.	Summary of remaining write-ins for Lip of Iron Cerflo Cage		***************************************
99.	Totals (Lines 2501 through 2503 plus 2508) (Line 2 above)	.4007110111011000101111001	
01.	Totals (Lines 2501 through 2 5 plus 78) (Line 2 bove)		
)2.			
03.			
98.	Summary of remaining write-ins for the 29 from overflow page		
99.	Totals (Lines 2901 through 2903 plus 2, %) (Line 29 above)		
)1.	Totals (Lines 2701 miough 2703 pius 2 1 (Line 27 above)	5	10007777777777777777777777
02.			
03.			
98.	Summary of remaining we have ins for Line 32 from overflow page	***************************************	0101101111010111001110
99.	Totals (Lines ugh 3: Jus 3298) (Line 32 above)		25/11/10/10/10/10/10/10/10/10/10/10/10/10/

STATEMENT OF INCOME

	UNDERWRITING INCOME	I Current Year	2 Prior Year
L	Premiums earned (Part 1, Line 35, Column 4)		
	DEDUCTIONS:		
2.	Losses incurred (Part 2, Line 35, Column 7)		
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		
5.	Aggregate write-ins for underwriting deductions		
١.	Total underwriting deductions (Lines 2 through 5)		
7.	Net income of protected cells		
\$.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	*.))
	INVESTMENT INCOME	1.10	
).	Net investment income earned (Exhibit of Net Investment Income, Line 17)		
),	Net realized capital gains (losses) less capital gains tax of \$(Exhibit of Capital Gains (Losses))		***************************************
	OTHER INCOME		
2.	Net gain (loss) from agents' or premium balances charged off		BATEUTELOVA A VILITIET VAVA
	(amount recovered \$amount charged off \$). Finance and service charges not included in premiums		***************************************
	Aggregate write-ins for miscellaneous income.		***************************************
	Total other income (Lines 12 through 14)		
	Total other income (Lines 12 through 14)		_
	Net income before dividends to policyholders, after capital gains tax and before all other federal and origin in the state of the state		
	(Lines 8+11+15)	(10100000000000000000000000000000000000	
	Dividends to policyholders		
	Net income, after dividends to policyhoiders, after capital gains tax and before all other rederant foreign in the ne taxes		
	Net income, after dividends to policyholders, after capital gains tax and before all other rederation foreign income taxes (Line 16 minus Line 17)		
	Net income (Line 18 minus Line 19) (to Line 22)		
50000	CAPITAL AND SURPLUS ACCOURT Surplus as regards policyholders, December 31 prior year (Page 4, Line 3 Solumn Net income (from Line 20)	(**************************************	
	Net transfers (to) from Protected Cell accounts.		***************************************
8	Change in net unrealized capital gains or (losses) less capital gains		
	Change in net unrealized fareign exchange capital gain (loss)		
	Change in net deferred income tax.		
2	Change in net deferred income tax. Change in nonadmitted assets (Exhibit of Nonadmitted Ass Change in provision for reinsurance (Page 3, Line 16, Column inus Column		
	Change in provision for reinsurance (Page 3, Line 16, Column inus Column		
	Change in surplus notes.		***************************************
	Surplus (contributed to) withdrawn from protected cells		
	Cumulative effect of changes in accounting principles		
2	Capital changes:		
	32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend)		
	32.3 Transferred to surplus		
	Surplus adjustments:		The state of the s
	33.1 Paid in		
	33.2 Transferred to capital (Str. Divide 1)	300000000000000000000000000000000000000	
	33.3 Transferred from capital Net remittances from or (to) Home rice	***************************************	
	Net remittances from or (to) Hom fice Dividends to stockholders		
	Dividends to stockholders	3**************************************	
	Change in treasury stock (Page 3, Lines and 36.2, Column 2 minus Column 1)		
	Aggregate write-ins for gains and losses in lus.		
	Change in surplus as policyholders for the year (Lines 22 through 37)		
_	Surplus as regards poly ders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) AILS OF WRITE-INS		<u> </u>
		200000000000000000000000000000000000000	

	Survey of remaining writing his for Line 5 from overflow page		
99	Totals (nes 03 hrough 203 plus 0598) (Line 5 above)		
01			
02		300000000000000000000000000000000000000	
冕	Summary of remaining write-ins for Line 14 from overflow page		
99			1, 2000000000000000000000000000000000000
01			
02			
	Summary of remaining write-ins for Line 37 from overflow page		
98	. Summary of remaining write-ins for Line 37 from overflow page		

CASH FLOW

	Cash from Operations	1	2
ĕ	Part of the second seco	Current Year	Prior Year
	Premiums collected net of reinsurance		101100000000000000000000000000000000000
	Net investment income		+
	Miscellaneous income		-
	Total (Lines 1 through 3)		
	Benefit and loss related payments		
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
	Commissions, expenses paid and aggregate write-ins for deductions		
	Dividends paid to policyholders		117
	Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		V 4
	Total (Lines 5 through 9)		
	Net cash from operations (Line 4 minus Line 10)		100
	Cash from Investments		
	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks		300000000000000000000000000000000000000
	12.3 Mortgage loans		***************************************
	12.4 Real estate		
	12.5 Other invested assets		Trestantion Trestantion
	12.6 Net gains or (losses) on cash, eash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		***************************************
	Cost of investments acquired (long-term only):		5.0.00.00.00.00.00.00.00.00
	13.1 Bonds		
	13.2 Stocks.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	13.3 Mortgage loans		1.35000000000000000000000000000000000000
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		2000 1030 1030 1030 1030 1030 103
	13.7 Total investments acquired (Lines 13.1 to 13.6)		
	Net increase (decrease) in contract loans and premium notes		
	Cash from Financing and Miscellaneous Sources		
	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabin		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)		
	Net cash from financing and miscellaneous sources times 16.1 to 16.4 inus Line 16.5 plus Line 16.6)		
	RECONCILIATION OF CASH, CASH EQ. ALENTS AND ORT-TERM INVESTMENTS	9	
	Net change in cash, cash equivalents and short-term in truents (Line plus Lines 15 and 17)		
	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year		
	19.2 End of year (Line 18 plus Line 19.1)		

Note: Supplemental disclosures of cash flow information or non-cash transactions:		
20.0001	200000000000000000000000000000000000000	. 1010010000000000000000000000000000000
20.0002		
20.0003		
20.9996		

UNDERWRITING AND INVESTMENT EXHIBIT PART 1 – PREMIUMS EARNED

	Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year- per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year- per Col. 5 Part JA	Premiums Earned Payear ols. 12-3)
1.	Fire		.:		A
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		-1707-00-00-00-00-00-00-00-00-00-00-00-00-		
11.2	Medical professional liability—claims-made				
12.	Earthquake				***************************************
13.	Group accident and health		***************************************		
14.	Credit accident and health				
1.4.	(group and individual)				
15.	Other accident and health		***************************************		***************************************
16.		***************************************			
	Workers' compensation	20201100311001110031000011110011		Annual Management	
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			***************************************	***************************************
	2 Private passenger auto liability	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		0.4	***************************************
	.4 Commercial auto liability				
21.	Auto physical damage				
22.	Aircraft (all perils)				
23.	Fidelity				
24.	Surety				
26.	Burglary and theft	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i></i>		***************************************
27.	Boiler and machinery				
28.	Credit			***************************************	
29.	International				
30.	Warranty				
31.	Reinsurance-nonproportional			0.000.000.0000.0000.0000.0000.0000.0000.0000	and the second second second
	assumed property				***************************************
32.	Reinsurance-nonproportional assumed liability				
33.	Reinsurance-nonproportional assumed financial lines				
34.	Aggregate write-ins for other lines				
20	of business		-		
35.	TOTALS				
	LS OF WRITE-INS	N.			
401.		A			
498.	Sum. of remaining write-ins for Line 34 from overflow page				
499.	Totals (Lines 3401 through 34 plus 3498) (Line 34 above)				

6

UNDERWRITING AND INVESTMENT EXHIBIT PART 1A – RECAPITULATION OF ALL PREMIUMS

	Line of Business	I Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Uncarned (Running More Than One Year from Date of Policy) (a)	Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	Total Reserve for Unearned miums Cols 2+3+4
31	Fire					
2.	Allied lines					
3.	Farmowners multiple peril					
4.	Homeowners multiple peril					
5.	Commercial multiple peril	***************************************			A	
6.	Mortgage guaranty				4	
8.	Ocean marine					
9.	Inland marine					
10.	Financial guaranty	***************************************			A	

11.1	Medical professional liability—occurrence	***************************************	***************************************			
	Medical professional liability—claims-made					·
12.	Earthquake	***************************************				
13.	Group accident and health					
14.	Credit accident and health				Ra.	
	(group and individual)					
15.	Other accident and health	***************************************			—	
16.	Workers' compensation					
17.1	Other liability—occurrence					
17.2	Other liability—claims-made	***************************************		A		***************************************
17.3	Excess workers' compensation					
18.1	Products liability—occurrence					
18.2	Products liability—claims-made	(
	.2 Private passenger auto liability	***************************************			***************************************	
9.3,19	4 Commercial auto liability	***************************************				
21.	Auto physical damage	***************************************			***************************************	
22.	Aircraft (all perils)					
23.	Fidelity					***************************************
24.	Surety					
26.	Burglary and theft			04000010310010001		
27.	Boiler and machinery					
28.	Credit					
29.	International					
30.	Warranty					
31.	Reinsurance-nonproportional					
	assumed property		-			
32	Reinsurance-nonproportional			0.000.000000000000000000000000000000000		
	assumed liability		l			
33.	Reinsurance-nonproportional			APPROXIMATE CONT.		
2121	assumed financial lines					
34.	Aggregate write-ins for other lines of					
	business	A 4				
35.	TOTALS	(F				
36.	Accrued retrospective premiums based on experie					Control of the Contro
37.	Earned but unbilled premiums		*************************************		***************************************	***************************************
38.	Balance (Sum of Lines 35 through 37)					
				-		-
	LS OF WRITE-INS					
		//				
		X				
498. 5	Sum. of remaining write-ins for	2 1000 100 100 100 100 100 100 100 100 1	ELECTRONIC AND LITTLE DEPONDER ACCOUNTS AND A	sectives in the control of the contr		
	Line 34 from overflow page		<			
499.	Totals (Lines 3401 through 3403					
	olus 3498) (Line 34 a			1		I

(a)	(a) State here basis of compute for used in each case	

UNDERWRITING AND INVESTMENT EXHIBIT PART 1B – PREMIUMS WRITTEN

		1	Reinsuranc	e Assumed	Reinsura	ince Ceded	6
	Line of Business	Direct Business (a)	2 From Affiliates	3 From Non- Affiliates	4 To Affiliates	5 To Non- Affiliates	Net Premiums Written Cols. 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	.00010031001000000000000000000000000000	;namammamme;				
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		.,				303000000000000000000000000000000000000
522.5	(group and individual)						
15.	Other accident and health						
16.	Workers' compensation	1656.0523310036-16503103	41-20-20-20-20-20-20-20-20-20-20-20-20-20-	200000000000000000000000000000000000000			7-11000 TO
17.1	Other liability—occurrence						
17.1			200000000000000000000000000000000000000				0110000001110000000
17.3	Other liability—claims-made	***************************************					
	Excess workers' compensation						
18.1	Products liability—occurrence	***************************************					(2)21024444444444444444444444444444444444
18.2	Products liability—claims-made						000000000000000000000000000000000000000
	2 Private passenger auto liability						
	4 Commercial auto liability				***************************************		001111111011111111111111111111111111111
21.	Auto physical damage	***************************************				-00000000000000000000000000000000000000	
22,	Aircraft (all perils)					***************************************	
23.	Fidelity				***************************************		
24.	Surety		200000000000000000000000000000000000000	· · · · · · · · · · · · · · · · · · ·			
26.	Burglary and theft						
27.	Boiler and machinery	***************************************			***************************************		
28.	Credit					***************************************	
29.	International						
30.	Warranty			W			
31.	Reinsurance-nonproportional	100000000000000000000000000000000000000					
	assumed property	XXX					
32.	Reinsurance-nonproportional						
2.00	assumed liability	A X	10 10				
33.	Reinsurance-nonproportional		Atta Volumenta	10.02450/0150151000510	144000000000000000000000000000000000000	Y55850000000000000000000000000000000000	570500000000000000000000000000000000000
33.	assumed financial lines		- 30				
34.	Aggregate write-ins for other lines						
34.	of business						
35.	TOTALS		7				
DETA	LS OF WRITE-INS						
			nommunionioni		Creation control control	-noncommonoments	
	um, of remaining write-ins for						
	Line 34 from overflow page				ASSAUGISTANIA		
	otals (Lines 3401 through 340	*************************************		***************************************	***************************************		
	olus 3498) (Line 34 above)						

(a)	Does the company's direct premium	written include premiums recorded on an installment basis?	Yes [] No []

UNDERWRITING AND INVESTMENT EXHIBIT PART 2 - LOSSES PAID AND INCURRED

100		TAGGAT.	Losses Paid Less Salvage			0		
	1	2	3	7	100000			Percentage of
Line Assing	Direct	Reinsurance	Reinsurance Recovered	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)	Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire	***************************************						***************************************	
2. Alfied lines	passentierm microsomes.	The state of the s			THE PROPERTY OF THE PARTY OF TH	miconitivismi (manufatti		
3. Farmowners multiple peril.	***************************************				***************************************			
4. Homeowners multiple peril		***************************************	***************************************	***************************************			***************************************	***************************************
5. Commercial multiple peril								
	<							
9. Inland marine		***************************************			***************************************		***************************************	***************************************
10. Financial guaranty								
11.1 Medical professional liability—occurrence			I I I I I I I I I I I I I I I I I I I	ra)				
11.2 Medical professional liability—claims-made	-	*						
12. Earthquake		~				0.0011111111111111111111111111111111111		***************************************
13. Group accident and health,							***************************************	***************************************
14. Credit accident and health (group and individual)			×					
15. Under accident and nearth	2		***************************************					
17.1 Other liability occurrence								
17.2 Other liability—claims-made								
17.3 Excess workers' compensation								
		1						
6								
19.3, 19.4 Commercial auto liability								
21. Auto physical damage	***************************************	**)************************************					***************************************	***************************************

							***************************************	***************************************
	***************************************			····		***************************************		
26. Burglary and theft								
			***************************************				***************************************	
	***************************************	**************************************	***************************************	The second of the second		Transcondental from the property of the proper		
29. International								
21 Dainement nonmonetricum neumand		minumentonium (iii						THE STATE OF THE S
	XXX							
32. Reinsurance-nonproportional assumed								
	XXX							
33. Reinsurance-nonproportional assumed			TO THE WAY TO SEE THE SECOND S				Service 1990 TO SERVICE SERVICE	AND REAL PROPERTY OF THE PERSON NAMED AND PARTY OF THE PERSON NAME
financial lines	XXX	***************************************			········			
34. Aggregate write-ins for other lines of								
Dusiness						*		
(22) TOTOTO								
DETAILS OF WRITE-INS								
5401.	pasterial community and		Janean Control of the	AMMENDATIONALISMENTALISMENT			deposition and the second seco	Name of the last o
3402.		***************************************	***************************************				***************************************	***************************************
3405 Sum of remaining write-ins for Line 34 from overflow								
nage							4	
3499. Totals (Lines 3401 through 3403 + 3498)								
								_

UNDERWRITING AND INVESTMENT EXHIBIT PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Repoi	Reported Losses		noul	Incurred But Not Reported	ted	∞	6
	-	2	e	4 N	S	9	7		
Time of Bay	Direct	Reinsurance	Deduct Reinsurance Recoverable	Losses Excl. Incurred But Not Reported (Cols. 1+2-3)	Direct	Reinsurance	Reinsurance	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
Fire									
2. Alied lines		The state of the s	THE REAL PROPERTY OF THE PARTY	majoritation continues.	***************************************			and an interest of the same of	Distriction and the second
Farmowhers multiple peril		***************************************	***************************************		***************************************		-		
5. Commercial multiple peril	2								

8. Ocean marine				***************************************				***************************************	***************************************
10 Einenciel oueranto						***************************************			
						1			
11.2 Medical professional liability—claims-made				***************************************			***************************************	***************************************	***************************************
12. Earthquake	A		4						***************************************
13. Group accident and health (mount and individual)	>	1						(a)	
14. Credit accident and health.	0			1		***************************************		(a)	
16. Workers' compensation		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							-
					***************************************	***************************************			
17.2 Cheer trability—claims-made						***************************************			
19.1, 19.2 Private passenger auto liability		***************************************							-
-	***************************************	***************************************		The second second	***************************************		***************************************		
21. Auto physical damage				3					***************************************
						***************************************	***************************************		
24. Surety					•				
26. Burglary and theft					4	***************************************			
27. Boiler and machinery		***************************************	***************************************			***************************************	***************************************	100000000000000000000000000000000000000	***************************************
28. Credit	***************************************	***************************************		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		***************************************		***************************************	***************************************
29. International				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			***************************************	***************************************	
31. Reinsurance-nonproportional assumed property	XXX				XXX				
32. Reinsurance-nonproportional assumed liability	XXX	**************************************	ALCONTON STREET, STREET, STREET,		XX		**************************************	**************************************	
 Reinsurance-nonproportional assumed financial lines Apprepare write-ins for other lines of business 	XXX								
						100			
DETAILS OF WRITE-INS									
5401.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					***************************************	***************************************
3403.									
3498. Sum, of remaining write-ins for Line 34 from overflow page 3499. Totals (Lines 3401 through 3403 + 3498) (Lines 34 above)			***************************************						
The sound federal and only areas and sound federal									

...for present value of life indemnity claims. (a) Including S... 10

UNDERWRITING AND INVESTMENT EXHIBIT PART 3 – EXPENSES

		l Loss Adjustment	2 Other Underwriting	3	4
		Expenses	Expenses	Investment Expenses	Total
1.	Claim adjustment services:				
	1.1 Direct			***************************************	A
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded		500510010000000000000000000000000000000		
	1.4 Net claim adjustment services (1.1+1.2-1.3)				
2.	Commission and brokerage:				
41	2.1 Direct, excluding contingent	-material and a second and a second as a s			0 0
	2.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent				
	2.4 Contingent—direct				7
	2.5 Contingent—reinsurance assumed				
	2.6 Contingent—reinsurance ceded		***************************************		T
				79 (
	[하다]			4.40 40	
	2.8 Net commission and brokerage (2.1+2.2-2.3+2.4+2.5-		1		
57	2.6+2.7)		***************************************		
3.	Allowances to manager and agents)#####################################			
4.	Advertising				
5.	Boards, bureaus and associations				
6.	Surveys and underwriting reports	minimum managements			
7.	Audit of assureds' records				
8.	Salary and related items:	- Anna Harris Chiling Control of the			
	8.1 Salaries				
	8.2 Payroll taxes			/	
9.	Employee relations and welfare	***************************************	, rain	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
10.	Insurance				
11.	Directors' fees				
12.	Travel and travel items				
13.	Rent and rent items				
14.	Equipment				
15.	Cost or depreciation of EDP equipment and software				
16.	Printing and stationery		T		
17.	Postage, telephone and telegraph, exchange and express				
18.	Legal and auditing				
19.	Totals (Lines 3 to 18)	V .	J		
20.	Taxes, licenses and fees:		/		
20.	20.1 State and local insurance taxes deducting guaranty		1		
	association credits of \$				
	20.2 Insurance department licenses and fees			,,	
	[12] [12] 12] [12] [13] [13] [13] [13] [13] [13] [13] [13			·	01101111111111111111111111111111111111
	20.4 All other (excluding federal and foreign income real			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			1		
	estate)				
21	20.5 Total taxes, licenses and fees (20.1+20.2+20.3+20.4)	\\/_\/		***************************************	0
21.	Real estate expenses	V			
22.	Real estate taxes	3		***************************************	***************************************
23.	Reimbursements by uninsured plans	***************************************			
24.	Aggregate write-ins for miscellaneous expenses.	:			
25.	Total expenses incurred				(a)
26.	Less unpaid expenses—current year			,	
27.	Add unpaid expenses—prior year			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
28.	Amounts receivable relating uninsu plans, prio ear				
29.	Amounts receivable relating unit sure plans, current year	Archive research house research 0.000 h.	anner and Winniberral Tree	ma marke attenda economical (1964)	mane/facilitationer/e-Pfiffic 4
30.	Add unpaid expenses—prior year				
TAT	LS OF WRITE-INS		†	i	İ
12				***************************************	04111110111011111111111111111111111111
		111111111111111111111111111111111111111			
13. 4	ammary of remaining inspiration of the common control of the commo				
10 0.					

(a) In	cludes mana	ment fee		to affiliates and	S to	non-affiliates
--------	-------------	----------	--	-------------------	------	----------------

EXHIBIT OF NET INVESTMENT INCOME

1. 1.1 1.2	200020000	Collected During Year	2 Earned During Year
	U.S. Government bonds	(a)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1.2	Bonds exempt from U.S. tax		
	Other bonds (unaffiliated)		
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates	(b)	
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	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		
10.	Total gross investment income		
11.	Investment expenses		×
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		
	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 above)		
1501.			
1502.			
1503.	типистичном полительной полит	mo (mo)(mo)(mo)mo)mo (mo)	
1598.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

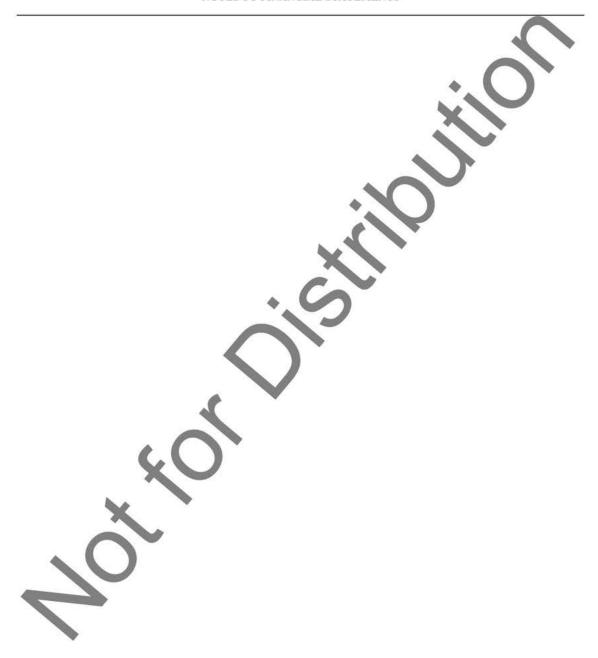
EX JIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5 Change in
	¢O*	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1.1	Bonds exempt from U.S. tax	2011(01)201101101101			11000001(000000)003	0)0000000000000
1.2	Other bonds (un Gliated)			***************************************		***************************************
1.3	Bonds of affiliates					
2.1	Preferred stocks (figure sted)			***************************************		***************************************
2.11	Preferred stocks of affilia					
2.2	Common sto			***************************************		
2.21	Common cks of an tes					
3.	Mortgage ans					
4.	el estate				***************************************	
5.	Co. ct loaz			***************************************		
6.	Cash, equivarents and short-term investments			***************************************	:normationionar	9)10110111011101101
(Stelland	Derivative struments			***************************************	1	
1	ssets	***************************************	***************************************	***************************************	***************************************	
10.	Aggregate write-ins for capital gains (losses)			***************************************	:monundaments or	
DETA	ILS WRITE-INS					
0901.						***************************************
0902.						
0903.					320000000000000000000000000000000000000	
0998. 0999.	Summary of remaining write-ins for Line 9 from overflow page Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)			***************************************		***************************************

EXHIBIT OF NONADMITTED ASSETS

		I Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 – Col. 1)
1.	Bonds (Schedule D)		***************************************	
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			
	2.2 Common stocks			
3.	The state of the s			
	3.1 First liens			
	3.2 Other than first liens	***************************************		
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company	***************************************		
	4.2 Properties held for the production of income		100000000000000000000000000000000000000	
	4.3 Properties held for sale	***************************************		
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term		~ ~	
	investments (Schedule DA)	***************************************		~
6.	Contract loans	***************************************		×
7.	Derivatives (Schedule DB)	***************************************		
8.	Other invested assets (Schedule BA)	***************************************		***************************************
9.	Receivables for securities		A	***************************************
10.	Securities lending reinvested collateral assets (Schedule DL)			***************************************
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
	Title plants (for Title insurers only)			
14.	Investment income due and accrued			
15.		Y		
	15.1 Uncollected premiums and agents' balances in the course of collection		***************************************	
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.		P	
	15.3 Accrued retrospective premiums and contracts subject to redetermination			
16.	Reinsurance:	Annual An		***************************************
10.	16.1 Amounts recoverable from reinsurers	V	and the second second section of the second section se	
	16.2 Funds held by or deposited with reinsured companies			
	16.3 Other amounts receivable under reinsurance contracts			(0100-1-1010-1-10
17.	Amounts receivable relating to uninsured plans			
18.1	Current federal and foreign income tax recoverable and interest thereon			444444444444444444444444444444444444444
18.2	Net deferred tax asset		-2	220500000000000000000000000000000000000
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 ates			
23.	Receivables from parent, subsidiaries and affiliates	Y		
24.	Health care and other amounts receivable	***************************************	400700000000000000000000000000000000000	
25.	Aggregate write-ins for other-than-invested assets			
26.	Total assets excluding Separate Accounts, Segregated Accounts a Protected ell			
	Accounts (Lines 12 to 25)			
27.	From Separate Accounts, Segregated Accounts and Protected Cell Acco			
28.	Total (Lines 26 and 27)		6	Ke.
ETA	ILS OF WRITE-INS			
101.				
			***************************************	***************************************
103.				
	Summary of remaining write-ins or Line from over by page			
199.	Totals (Lines 1101 through 110 olus 119 (Line 11 ab e)	AP /46 (\$150 HE SECTION OF STREET STREET)		
501.	VA VI			
502.				
503.				
	Summary of remaining write-ins for Line om overflow page			

NOTES TO FINANCIAL STATEMENTS



PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Is the reporting entity a member of an Insurance Holding is an insurer?	Company System consisting	g of two or more affiliated persons, one or	more of which	Yes [1 3	No [ï		
	If yes, complete Schedule Y, Parts 1, 1A and 2.				1	1				
1.2	If yes, did the reporting entity register and file with its d regulatory official of the state of domicile of the princ disclosure substantially similar to the standards adopted Insurance Holding Company System Regulatory Act and and disclosure requirements substantially similar to those	ipal insurer in the Holding d by the National Associat model regulations pertaining	g Company System, a registration staten ion of Insurance Commissioners (NAIC ng thereto, or is the reporting entity subje	nent providing in its Model	Yes		No [1	N/A [1
1.3	State Regulating?			- A						_
1.4	Is the reporting entity publicly traded or a member of a pu	blicly traded group?		M P	Yes [1 1	No [10		
1.5	If the response to 1.4 is yes, provide the CIK (Central Inde	x Key) code issued by the S	SEC for the entity/group.	A .						
2.1	Has any change been made during the year of this states reporting entity?	ment in the charter, by-law	s, articles of incorporation, or deed of s	ement or	Yes [1 1	No [1		
2.2	If yes, date of change:				-					_
3.1	State as of what date the latest financial examination of the	e reporting entity was made	or is being made							_
3.2	State the as of date that the latest financial examination re date should be the date of the examined balance sheet and		either the state of the idea o	ng entity. This						
3.3	State as of what date the latest financial examination report the reporting entity. This is the release date or completio date).			of domicile or (balance sheet						_
3.4	By what department or departments?									
3.5	Have all financial statement adjustments within the latest t filed with departments?	financial examination report	t be a subsequent finance	ial statement	Yes [1 3	No I	1	N/A [1
3.6	Have all of the recommendations within the latest financia	al examination report be	omplied with.		Yes [700		
4.1	During the period covered by this statement, did any a combination thereof under common control (other than sa a substantial part (more than 20 percent of any major line	laried employees he repo	eemiums) of:	s for or control	Service E	car or	Dan Grand			
			4.11 sales of new business' 4.12 renewals?	Let	Yes [Yes [1	No [1		
4.2	During the period covered by this statement, did any saffiliate, receive credit or commissions for or control a sub- premiums) of:	service organiz on ov bsta l part (more an 20	wned in whole or in part by the reporting percent of any major line of business mea							
			4.21 sales of new business' 4.22 renewals?	ď.	Yes [No [1		
5.1	Has the reporting entity been a party to a merger onsol	lidation during the period co			Yes [-		-		
3.1	If yes, complete and file the merger history data file w	The state of the s	refer by this statement.		Tes [j .		1		
5.2		No. of the second	use two letter state abbreviation) for any	entity that has						
3.2	ceased to exist as a result of a merger r consolidat n.	suc, and state of dofficire (use two letter state aboreviation) for any	entity that has						
	Name of an	2	3 State of Domicile							
	Ivaline of the	NAIC Company Code	State of Domicile							
6.1	Has the reporting entity in any Certificates of Authority or revoked by an introduced the reporting		neluding corporate registration, if applical	le) suspended	Yes [1 1	No [1		
6.2	If yes, give all information									
7.1	D any for a (non-lated States) person or entity dire	ectly or indirectly control 10	% or more of the reporting entity?		Yes [1 1	No [1		
7.2	If yes,									
	 State the percentage of foreign control 	reande) or antitude); or if th	ne entity is a mutual or reciprocal, the na	tionality of its	_			%		
	manager or attorney-in-fact and identify t in-fact).									
		1	2							
	-	Nationality	Type of Entity							

8.1	Is the company a subside	diary of a bank holding compa	my regulated by the Federa	al Reserve Board?		Yes []	No []	
8.2		s, please identify the name of		ki.				
8.3	Is the company affiliate	ed with one or more banks, the	rifts or securities firms?			Yes [No. []	
8.4	If response to 8.3 is ye financial regulatory ser Deposit Insurance Corp		7	•				
	l Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 EC		
			***************************************				1	
						S		
9.		address of the independent cer					10	
1.0		ranted any exemptions to the p			The state of the s			
	requirements as allowed	d in Section 7H of the Annua				100 010		
0.2	state law or regulation? If the response to 10.1.	is ves, provide information re	ated to this exemption:	•		Yes []	No []	
0.3		ranted any exemptions related on 18A of the Model Regulation	진짜 10~0.00000 10~00000 10~00000 10~00000 10~00000 10~00000 10~00000 10~00000 10~0000 1		porting fodel gulation	Yes []	No []	
0.4		is yes, provide information re						
0.5		y established an Audit Commi			e laws?	Yes []	No []	N/A []
0.6	If the response to 10.5	is no or n/a, please explain			>			
1.		dress and affiliation (office individual providing the state			sultant associated with an actuarial			
2.1	그 아이들 아이들 때 얼마를 보고 있다면 하셨다.	ty own any securities of a real		The state of the s		Yes []	No []	
					tate holding company			
				Number of parc 12.1. Total book/adju	ets involved sted carrying value	s		
2.2		tion				S -		
3.		S BRANCHES OF ALIEN R		NLY:				
3.1	47.0	17.1			of the reporting entity?			
3.2		ntain all business transacted			h on risks wherever located?	Yes []	No []	
3.3		nanges made to any of the	indentures during the yea		ii on mas maserer rocares.	Yes []	13.5	
3.4	If answer to (13.3) is yo	es, has the domiciliary or enti-	te approved the change	es?		Yes []	No []	N/A []
4.1	Are the senior officers	(principal execute officer, e repring entit subject to a	incipal financial officer, p	rincipal accounting officer	or controller, or persons performing	Yes []	No. f. 1	
	a. Honest and ethic				st between personal and professional		140 []	
	relationships;							
		ite, timely and derstandable applicable governmental law		reports required to be filed	by the reporting entity;			
		al reporting of violations to		ersons identified in the cod	e; and			
	e. Accountabili	adherence to the code.						
4.11	If the response to 14.1	- A						
4.2		senior managers been ame				Yes []	No []	
4.21	the response to 14.2	is s, provide information re	lated to amendment(s)					
4.3	Hav v prov	he code of ethics been waive		officers?		Yes []	No []	
4.31	If the response to 14.3	is yes, provide the nature of a	ny waiver(s)					

2		I is yes, indicate the American nd describe the circumstances				of the issuing or confirmin	g bank of			
	the Letter of Credit a	nd describe the circumstances	ill which the Letter of Cre	on is ingg	ered.					
	American Bankers Association (ABA) Routing	2 Issuing or Confirming		3		4	4	C		
	Number	Bank Name	Circumstances That C	Can Trigge	r the Letter of Credit	Amount		1		
								,		
			BOA	RD OF I	DIRECTORS	X				
	Is the purchase or sal committee thereof?	e of all investments of the repo	orting entity passed upon o	either by th	ne board of directors or a	subordinate	•	Yes []	No [1
	committees thereof?	ntity keep a complete permaner	1 AG AG 90 NG AG					Yes []	No [1
		ity an established procedure for rectors, trustees or responsible					he part of?	Yes []	No I	1
	Control of the contro			FINA	NCIAL .					
					of a River					
	Accounting Principle	een prepared using a basis of ac s)?	counting other than Statu	tory Accor	inting Prit sples (e.g. 5)	enerany Accepted		Yes []	No [1
1	Total amount loaned	during the year (inclusive of S	eparate Accounts, exclusi			2				
				20.11	To stoe s not of			S		
				2 13	Testees, supreme or g			\$		
2	Total amount of loan	s outstanding at the end of year	r (inclusive of Sep		dsive f policy loans):					
			4	20.22	To dectors or other o			S		
				33	Trustees, supreme or g			\$		
	reported in the staten			o transi		the liability for such obligat		Yes []	No [1
2	If yes, state the amou	int thereof at December 31 of the	he curro year:	21.21	Rented from others			s		
				21.22	Borrowed from others			S		
			•	21.23	Leased from others Other			S		
	Does this statement association assessme	include payments for assorts?	ents as described in the			ther than guaranty fund or		Yes []	No [1
2	If answer is yes:			22.21	The control of the second			c		
				22.21	Amount paid as losses Amount paid as expen			\$		
			"	22.23	Other amounts paid			\$		
	Does the reporting er	ntity repor amoun	in parent, subsidiaries or	affiliates	on Page 2 of this statemen	nt?		Yes []	No [1
	If yes, indicate any a	mounts received from parent	included in the Page 2 an					S		
		K			FMENT					
01	actual possession of	be and other securities ow the repainmentity on said date	e? (other than securities le	ending pro	grams addressed in 24.03)		Yes []	No [1
12		of ete information, relating t								
)3	AN AN	prog ms, provide a description n of off-balance sheet. (an alter	mative is to reference No	te 17 when	e this information is also					
-	- Company of the Comp	security lending program meet yes, report amount of collatera	the requirements for a co	nforming p				Yes []	No []	N/A
100	Control of the second s	yes, report amount of collateral no, report amount of collateral		104				s		
7		lending program require 102%		d 105% (f	oreign securities) from the	ne counterparty at the outset		Yes []	No f 1	N/A
8	Does the reporting er	ntity non-admit when the collatentity or the reporting entity's				ding Agreement (MSLA) to		Yes []		
	securities lending?	eurorestatas, edunatures et 1 7095 tam P ultora, 1907 il 191						Yes []	No []	N/A

24.10	For the reporti	ng entity's security lending pro	gram, state the amou	unt of the follow	ing as of D	ecember 31 of the	current year:					
	24.101	Total fair value of reinvested	collateral assets repo	orted on Schedul	e DL, Part	s 1 and 2			S			
	24.102	Total book adjusted/carrying	value of reinvested	collateral assets i	eported or	Schedule DL, Par	ts 1 and 2		s			
	24.103	Total payable for securities le	nding reported on th	e liability page					Sal			
25.1	Were any of the	ne stocks, bonds or other assets entity or has the reporting enti- ect to Interrogatory 21.1 and 24	of the reporting en	tity owned at De							No.)]
25.2	If yes, state the	amount thereof at December 3	1 of the current yea	r:					_	0	in the second	
			25.21	Subject to repu				(1	-		
			25.22 25.23			hase agreements	• 1					
			25.24	Subject to doll		ise agreements repurchase agreem	ents A	-	Æ-			
			25.25	Placed under o			- V 7		S			
			25.26				e - excluding FHeB tal Ste	OC IO	S			
			25.27	FHLB Capital					S_			
			25.28 25.29	On deposit wit					S_ S			
			25.29	On deposit wit		cluding collateral	pledged n FHLB		5			
			25.31			HLB – including a		nts	S			
			25.32	Other		A 4	7		S			
25.3	For category (25.26) provide the following:				_						
		1		2	401		3					
		Nature of Restr	iction	Descrip	tion		want					
						-						
					-		-					
		8										
26.1	Does the repor	ting entity have any hedging tra	insactions reported	on Schedule DB		1		Yes	[]	No	[]	
26.2		emprehensive description of the	hedging program be	een made availal	to me d	omicin state?		Yes	[]	No	1.1	N/A []
		description with this statement.		A (
27.1		erred stocks or bonds owned as	of December 31 of	the current year	aatoril	y hvertible into	equity, or, at the option of the	Ves	í	No	1.1	
27.2		ible into equity? e amount thereof at December 3	Lof the current					5		140	4.5	
	1 4-14 B-010-00-00-00-00-00-00-00-00-00-00-00-00				1							
28.	offices vaults	ns in Schedule E-Part 3 - Spec or safety deposit boxes, were	all stocks ands	tate, mortg			ysically in the reporting entity's current year held pursuant to a					
	custodial agre	ement with a qualified bank of	r trust compa in	accordance	h Section	1, III - General E	examination Considerations, F					
	Outsourcing o	f Critical Functions, Custodial	or Safekeeping A	ments of N	AIC Finan	cial Condition Exa	miners Handbook?	Yes	[]	No	[]	
28.01	For agreement	s that comply with the requiren	nents of the NAIC F	in. onditi	on Examin	ers Handbook, con	nplete the following:					
			-		7	2	1					
			Name o	f Custodian(s)		Custodian's Addre	ess					
			1									
20.02	r			Ed. NIEG E								
28.02	location and a	nents that do no suply w complete explanation	quirements of	the NAIC Fine	inciai Con	attion Examiners	Handbook, provide the name	15				
								-0				
		Name(s)		2 Location(s)		Co	3 omplete Explanation(s)					
		, tame(s)		Locuitos (a)			myseco Explanation(s)	7				
								1				
	- 4		_					_				
28.03	Have there	en any charles, including name	changes, in the cust	todian(s) identifi	ed in 28.0	during the curren	t year?	Yes		No	[]	
28.04	s, give	and complete information rela	ting thereto:									
	1		2			3	4	7				
/		Old Custodian	New Custodi	an	Date o	f Change	Reason					
1								7				
-							0:	-				

15.3

	Name of Firm or Individual		2 Affiliation				
			24 500500 AN CHORLE	- 1000-mm - 40, - 40, - 6	1		•
	For those firms/individuals listed in the ta (i.e., designated with a "U") manage more For firms/individuals unaffiliated with the does the total assets under management ag	than 10% of the reporting entity's reporting entity (i.e., designated	assets? with a "U") listed in the	. (No] 0
5	For those firms or individuals listed in the table for a			ffiliated), provid informati	for the table belo	ow.	L
	1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	Registered W	5 Investment Mar Agreement (IN		
			A 4				
	Does the reporting entity have any diversified mutu Exchange Commission (SEC) in the Investment Con-			ding to the Securities and	Yes []	No] 0
	If yes, complete the following schedule:		1				
	I CUSIP#	2 Name of Mutual Fund	Boon djusted	Carrying Value			
	29.2999 TOTAL						
	For each mutual fund listed in the table above, comp	elete the following schoole:					
	1 2		J.F. J.	4			
	Name of Mutual Fund Name of Signifi (from above table) of the Mutu		al Fund's Carrying Value the Holding	Date of Valuation			
	(Iran accordance)						
	Provide the following information for all	and y-term bonds and all prefe		31	nt value for fair val	ie.	
		(Admitted)	ove	sess of Statement er Fair Value (-), Fair Value over			
		lue Fair	Value	Statement (+)			
	30.1 Bond						
	30.1 Bond 30.2 Prefer ocks 30.3 Totals		1/				
	30.2 Prefer Scks 30.3 Totals	ing the fair values:					
	30.2 Prefers Scks 30.3 Totals Describe the methodized in determine	ing the fair values:					
	30.2 Prefers Scks 30.3 Totals Describe the methodized in determine	by a broker or custodian for any o	of the securities in Schedul	e D?	Yes []	No	
	30.2 Prefers Scks 30.3 Totals Describe the metric adjized in determine Was the te used to calculate fair value determine If the answer to 31.1 is yes, does the reporting en For all brokers or custodians used as If the answer to 31.2 is no, describe the reporting en Schedule D:	by a broker or custodian for any o tity have a copy of the broker's a pricing source? tity's process for determining a re	of the securities in Schedul or custodian's pricing pe liable pricing source for pe	e D? olicy (hard copy or	Yes []	No No	
	30.2 Prefers Scks 30.3 Totals Describe the metric adjized in determine Was the te used to calculate fair value determine If the answer to 31.1 is yes, does the reporting en For all brokers or custodians used as If the answer to 31.2 is no, describe the reporting en Schedule D:	by a broker or custodian for any of titly have a copy of the broker's a pricing source? tity's process for determining a re	of the securities in Schedul or custodian's pricing po- liable pricing source for pr	e D? olicy (hard copy or urposes of disclosure of fair valu	Yes []	No	[]

- By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

 a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - The insurer has an actual expectation of ultimate payment of all contracted interest and principal,

Has the reporting entity self-designated 5GI securities?



- By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
 - a. The security was purchased prior to January 1, 2018.
 - The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRS whom on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?



- OTHER
- 35.1 Amount of payments to Trade associations, service organizations and statistical or Rating Bureaus, if any?
- List the name of the organization and the amount paid if any such payment represented 25% or more of the total payment associations, service organizations and statistical or rating bureaus during the period covered by this statement. 35.2

. 1	
Name	Amount
	5
	S
	S
	S

- 36.1 Amount of payments for legal expenses, if any?
- List the name of the firm and the amount paid if any such payment represented 25% or mothe period covered by this statement. ayments for legal expenses during

2 Amount Paid
S
֡

- Amount of payments for expenditures in connection with n ve bodies, officers or departments of government, if any?
- List the name of the firm and the amount paid if any such pays ed 25% or more of the total payment expenditures in connection it during the period covered by this statement. with matters before legislative bodies, officers or departments of go

1	2
Name	Amount Paid
	S
100	S
	S
	9

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	es the reporting entity have any direct Medicare Supp	lement I	nsurance in force?	Yes [] No []
107 (0.00)	es, indicate premium earned on U.S. business only.			5
	at portion of Item (1.2) is not reported on the Medica			5
1.3				
4 Ind	icate amount of earned premium attributable to Cana			
5 Ind	icate total incurred claims on all Medicare Supplement	nt insura	nce.	S
	ividual policies:			
	.61	Most c	urrent three years:	
		1.61	Total premium earned	
		1.62	Total incurred claims	s
		1.63	Number of covered lives	
		All yea	rs prior to most current three years:	
		1.64	Total premium earned	s
		1.65	Total incurred claims	s
		1.66	Number of covered lives	
7 Gro	oup policies:			
		Most c	urrent three years:	
		1.71	Total premium earned	s
		1.72	Total incurred claims	\$
		1.73	Number of covered lives	
		All yea	urs prior to most current three year :	
		1.74	Total premium ear	S
		1.75	Total incurred claims	S
		1.76	Number of covered lives	
		2.2 Pr 2.3 R	emium Nicrator \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	-
		2.6	serve Ratio 4/2.5)	The second of th
	es the reporting entity issue both participating and no		pol es?	Yes [] No []
lf y	es, state the amount of calendar year premiums writte			6
		3.21	Participating policies	S
3 023		3.22	Non-participating policies	7
	Mutual reporting entities and Reciprocal Exchan	only:		W
	es the reporting entity issue assessable	1		Yes [] No []
	es the reporting entity issuergon-asse sable police?	27/	V. L. Charles Color V. L. Maria	Yes [] No []
	ssessable policies are issed, what is be extent of the			s
	al amount of assessments per order to be and of Reciprocal Exchanges On a.	auring th	e year on deposit notes or contingent premiums.	3
				V 1 1 N- 1 2
	es the exchange appoint local agent es, is the combission paid:			Yes [] No []
2 If y	es, is the confirmasion pand:	5.21	Out of Attorney's-in-fact compensation	V 11 N- 1130411
		5.22	As a direct expense of the exchange	Yes [] No [] N/A []
3 Wh	at expens Exchan not paid out of the c		tion of the Attorney-in-fact?	Yes [] No [] N/A []
wn		1.7	tion of the Attorney-in-fact?	
. Alleri	any A mey-in-fact ompensation, contingent on fu			Yes [] No []
			t of certain conditions, been deterred?	

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 work compensation contract issued without limit of loss:	ers*
6.2		lting
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss ari from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?	sing
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estim probable maximum loss attributable to a single loss event or occurrence?	
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	
7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provement with the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an ago any similar provisions)?	it of res [] No []
7.2	If yes, indicate the number of reinsurance contracts containing such provisions.	
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applied to limit provision(s)?	ting Yes [] No []
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in who is no part, from loss that may occur on this risk, or portion thereof, reinsured?	
8.2	If yes, give full information	
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contract, with the core reinsure or its affiliates which during the period covered by the statement: (i) it recorded a positive or negative underwriting sult grow that of of prior year-surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and assess exports reserves ceded gre than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as an surance of not as a deposit; and (iii) contract(s) contain one or more of the following features or other features that would have similed subtractions.	-end eater
	 (a) A contract term longer than two years and the contract is noncancellable by the long is given during the contract term; 	
	(b) A limited or conditional cancellation provision under which cancellation triggers ligation the reporting entity, or an affiliat	e of
	the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an analyse of the sinsurer;	
	 (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance coptest, whether conditional or not, except for second to the conditional or not. 	auch
	provisions which are only triggered by a decline in the credit states of the ter	acii
	 (e) A provision permitting reporting of losses, or payment of losses, less frequency than a quarterly basis (unless there is no actiduring the period); or 	vity
	(f) Payment schedule, accumulating retentions from multiple are or a features inherently designed to delay timing of reimbursement to the ceding entity.	the Yes [] No []
9.2	Has the reporting entity during the period covered by the seement ceded a risk under any reinsurance contract (or under multiple contraining with the same reinsurer or its affiliates), for which, during the period covered the statement, it recorded a positive or negative underwriters that 5% of prior year-of surplus as regards a lively holders or it protect calendar year written premium ceded or year-ond and loss expense reserves ceded greater than 5% of prior year of surplus arrangements or to captive insurance companies that are directly of the controlling, controlled by, or under common control with (i) or more unaffiliated policyholders of the reporting entity, or (ii) ociation of which one or more unaffiliated policyholders of reporting entity is a member where:	acts ting loss ling one the
	(a) The written premium ceded to the reinsurer y the reporting entity or its affiliates represents fifty percent (50%) or more of the endirect and assumed premium written by the surer based on its most recently available financial statement; or	itire
	(b) Twenty-five percent (25%) or more of the write premium ceded to the reinsurer has been retroceded back to the reporting entity of	
0.2	affiliates in a separate reinsurance	Yes [] No []
9.3	If yes to 9.1 or 9.2, please provide the flowing immation in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (a) The aggregate financi statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income	
	(b) A summary of the rein the contract whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and	•
	(c) A brief discussion of my pent's cobjectives in entering into the reinsurance contract including the economic purpose to achieved.	o be
9.4	Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R—Property and Casualty Reinsurance, has the report entity ceded any the under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period cover by the financial state upt, and either:	ting ered
	 (a) Accounted for in contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and deposit under general accepted accounting principles ("GAAP"); or 	as a
	(b) Accounted to a contract as reinsurance under GAAP and as a deposit under SAP?	Yes [] No []
9.5	If yes to 9 (explain in Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is tree Generally (GAAP and SAP.	ated
9.6	The porting stity is a mpt from the Reinsurance Attestation Supplement under one or more of the following criteria: (a) critic and utilize reinsurance; or,	Yes [] No []
	(b) The ity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation	11 1011
1	or (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an	Yes [] No []
10	attestation supplement.	Yes [] No []
10.	Proporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to which the original entity would have been required to charge had it retained the risks. Has this been done?	that Yes [] No [] N/A []

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

11.1	Has the reporting entity guaranteed policies issued by any other	entity and now in force:	Yes [] No []
11.2	If yes, give full information		
12.1	그 사용 바로 가로 가는 사람들이 되었다. 그 사람들은 사람들이 되었다면 하는데 되었다면 하는데 되었다면 하는데 되었다면 하는데 되었다면 하는데 하는데 하는데 되었다면 하는데	n insurance contracts on Line 15.3 of the asset schedule, Page 2, state the	
	12.11	Unpaid losses	,
	12.12	Unpaid underwriting expenses (including loss adjustment expenses)	5
12.2	Of the amount on Line 15.3, Page 2, state the amount that is secu	red by letters of credit, collateral and other funds?	5
12.3	If the reporting entity underwrites commercial insurance risks accepted from its insureds covering unpaid premiums and/or unp	, such as workers' compensation, are premium notes or promosory not aid losses?	Yes [No [] N/A []
12.4	If yes, provide the range of interest rates charged under such not	es during the period covered by this statement:	
	12.41	From	%
	12.42	To	%
12.5	Are letters of credit or collateral and other funds received fror promissory notes taken by a reporting entity, or to secure any olosses under loss deductible features of commercial policies?	n insureds being utilized by the reporting entity to secure nium no f the reporting entity's reported direct unpaid loss reserves, in a ling unpaid	Yes [] No []
12.6	If yes, state the amount thereof at December 31 of current year:		
	12.61	Letters of Credit	s
	12.62	Collateral and other funds	\$
13.1	Largest net aggregate amount insured in any one risk (excluding	workers' compensation):	s
13.2	Does any reinsurance contract considered in the calculation of reinstatement provision?	this amount include an aggregate limit of revery with at also including a	Yes [] No []
13.3	State the number of reinsurance contracts (excluding individual	acultative risk certificates, but in ding lative pograms, automatic	
	facilities or facultative obligatory contracts) considered in the ca	culation of the amount.	
14.1	Is the reporting entity a cedant in a multiple cedant reinsurance of	ontract?	Yes [] No []
14.2	If yes, please describe the method of allocating and recording rei	nsurance among the ced	
14.3	If the answer to 14.1 is yes, are the methods described in item 14		Yes [] No []
14.4	If the answer to 14.1 is yes, are the methods described in 14.2		Yes [] No []
14.5	If the answer to 14.4 is no, please explain:		res [] No []
1702	If the answer to 14.4 is no, prease explaint.		
15.1	Has the reporting entity guaranteed any financed premius coor	nts?	Yes [] No []
15.2	If yes, give full information		200
16.1	Does the reporting entity write any warranty business?		Yes [] No []
	If yes, disclose the following information for each the following	ng types of warranty coverage:	
		2 3 4 5	
	Direc sses	Direct Losses Direct Written Direct Premium Direct Premium	
	16.11 Home S	Unpaid Premium Unearned Earned S	
	16.12 Products S	S S S S	
	16.13 Automobile S	S S S S	
	16.14 Other*	S S S	

the reporting entity?

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [] No [] Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption: 17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance Unfunded portion of Interrogatory 17.11 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 17.14 Case reserves portion of Interrogatory 17.11 17.15 Incurred but not reported portion of Interrogatory 17.11 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 [] 18.2 If yes, please provide the amount of custodial funds held as of the reporting date. 18.3 Do you act as an administrator for health savings accounts? Yes [] No [] 18.4 If yes, please provide the balance of the funds administered as of the reporting date. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing b Yes [] No [] 19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business is clear two states?
 19.1 If no, does the reporting entity assume reinsurance business that covers risks resident at least the other than the state of domicile of the control of

Yes [] No []

FIVE-YEAR HISTORICAL DATA
Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

1.		2018	2017	2016	2015	2014
	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)		***************************************	:**************************************	:numummonnum:	**************
4.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
1.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5.	Nonproportional reinsurance lines (Lines 31, 32 & 33)	280000000000000000000000000000000000000			same dance	-
	Total (Line 35)		***************************************	100111011111111111111111111111111111111		
3.	Net Premiums Written (Page 8, Part 1B, Col. 6)	344400644403314440	. 10.0000000000000000000000000000000000	***************************************		******************
7.	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)	707777778777777777	1000.000.000.000.000.000.00			P
8.		****************	***************************************			***************************************
).	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
	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)	***************************************	***************************************	Vanana Va		
	Nonproportional reinsurance lines (Lines 31, 32 & 33)			-		
2.	Total (Line 35)					***************************************
	Statement of Income (Page 4)				-	
3.	Net underwriting gain (loss) (Line 8)	34449444444444444		Common Co		1400031(0)11111
4	Net investment gain (loss) (Line 11)		: 1100001111111111111111111111111111111			***************************************
5.	Total other income (Line 15)					
5.	Dividends to policyholders (Line 17)	***************************************				
7.	Federal and foreign income taxes incurred (Line 19)				***************************************	
3	Net income (Line 20)					
	Balance Sheet Lines (Pages 2 and 3)					
	Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)					
				***************************************	100000000000000000000000000000000000000	***************************************
	Premiums and considerations (Page 2, Col. 3)					
	20.1 In course of collection (Line 15.1)					
	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)	Kannana (1)				
	Losses (Page 3, Line 1)			энинининини		
	Loss adjustment expenses (Page 3, Line 3)					
	Unearned premiums (Page 3, Line 9)		·			
	Capital paid up (Page 3, Lines 30 & 31)					201011111111111111111111111111111111111
	Surplus as regards policyholders (Page 3, Line 37)					***************************************
	Cash Flow (Page 5)					
9	Net cash from operations (Line 11)					
	Risk-Based Capital Analysis					
	Total adjusted capital					
	Authorized control level risk-based capital	3,000,000				
	Percentage Distribution of Cash, Cash Equivalents and Invest Assets		Particular de la constitución de	3.22.11.22.22.22.22.22		
	(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100	W				l
).	Bonds (Line 1)					l
	Stocks (Lines 2.1 & 2.2)	202102101111021102101			***************************************	************
	Mortgage loans on real estate (Lines 3.1 and 3.2)	>>>00000000000000000000000000000000000	340000000000000000000000000000000000000			***************************************
	Real estate (Lines 4.1, 4.2 & 4.3)	***************************************				
	Cash, cash equivalents and short-term investments (Line 5)		***************************************	***************************************		
	Contract loans (Line 6)					
	Derivatives (Line 7)	***************************************			***************************************	
	Other invested assets (Line 8)	***************************************				**********
	Receivables for securities (Line 9)		2036031104100310111	энининания	:00000000000000000000000000000000000000	***************************************
	Securities lending reinvested collateral assets (
	Aggregate write-ins for invested assets (Line 1)					
		100.0	100.0	100.0	100.0	100.0
	Cash, cash equivalents and invests assets (I e 12)	100.0	100.0	100.0	100.0	100.0
	Investments in Parent, Subsidial Analytes					A 1 T 2 T 2 T 2 T 2 T 2 T 2 T 2 T 2 T 2 T
	Affiliated bonds, (Sch. D, Summary 12, Ce	****************	***************************************		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	************
	Affiliated preferred stocks (Sch. D, Sunin L. Line 18, Col. 1)					
	Affiliated bonds, (Sch. D. Summary 12, Co. Affiliated preferred stocks (Sch. D. Summary Line 18, Col. 1) Affiliated common stocks (Sch. D, Summary line 24, Col. 1)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				***************************************
	Affiliated short-term inhestments (subtotals inch and in Schedule DA Verification					
	Col. 5, Line 10)					
10	Affiliated mortgage loan al estate	20101010111101111101			(0110101101011010101	200000000000000000000000000000000000000
Š	All other affiliated					427/03/4/2009
	Total of above Line 17.					
	Percentage of in strents in p ent, subsidiaries and affiliates to surplus as regards		2			
3	Total investment parent in ded in Lines 42 to 47 above					***************************************
).).	Parantage of in the tracts in a last subsidiaries and affiliates to mention as					

FIVE-YEAR HISTORICAL DATA (Continued)

		2018	2017	2016	2015	5 2014
	Capital and Surplus Accounts (Page 4)				-	
51.	Net unrealized capital gains (losses) (Line 24)					
52.	Dividends to stockholders (Line 35)		***************************************			(Allah. 1)
53.	Change in surplus as regards policyholders for the year (Line 38)					
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	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)					
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)		************			
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					7
57.	All other lines		1			
	(Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					×
58.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59.	Total (Line 35)					
	Net Losses Paid (Page 9, Part 2, Col. 4)		1	1		
60.	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)	***************************************			**********	
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)			<u> </u>		
63.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)				300000000000000000000000000000000000000	~
64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)		- 10	:106/6/65/66/6660	STATE OF THE STATE	7.3454009000000000000000000000000000000000
65.	Total (Line 35)	·				
	0 4 9					
	Operating Percentages (Page 4)	W W	-			
	(Item divided by Page 4, Line 1) x 100.0					
66.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67.	Losses incurred (Line 2)					
68.	Loss expenses incurred (Line 3)					
69.	Other underwriting expenses incurred (Line 4)					***************************************
70.	Net underwriting gain (loss) (Line 8)	V		.11111111111111111111111111111111111111	.011010101101	
	Other Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4+5-15 and edby P					
	Part 1B, Col. 6, Line 35 x 100.0)			***************************************		
72.	Losses and loss expenses incurred to premiums earned (Page Lines 2+5 ided by ge 4,					
	Line 1 x 100.0)			:trissosommi	mmonner-	zmmannan
73.	Net premiums written to policyholders' surplus (Page 8. JB, Col. 6, Line divided by	100000000000000000000000000000000000000		No.	300000000000000000000000000000000000000	2
13.				l		***************************************
	Page 3, Line 37, Col. 1 x 100.0)	*************	***************************************	***************************************	**********	2-20-20-00-00-00-00-00-00-00-00-00-00-00
	Page 3, Line 37, Col. 1 x 100.0) One-Year Loss Development (\$000 omitted)	*************	***************************************	***************************************	***************************************	
74.		***************************************	***************************************	***************************************	***************************************	
74.	One-Year Loss Development (S000 omitted) Development in estimated losses and loss expenses ourred prior to current year (Schedule P,					
	One-Year Loss Development (S000 omitted) Development in estimated losses and loss expenses ourred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)	***************************************	*************	***************************************		***************************************
74. 75.	One-Year Loss Development (S000 omitted) Development in estimated losses and loss expenses ourred prior to current year (Schedule P,					
	One-Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses curred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses curred to policyholders' surplus of prior	***************************************		***************************************	***************************************	
	One-Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses curred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)	***************************************		***************************************	***************************************	
75.	One-Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses curred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses curred to policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 21, 1 x 100.0) Two-Year Loss Development (\$000 of tted) Development in estimated loss and loss expenses in arred 2 years before the current year and prior year (Schedule P, Part 2-Stangery, 12, Col. 12)	***************************************		***************************************	***************************************	
75.	One-Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses ourred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses ourred to policyholders' surplus of prior year-end (Line 74 above divided by Page 4, Line 21, 1 x 100.0) Two-Year Loss Development (\$000 of sited)					

of second prior year-end (Line 76 about	divided by Page 4, Line 21, Col. 2 x 100.0)	255-97				
	at years of this exhibit been restated due to a merg	er in compliance wit	th the disclosure requir	rements of	Yes []	No []

Affix Bar Code Above

NAIC Company Code

LOSSES (Statutory Page 14)	DURING THE YEAR
EXHIBIT OF PREMIUMS AND LOSSES (Statut	BUSINESS IN THE STATE OF
4	

		Callo.	Membership Fees.	m	4	•	9	1	×	•	01		13
	Line of Business			Dividends Paid or Credited to Policyholders on Dreet Business	Direct Uncarrod Premium Roserves	Direct Losses Paid (deducting	Direct Losses Incurred	Direct Losses. Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cest Containment Expense Untaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
-													
N.F	Albed Lines												
1.6				4									
2													
21		- Incommendation	-										-
eri e	Farmowners Multiple Peril.	İ											
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22	2 Commercial Multiple Peril (Liability Position)	D. CONSTRUCTOR	Chinamaconnac		-	SANGE AND AND AND AND AND AND AND AND AND AND	THAT SHANNING THE	AAAA Sandada Camara	Take Salah Salah Salah	S. C. A. C.	TO COMPANY AND AND AND AND AND AND AND AND AND AND	WAS A STANDARD WAS A STOOL	
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93	Non-Cancelable A&H (b)				· · · · · · · · · · · · · · · · · · ·	\							
16.4	A Non-Renewable for Stated Bosons Order (b.)				Annimini manimini		THE OWNER WHEN THE PARTY NAMED IN						
15.5													
15.6	 Medicare Title XVIII Exempt from State 	The second second	A STATE OF THE STA										
	Taxes or Fees	-			1								
1.0	All Other A&H (b)					101101111111111111111111111111111111111							1
	Premium					•	4	1					
16.													
17.1	Other Liability—Occurrence			***************************************	***************************************			-	***************************************	Section of the last of the las	The state of the s		
17.7	2 Other Liability—Claims-Mode.												
31	Penderal Infelia		.0.00mmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmmm				- Charles and Char		4				
161	Private Passenger Auto No-Fault (Personal							1					
	Injury Protection)							-					
192	2 Other Private Passenger Auto Liability												
199	Postocianis Auto No-Fault (Personal injury Postocianis	2006/2000 PG		T. E. S. S. S. S. S. S. S. S. S. S. S. S. S.	V. 2622/V.S.m. 24/2/23	WATER TANKS AND THE	THE STATE OF THE STATE OF	>		SAME AND THE		ANT A PROCESSION	
19.4													
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38.	TOTAL (a)		THE RESERVE OF THE PERSON OF T	The state of the s				The second secon	A CHARLES OF THE PARTY OF THE P	1		A CONTRACTOR OF THE PARTY OF TH	
DET	DETAILS OF WRITE-INS												
3402	-									1			
340	K.											7	
349	3498. Summary of remaining write-ins for Line												
0000	34 from overflow page												İ
343	 TOTAL (Lines 3401 through 3403 plus 3409 (1 for 34 shows) 												

D/C

SCHEDULE F – PART 1
Assumed Reinsurance as of December 31, Current Year (\$000 Omitted)

Conjugati	NAIC Company Code Rei Irod			9	7	oc							
Cole (1) Sept. 1 Contained	Code Rei rei	1		Paid Losses and Loss	,	8	Contingent	Assumed		Funds Held By or Deposited With	Letters	Amount of Assets Pledged or Compensating Balances to	Amount of Assets Pledged or
		July Gon	Assumed	Adjustment Expenses	Known Case Losses and LAE	Cols. 6+7	Commissions Payable	Premiums Receivable	Uncarmed	Companies	Or Credit Posted	Secure Letters of Credit	Collateral Held in Trust
		and the second		***************************************	***************************************	***************************************							
					***************************************	Standard objects the standard of the standard	STREET, STREET	***************************************	210101010101010101010101010101010101010		***************************************	(11111111111111111111111111111111111111	
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			Tolling the state of the state	Tanti garante and a		Management and American	William Charles and Company				· · · · · · · · · · · · · · · · · · ·	***************************************	
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	distributed (in process of the contract of the						1	***************************************			***************************************		
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		Commence and commence of the c			S WASSERSON CO. STATES		4	4	15700 1000 Period 1200 1	- 17 CONTROL TO THE PARTY OF TH	AVERAGE MANAGEMENT PROPERTY.	The second section of the section of the section of	State of the state

P/C

SCHEDULE F - PART 2
Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

Number Code Company Contract Premium Comits Code Company Code Company Contract Code Code Company Code Code Code Code Code Code Code Code	1	2	3	4	5	6
Number Code Company Contract Premium Comium		NAIC	Name	Date		
0199999 Total Reinsurance Ceded by Portfolio	ID	Company	of	of	Original	Reinsurance
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SCHEDULE F – PART 3
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

	-	2	9				Reinstr	Reinstrance Recoverable On	erable On				91	Reinsurance Payable	c Payable	-
)		1		7	×	6	01	11	12	13	14	15		17	18	Net A
of surer	Do mary Jurisdiction	ecial Code	Reinsurance Premiums Ceded	Paid	Paid	Known Case Loss Reserves	Known Case LAE	IBNR Loss	IBNR LAE Reserves	Unearned	Contingent	Cols. 7 through 14 Totals	Amount in Dispute Inchded in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Reins Cols.
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SCHEDULE F – PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Credit Risk)

ſ			0	Ment		35	26	.27				Codos	Coded Reinstannee Credit Risk	fit Risk			
		-	11	23	24	3/5			28	29	30	33	33	33	34	35	36
				X							Reinsurance Payable &	ă		Stressed Net		Collateralized Recoverables (Col. 32 *	Credit Risk on Uncollateralized Recoverables
Number From	Name of Reinsurer	Muluple Beneficiary	Letters of	Assump or Confirming Band Reference	Single Beneficial Tr O	Payables &	Net Reconstrable Net of Funds Held &	Applicable Sch. F Penalty	Total Amount Recoverable From Reinsurers Less Penalty	Stressed Recoverable (Col. 28 *	Funds Held (Cols. 17+18+20; but not in excess of	Stressed Net Recoverable (Cols. 29 -	Total Collateral (Culs. 21 + 22 + 24, not in Excess of	Recoverable Net of Collateral Offsets (Colx 31-	Reinsurer Designation	Factor Applicable to Remaurer Designation Equivalent in	(Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in
04.7	From Cot. 3	Trusts	Credit	Number	BKral	-81	Constant	(COL. (8)	(Cols. 13 - 27)	120%)	Cdl. 29)	30).	Col. 31)	32)	Equivalent	Col. 341	Col. 340
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SCHEDULE F – PART 3 (Continued)
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Aging of Ceded Reinsurance)

			Cinstrate	Acoverable on Paid Losses and Paid Loss Adjustment Expenses	id Losses and P.	aid Loss Adjustm	sent Expenses		44	45	46	47	48	46	- 50	51	52	53
		37 1		-	Overdue	Checopy and the control of the	Same series	43	Total	Recoverable	ų.	Recoverable		Y.	2	360	8	
			38	100	05	-41	42		Recoverable on Build Lorson	on Paid Losses	Total	on Paid Losses			Percentage of			
,				4			Total	Total Due Cols. 37 + 42	_		841	90 Days Past Due Amounts Not in Discuste			Amounts More Than 90 Days Overdue Not	Percentage More	Is the Amount	Amounts in Col. 47
From From Col. 1	Name of Reinsterr From Col. 3	Ourrort	1 - 29 Days	30 - 90 Days	91-120 D	or 120	Cols, 38 + 39 + 40 + 41			Included in Cols. 40 & 41	Not in Dispute (Cols 43 - 44)	(Cols. 40 + 41 - 45)	Received Prior 90 Days	Overdue Col. 42/Col. 43	(Col. 47/(Cols. 46 + 48))	Overdue (Col. 41/Col. 43)	Than 20%? (Yes or No)	Values Less Than 20% in Col. 50
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SCHEDULE F – PART 3 (Continued)
Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Provision for Reinsurance for Certified Reinsurers)

09	Provison for Overdue Reinsumnee Ceded Ro Certified Processing Conferences of [Code 2 + Code 5] for Code Robert Description of Education (Code Code 2) for Code Robert Description (Code Code Code Code Code Code Code Code		
Contract Endoor O	68 20% of Amount in Col. 67		
Cosmission (Cost Star Not. Otherwise Enter C	67 Net Unsecured Recoverable for Which Credit as Allowed (Col. 53 - Col. 66)		
Commission of	Forming Collineral Provided (Col. 20 + Col. 22 + Col. 23 + Col. 24 + Col. 24 + Col. 24 + Col. 25 + Col. 26 + Col. 26 + Col. 26 + Col. 26 + Col. 26 + Col. 26 + Col. 26 + Col. 26 + Col. 27		
39	of able onses Over Past ounts spute 20%)		100
139	Provision for Reinstumoc with Certified Reinsurers Due to Collaneral Deficiency (Col. 19 – Col. 63)	.50	The same of
urmocc 63	Amount of Credit Allowed for Net Recoverables (Col 57+fCal. 58 * Col. 61)		A 885
Provision for Certified Rensurance	20% of Recoverable on Paid Losses & LAE Over 90 Days Past in Disputs in Disputs (Col. 45 * 20%)		
Provision f	hedit on Net ables 1 to nents / Col.		XXX
99	Percent of Collateral Povaded for Net Recoverables Subject to Collateral Requirements ([Col. 20+Col. 21+Col. 22+ Col. 22+ Col. 22+ Col. 24-Col.		XXX
03	Dollar Amount of Collateral Required (Col. Se * Col. S9)		
33	3 to 0 to 1		
43	ohe stalico stalico 20 July 20		
75	Percent Collineral Required for Full Credit (0)		
45	31		
13	11.9		
	Name of Reinurer From Col. 3		
	ID Number From Col. 1		adopped Totals

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

Control of the Control of Control of Short Control of S			02	Provision for Unau	Provision for Unauthorized Reinsurance	Provision for Overdue	Provision for Overdue Authorized Remsurance		Total Provision for Reinstrance		
	(D Number From Col. J	Name of Reinster From Cd. 3	20% of Recoverable on Pol. Linease, it. Are Over (10) Day Fee Daw Amuston (10) Are See Day (10) Are Amuston (10) Are See Day (10) Are Amuston (10) Are See Day (10) Are Amuston (10) Are See Day (10) Are Amuston (10) Are See Day (10) Are Amuston (10) Are Amuston (10) Are Amuston	71 All Non for China and China Chin	Provision for Overdae Retinuture of fund Unablidation Retinuture and Announts in Dispare (Cel.) 70 + 20% of the Annount in Cel. 16)	Complex If Complex If Complex If Co. 23 = "Yes"; Obervice Enter 0 20% of Recoverable con baid Losses & LAG Over 190 Days Ben Dock mounts Not in Dispute = 20% O Announts in Dogute (Col. 47 = 20%)	74 Complete If Complete If Construction Code, 22 = 70x ² , Otherwise Enter O Creater of 20x or Net Recoverable Net of Transh 1868 & Collineari, or 20x of Collineari, or 20x of Collineary Day, Patt Day (Creater of Code, 20x or 30x or	75 Provision for Amounts Coded to Authorized Eschioscory (Cols, 23 + 74)	76 Provision for Amount Codel to Unauthersted Reinsurges (Codel 71 + 72 Noi in Excess (Codel 71 + 72 Noi in Excess	Provisions for Antourts (*Coded to Certificed Resistances) (*Code, 64 * 69)	78 Total Provision for Reference (Cole, 75, 76, 47)
	From Col. I	ramcas. 3	(507.47.2039)		Amount in Cot. 16)	(COL 45 - 20%)	[Cos. 40 +41] * 20%	(Cols. 73 + 74)	01 C08. 123	(C08, 64 + 69)	(CoS: 73 * 36 * 7.)
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SCHEDULE F – PART 4
Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (5000 Omitted)

	100	3	7	\$
Issuing or Confirming Bank		×)
Reference Number Used)	American Bar Associat		
in Col. 23 of Sch F Part 3	Letters of Credit Code	(ABA) ^r uting N aber	Issuing or Confirming Bank Name	Letters of Credit Amount
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Total				
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SCHEDULE F - PART 5 Interrogatories for Schedule F, Part 3 (000 Omitted)

isional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excer-Report the Ą.

3 Ceded Premium

Name of cinsurer

edule F art? Column 15, due from any one reinsurer (based on-the total recoverables, Schedule in a digital attended in the recoverables are due from an affiliated insurer. Report the five largest reinsurance recoverables reported in S. e. F. Part 3, Line 9999999, Column 15, the amount of ceded premi B.

4	Affiliated	Yes[] No[]	Yes[] No[]	Yes[] No[Yes[] No[]	Yes[] No[
3	Ceded Premiums	•					Annual Contract
	Total scov ables						
	Name of Reinsurer						
		9.	7.	%	9.	10.	

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

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SCHEDULE F – PART 6
Restatement of Balance Sheet to Identify Net Credit for Reinsurance

		I As Reported (Net of Ceded)	2 Restatement Adjustments	Restated of Ceded)
ASSET	<u>rs</u> (Page 2, Col. 3)		4	
1.	Cash and invested assets (Line 12)			
2.	Premiums and considerations (Line 15))
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			
6.	Net amount recoverable from reinsurers			
7.	Protected cell assets (Line 27)		\	
8.	Totals (Line 28)		/	
LIABI	LITIES (Page 3)	2		
9.	Losses and loss adjustment expenses (Lines 1 through 3)			
10.	Taxes, expenses, and other obligations (Lines 4 through 8)			
11.	Unearned premiums (Line 9)			
12.	Advance premiums (Line 10)	/		
13.	Dividends declared and unpaid (Line 11.1 and 11.2)			2-11.
14.	Ceded reinsurance premiums payable (net of cedia commissions) (the 12)			
15.	Funds held by company under reinsurance treaties (Line			
16.	Amounts withheld or retained by company for account of others (Line 14)	***************************************	S	
17.	Provision for reinsurance (Line 16)			
18.	Other liabilities			
19.	Total liabilities excluding protecte, cell busing a (Line 26)			
20.	Protected cell liabilities (L. & S)			
21.	Surplus as regards policyholders (Ln. 37)		xxx]
22.	Totals (Line 38)			

NOTE: Is the paratement this	s exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance
or pool g arranger into	?? Yes[] No[]
li give plana	tion:

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

																				_																						
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Non-Renewable for Stated Reasons Only	13 Amount							***************************************		***************************************						***************************************			***************************************													1		5	•				,			
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Collectively Renewable	7 Amount	ANALYSIS OF UNDERWRITING OPERATIONS		***************************************				***************************************	Sanders Summer de State de la Contraction de la	***************************************													4																			
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Credit A&H (Group and Individual)	5 Amount	PART 1 - AN		***************************************			***************************************	101101010101011111111111111111111111111		(11011111111111111111111111111111111111				2							stained by agent	NT SE																				
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Group Accident and Health	3 Amount					·	-	***************************************		1						***************************************			110111111111111111111111111111111111111		ership and oth	60																				
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Total	l Amount	(,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	morphonostones	and the second s	***************************************				2					***************************************		reported as "Contract, membership and other fees retained by agents."																					
			Premiums written	Incurred claims	Lost contamment expenses	expenses (Lines 3 and 4)	Increase in contract reserves	Commissions (a)	Other general insurance expenses	Total other commercial incomes	Aggregate write-ins for deductions	Gain from underwriting before	dividends or refunds	Gain from underwriting after dividends or refunds	DETAILS OF WRITE-INS						Includes Srep																					
			0	m'	i vi		6	r's	000	6 9	=	12.	2	4	DET	1101	1103.	1198	1199.		(a)																					

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SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	1	2	er:	7			Other Individual Contracts	20	
		Group	Credit A&H		80	9	7 Non-Renewable for	8	6
	Total	Accident and Health	(Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Stated Reasons Only	Other Accident Only	All Other
		PART 2 -	RESERVES AN	PART 2 - RESERVES AND LIABILITIES					
A. Perunium Receves: 2. Advance peruniums 3. Reserve for inter readils. 4. Total perunium reserves, energy spart. 5. Indal perunium reserves, prior year. 6. Interses in total premium reserves 6.					Hotel teacher and party an				
B. Contract Reserves. Additional reserves (a)	Andreas Property and Property a		de constantination de la constantination de		Helder (manufacture) broads		001111111111111111111111111111111111111	011(01101010101111010101111111	
C. Claim Reserves and Liabilities: 1. Total current year	Annexe Annexe (and (an)		***************************************						
	PART 3 - TEST OF	L	OR Y. R'S CLAI	M RESERVES A	R'S CLAIM RESERVES AND LIABILITIES	S			
Claim paid during the year: 1.1 On claims incurred prior to current year 2.2 On claims incurred during current year 2.1 On claims incurred during current year 2.1 On claims incurred prior to current year 2.2 On claims incurred prior to current year 3.3 On claims incurred prior to current year 3.4 Line 1.1 and 2.1. 3.2 Claim reserves and liabilities. December 31, prior year									
1		P/	PART 4 REIX	URAN					
A. Reinsurance Assumed: 1. Premiums written 2. Premiums earned 3. Incurred elains. 4. Commissions		mentalistation (nation)		A CONTRACTOR OF THE PARTY OF TH	Personal Company of the Company of t				
B. Reinsarunee Ceded: 1. Premiums writer 2. Premiums warned 3. Incurred eliums. 4. Commissions			**************************************	Control of Control of	man function of the control of the c			00 0000	

⁽a) Includes S premium deficiency reserve.

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SCHEDULE H - PART 5 - HEALTH CLAIMS

		1	2	3	4
		Medical	Dental	Other	Total
A.	Direct:				
	1. Incurred Claims				
	2. Beginning claim reserves and liabilities				
	3. Ending claim reserves and liabilities				V
	4. Claims paid		***************************************		
B.	Assumed Reinsurance:				7
	5. Incurred Claims				
	Beginning claim reserves and liabilities		***************************************	A	/
	7. Ending claim reserves and liabilities				
	8. Claims paid				
C.	Ceded Reinsurance:				
	9. Incurred Claims				
	10. Beginning claim reserves and liabilities				
	11. Ending claim reserves and liabilities				***************************************
	12. Claims paid	4			
D.	Net:		1		
	13. Incurred Claims				
	14. Beginning claim reserves and liabilities				
	15. Ending claim reserves and liabilities			5-00211000000000000000000000000000000000	5
	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)

	Pr	emiums Ea	rned				Loss and Loss	s Expense Payn	nents		-	12
	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting Payr	and Other nents	10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1–2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Nev (Cols. 4 - 6 - 7 + 8 - 9)	Che Reported and Assumed
1. Prior	XXX	XXX	XXX		***************************************	200000000000000000000000000000000000000			0.0100.0000.000	***************************************	-	XXX
2. 2009	: menniomene:	360.0000	· · · · · · · · · · · · · · · · · · ·	3167014F040146001 C	-terminonesis	- 2000111132000000111	dontes to remove	*************	01111000000000000	summer and a second sec		XXX
3. 2010					***************************************							XXX
4. 2011		,,,,,,,,,,,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					XXX
5. 2012	3110111001111111			***************************************				+				XXX
6. 2013	***************************************		Terroritanian	announcement .	100000000000000000000000000000000000000		ALTERNATION OF THE PARTY OF THE	100100000000000000000000000000000000000	in the second second			XXX
7. 2014	энтенник	360000000			300000000		*************		011101100000000			XXX
8. 2015	линесонени		2110000120002201	31000333440310007	10000000000	20001110000111000111			011110100000000000000000000000000000000		-	XXX
9. 2016						310000000000000000000000000000000000000				4000000		XXX
10. 2017	344311003314440	-100-00101	1010000011144401144	3100034444310000 °	***************************************	300010000000000000000000000000000000000					-1500110000100000000000000000	XXX
11. 2018											1	XXX
2. Totals	XXX	XXX	XXX			1 3	1			100		XXX

5	Losses U	npaid		Defens	e and Cost C	ontainment Unpa	id	Adjusting a Unpo		2	24	25 Number of
Case	Basis	Bulk + I	BNR	Case Ba	sis	Bulk + I	BNR	21	22	Carlot	Total Net	Claims
Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	Direct and Assumed	20 Ceded	Assun	Ced	Salvage and Subrogation Anticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
 	- communicati		reconnect.		monne	I manual framework			100	name of the same		XXX
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 								<u> </u>	************			XXX
 										*************		XXX
			0 0	- 1								XXX

	Losses and	Total Loss Expens	es Incurred	Loss and (Incur	Loss Expense P red/Pro	ercentage	Nontabular	Discount	34		ince Sheet fter Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	50 eded	Z	32 Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1	XXX	XXX	XXX	XXX	1000	X	***************************************	destroisment the contract of	XXX		
2	THE STREET, ST			***************************************			300000000000000000000000000000000000000		***************************************		. iconstruentos procursos
3				***************************************		VIII.				***************************************	
4						·					
5		Samueleon.				inimental control		The state of the s			
6	100000000000000000000000000000000000000					***************************************					
7		.,									
8											
9				Access (***************************************				
10 11.		3000000		-	·		***************************************	***************************************		- Announcement	
12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Note: Parts 2 and 4 are gross of all discount including counting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any 3. The tabular discount di



SCHEDULE P - PART 2 - SUMMARY

	9	- 1	NCURRED NET	LOSSES AND	DEFENSE AND	COST CONTAIN	NMENT EXPEN	SES REPORTED	AT YEAR-ENI	(\$000 OMITTE	D)	DEVELO	PMENT
	ars in Which	1	2	3	4	5	6	7	8	9	10	11 One	12 Two
Losse	s Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Year	Year
1.	Prior			***************************************	***************************************		.00000000000000000000000000000000000000	+			******************	************	
2.	2009		***************************************		*****************				***************************************		***************************************	44	
3.	2010	XXX											
4.	2011	XXX	XXX		***************************************			***************************************				41000	
5.	2012	XXX	XXX	XXX	***************************************	***************************************							
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX			34407140444440714				
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX			***************************************			
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	_AXXX	The second second	XXX	XXX

SCHEDULE P - PART 3 - SUMMARY

		CUMULA	TIVE PAID NE	T LOSSES ANI	DEFENSE AN	D COST CON	FAINMENT EX	PENSES REPO	RTED AT YEA	R-FaiD (\$000%)	SUTTED)	11	12
v	ears in Which	1	2	3	4	5	6	7	8			Number of Claims Closed With	Number of Claims Closed Without Loss
	es Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Loss Payment	Payment
. 1.	Prior	000								M	3*430-00141934-0010-	XXX	XXX
2.	2009											XXX	XXX
3.	2010	XXX				- iconnections com-	.iccommonwork		Al Control	monnominos.	тосторого	XXX	XXX
4.	2011	XXX	XXX							A		XXX	XXX
5.	2012	XXX	XXX	XXX								XXX	XXX
6.	2013	XXX	XXX	XXX	XXX					24-00-00-00-00-00-00-00-00-00-00-00-00-00	10000000000000	XXX	XXX
7.	2014	XXX	XXX	XXX	XXX	XXX				/		XXX	XXX
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XX.		11000111110111101	***************************************	XXX	XXX
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XX	XX			XXX	XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XMX .	XX	XX	XXX		XXX	XXX

SCHEDULE P - PART 4 - . MMA .Y

	s investor 3	BU	JLK AND IBNR RI	ESERVES ON NET	LOSSES AND DE	FE' & AND COST	CONTAINMENT	EXPENSES REPO	RTED AT YEAR-E	ND (\$000 OMITTE	D)
	ears in Which es Were Incurred	2009	2010	3 2011	26		6 2014	7 2015	8 2016	2017	10 2018
1.	Prior	***************************************		***************************************				************			
2.	2009	091100000000000000000000000000000000000	3000000000000000	. 400110101110111010101			101110101110110111111111111111111111111	- : +11100141-01011-0111-	-11100-011010-0110-010	(10000000000000000000000000000000000000	**************
3.	2010	XXX									
4.	2011	XXX	XXX				***************************************				***************************************
5.	2012	XXX	XXX	XXX				***************************************		(**************************************	***************
6.	2013	XXX	XXX	XXX	XXX	\					
7.	2014	XXX	XXX	XXX	XXX	XXX	introconvocation remarks		: mmonstanommen	. Danier or or or or or or or or or or or or or	110000000000000000000000000000000000000
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XX	XXX	XXX	XXX	XXX		77.77.77.77.77.77
11	2018	YYY	YYY	YYY		YYY	YYY	YYY	YYY	YYY	000000000000000000000000000000000000000



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

	Pr	emiums Ea	med			N.	Loss and Lo	ss Expense Pa	ments	D 0	3	12
	E	2	3	Loss Pay	ments	Defense Containmer	and Cost nt Payments	Adjusting : Paym		- 10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1-2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct and uned
1. Prior	XXX	XXX	XXX		140004440				**********			A.
2. 2009		*********		3444444444444								
3. 2010	(11111111111111111111111111111111111111		inomeron and i	30071000000	11000000		*************					
4. 2011		*********			50000000	*************						
5. 2012	: executiveces.	000000000000000000000000000000000000000	+++++++++++++++++++++++++++++++++++++++		(90000000000000000000000000000000000000	< ************************************	000400000000000000000000000000000000000	: 1000000000000000000000000000000000000	000000000000000000000000000000000000000			
6. 2013												
7. 2014												
8. 2015				2007110003100		4444000000000444		+	************			/
9. 2016		· · · · · · · · · · · · · · · · · · ·	transiamenta in	***************************************	***************************************	Tarris and Tarris and	A	100000000000000000000000000000000000000	in management of	***************************************		
0. 2017 1. 2018	(10000000000000000000000000000000000000				3444000111		***************************************	***************************************	*******			
2. Totals	XXX	XXX	XXX	13						47406	100	XXX

		Losses	Unpaid		Defens	e and Cost	Containment U	npaid		g & Other paid	23	24	25 Number of
	Case B	asis	Bulk + II	BNR	Case B	asis	Bulk +	IBNR	21	23	100	Total Net	Claims
	Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and A ned	Cede	Salvay and non Anticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
L	000000000000	Jecohern	herennecoher :	343460000	3103160031607	30000000	***************************************	-Donate Distance /		· manmania		Samonanananan S	
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9	************	incomes.		***************************************		********				**********		incommentation	
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	Losses and	Total Loss Expen	ses Incurred		oss Expense P. d/Premiums E			Discount	34		ince Sheet fter Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 eded		Loss	Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
Lamour	XXX	XXX	XXX	XXX	XXX			100000000000000000000000000000000000000	XXX		
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		X									
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$\begin{array}{c} \textbf{SCHEDULE P-PART 1B-PRIVATE PASSENGER AUTO LIABILITY/MEDICAL} \\ \textbf{(S000 OMITTED)} \end{array}$

	F	remiums E	arned	8	- 00	Se i	Loss and Los	ss Expense Pay	ments	75. st	v 3	1.2
	.1	2	3	Loss Pay	ments		and Cost at Payments		and Other nents	10	-11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols.4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct and As sed
1. Prior	XXX	XXX	XXX	10000310003100	intercontent	***************************************	*************	nonstronisted	Homestoonsis	***************************************		XXX
2. 2009								***************************************				
3. 2010	***************************************	***************************************				0.0000000000000000000000000000000000000	***************************************		700001100000		minimum minimum i	
4. 2011			***************************************									
5. 2012	200000000000000000000000000000000000000	>340 FEB 0014 FE	CONTRACTOR CONTRACTOR	nemanacon es	: decomposes:	0100110000000	200000000000000000000000000000000000000	- amazemanear	herent recome.	: management	- Common of	mean meane
6. 2013												
7. 2014												
8. 2015	*************											<u> </u>
9. 2016												Z
10. 2017 11. 2018) 300 (100 (100 (100 (100 (100 (100 (100 (0.00.0000000000000000000000000000000000	: Annother the control of the contro		30000000000			
12. Totals	XXX	XXX	XXX	9	- 1				2	446	100	XXX

		Losses	Unpaid		Defen	se and Cost O	Containment U	npaid	Adjusting Unp	and Other said		24	25 Number of
	Case	Basis	Bulk +	IBNR	Case I	Basis	Bulk +	IBNR	21	22		Total Net	Claims
	Direct and Assumed	14 Ceded	Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and A ged	Cedeu	Salvage and on Anticipated	Losses and Expenses Unpaid	Outstanding Direct And Assumed
2000401	33000000000000000000000000000000000000	**************	3000000000	. 10031010191	200000000000000000000000000000000000000	**************************************	693160403E603E	::-museum :	· minn	310003110000	Ammongon	001000010000000000000000000000000000000	300000000000000000000000000000000000000
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		***************************************	***************************************	**************		***********	000000000000000000000000000000000000000	incommunity.	4	1			
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	Losses and	Total Loss Expens	ses Incurred		oss Expense P d/Premiums E		No ibular	Discount	34		ance Sheet fter Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 eded		Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
L. summ	XXX	XXX	XXX	XXX	XXX		Annual Comment	- management	XXX		201000000000000000000000000000000000000
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9			100001000010000		***************************************	99990000000000	***************************************				
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12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	7	

$\begin{array}{c} \textbf{SCHEDULE P-PART 1C-COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL} \\ \textbf{(S000 OMITTED)} \end{array}$

3	P	remiums E	arned				Loss and L	oss Expense Pa	yments			12
	1.	2	3	Loss Pay	ments		and Cost nt Payments	Adjusting Payn		10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct und Assumed	Ceded	Nct (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols.4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct and A cd
1. Prior	XXX	XXX	XXX	***********		1011020111100111	************					XX
2 2009	***************************************	deres de la constante de la co			interestate of		**************					A
3. 2010		***************************************	***************************************		2000000		***************************************		***************************************	2000 000000000000000000000000000000000		
4. 2011		***************************************					*************		***********			
5. 2012	200000000000	300000000	.: (0.000)	(1)111111111111111111111111111111111111	-240034003	10.000.000.00(1)11111-	300000000000000000000000000000000000000	.:	((()))(())(())	>>+60:00:00:00:00:00:0		
6. 2013							*************	***************************************	**************			
7. 2014								***************************************				
8. 2015	311111100111110	-111111111111		**********		13110-011100-111	***********					M
9. 2016							***********					/
10. 2017 11. 2018						3			0.000000000			
12. Totals	XXX	XXX	XXX		1		3 3			496	100	XXX

		Losses	Unpaid		Defens	e and Cost (Containment L	Inpaid		and Other paid		24	25 Number of
	Case B	asis	Bulk + I	BNR	Case B	asis	Bulk +	IBNR	21	22	100	Total Net	Claims
	Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	Direct and Assumed	20 Ceded	Direct and As	Ceded	Salvage and on Anticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
L manana	memmenmet:	7.000000000	000000000000000000000000000000000000000	decreases:	himmurcom)	201000000	200000000000000000000000000000000000000	30.0000.000000	A.111111111111111111111111111111111111	consum:	· · · · · · · · · · · · · · · · · · ·	- congountement	0.0161011111111111111111111111111111111
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3											W		
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5		***************************************		***********	***************************************	**********	***************************************	**********			***************************************		
6		**************		***********	***************************************	************							
7	***************************************	***************************************	***********	**************************************		**********					******************		
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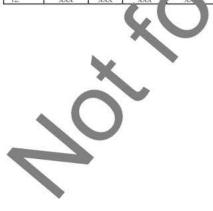
	Losses and	Total Loss Exper	nses Incurred		Loss Expense P. red/Premiums E			Discount	34		ance Sheet fter Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 cded		Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1	XXX	XXX	XXX	XXX	XXX		***************************************	100000000000000000000000000000000000000	XXX		
2	34403444444	***************************************					***************************************				
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SCHEDULE P – PART 1D – WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION) (S000 OMITTED)

	P	remiums E	arned	S .	- 10		Loss and L	oss Expense Pa	yments.	an areas in		12
	1	2	3	Loss Pay	ments	Defense : Containmen		Adjusting Payn	and Other nents	10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Cl Reports Dn and Assumed
I. Prior	XXX	XXX	XXX	1000310003101	10000001	-20111003111111	£0000000000	00000000000	(**************************************	011000111011011	+00030000000000000000000000000000000000	XXX
2. 2009					·	***************************************						
3. 2010	meconecount :	THREE		1600034003407		**************		*************	1100141400101			
4. 2011	200000000000000000000000000000000000000				(orenen)	ion treomena	inominon.		(10000000000000000000000000000000000000			
5. 2012						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	710000000		11001011111111			
6. 2013		***********				***************************************	***********					
7. 2014												
8. 2015	0.0000000000000000000000000000000000000			201000000000000000000000000000000000000	Seconds:	200000000000000000000000000000000000000	************		300000000000000000000000000000000000000	· · · · · · · · · · · · · · · · · · ·	- Aurent	
9. 2016	31400310040311	300000000		100000000000	(00000000		+++++++++++++++++++++++++++++++++++++++	000000000000	34000010000114			***************************************
10. 2017 11. 2018						200000000000000000000000000000000000000			***************************************			
12. Totals	XXX	XXX	XXX	9 1	8 8					A	A A	XXX

		Losses	Unpaid		Defense	and Cost C	ontainment Ur	apaid		and Other paid	23	24	25 Number of
	Case	Basis	Bulk +	IBNR	Case B	asis	Bulk + I		21	22		Total Net	Claims
	Direct and Assumed	14 Ceded	Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	an ubrogation nticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
L							0,000,000,000			- Lanner	A4	*************	
2		**********	****************		***************************************	********		**********		1100	Ø	*************	
3			***************************************					*********				********	*****************
4		3010000000	303000000000			ammunec		***************************************	·	annound.	(**************************************	*************	
5			***************************************	***************************************			-0-100000000000000000000000000000000000		A	·	*************		
6					-200710000000000		-0+0037004000	home		min Zime	.:		************************
7		20.00000000		***************************************		***************************************				3400000000000	***************************************		
8													,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
9		***************************************	**********		***********	**********					***************************************		
10		***************************************							-				

	Losses and	Total Loss Expens	es Incurred	Loss and I (Incurre	oss Expense P ed/Premiums E	ercentance (arned)	ntabular	Discount	34		lance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	Ceded		Jan 1997	Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
Lamoun	XXX	XXX	XXX	XXX	XXX	X	Constitution and Constitution of Constitution	CHARRON COURSE	XXX	600000000000000000000000000000000000000	*ementamontomons
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12.	XXX	XXX	XXX	1	XXX	XXX	t		XXX		



SCHEDULE P – PART 1E – COMMERCIAL MULTIPLE PERIL (\$8000 OMITTED)

		P	remiums Ea	irned		1.0		Loss and L	oss Expense Pa	yments	Si 9	a - 3	12
	SCHOOL STATE OF THE SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND SECOND	E	2	3	Loss Payr	ments	Defense a Containmen		Adjusting Payr	and Other nents	10	н	Number of
Pr Ear	ears in Which remiums Were med and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 - 7 + 8 - 9)	Claims Reported Direct
1.	Prior	XXX	XXX	XXX				**********					XXX
2	2009	***************************************	discourses.					************	***************************************	-		300011000000000000000000000000000000000	
3.	2010	340000000000000000000000000000000000000	***************************************	***************************************		3000000		************	**********	100000000000000000000000000000000000000			
4.	2011	310000000000000000000000000000000000000		***************************************		***********		***************************************	*************	inaonaoni			
5.	2012	34000000000	Seminaries:	· necomment	(1) HTT 11 (10) -	-3400344005	10.000.000.000.000.000.000.000.000.000.	(continue)	< *************************************	-04000000000000000000000000000000000000		- sancay a faccount	
6.	2013							************					
7.	2014		3000000000										
8.	2015	311000000000000000000000000000000000000	-				1911019111100111	*************					
9.	2016	***************************************						Security of the second	(ministrantia)		morphonium.		
10.	2017	340000000000000000000000000000000000000			100000000000000000000000000000000000000	200000000	10.000.0010.001		***************************************	-30400330044001			
12.	Totals	XXX	XXX	XXX				-			-		XXX

		Losses	Unpaid		Defen	se and Cost C	Containment Ur	paid.	Adjusting a Unpa	nd Other id			25 Number of
	Case	Basis	Bulk +	IBNR	Case I	Basis	Bulk +	IBNR	21	22		Total Net	Claims
	Direct and Assumed	14 Ceded	Direct and Assumed	16 Ceded	Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and A ped	Ceded	Salvage and Sin Anticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
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1		Direct and			Direct and			Loss	Loss	Pooling Participation	Losses	Loss Expenses
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$\begin{array}{c} \text{SCHEDULE P-PART 1F-SECTION 1-MEDICAL PROFESSIONAL LIABILITY-OCCURRENCE} \\ \text{(S000 OMITTED)} \end{array}$

	1	remiums E	arned	8	75	12/	Loss and Lo	ss Expense Pay	yments	A2 //	. 3	12
	1	2	3	Loss Pay	ments		and Cost nt Payments	Adjusting Payr	and Other nents	10	- 11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 - 7 + 8 - 9)	Claims Reporte
1. Prior	XXX	XXX	XXX		101000011				**********			XXX
2. 2009						***************************************						
3. 2010				***************************************	Section 1	***************************************	1000000000	0000000000		***************************************		
4. 2011			***************************************			***************************************			***************************************			
5. 2012	33400314033001	. 240.000.000	CONTRACTOR CONTRACTOR	360000000000000000000000000000000000000	Seminor			10000000000000	***********		man famount	inian Sinan
6. 2013												
7. 2014							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					100
8. 2015	*************				. 199001001-	***************************************						
9. 2016		· · · · · · · · · · · · · · · · · · ·		mainmann		Accession of			monauton.	- ingramman		J
10. 2017 11. 2018					(1000000)				***********			.0
12. Totals	XXX	XXX.	XXX		8 8		9 5			46	100	XXX

		Losses	Unpaid		Defense	and Cost C	ontainment U	npaid	Adjusting Unp		1	24	25 Number of
	Case Ba	sis	Bulk + IB	NR	Case Ba	sis	Bulk +	IBNR	21	22		Total Net	Claims
	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 A ned	Cedeu	Salvage and S n Anticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
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	Losses and	Total Loss Expens	ses Incurred	Loss and I	oss Expense Pa ed/Premiums E	intage amed)	No ibular	Discount	34		lance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 eded		Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
L mone	XXX	XXX	XXX	XXX	XXX		Annual Comment	- summer income:	XXX		
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12	XXX	XXX	XXX	- VYY	XXX	XXX			XXX		



SCHEDULE P – PART 1F – SECTION 2 – MEDICAL PROFESSIONAL LIABILITY – CLAIMS–MADE (S000 OMITTED)

	P	remiums Ea	arned				Loss and L	oss Expense Pa	iyments			12
	1.	2	3	Loss Pay	ments	Defense a Containmen			and Other nents	10	11.	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported
I. Prior	XXX	XXX	XXX		- moreonic				***************************************			XXX
2. 2009					************							
3. 2010												
4. 2011	344440000000000000000000000000000000000		- 201410000000000000000000000000000000000	COMMON THUS Y	neconsec.	interestations.	361000000000000000000000000000000000000		+1+0/0120+++10		· married Section	
5. 2012				0202005								
6. 2013												
7. 2014	3100100000000	**********			*********		***********	*************	1000000000000000			
8. 2015	***************************************										A	A
9. 2016	34000000000	3000000000	* himming minorit		THEOREM !		***************************************	(40000000000000000000000000000000000000	***************************************	and anne		F
10. 2017 11. 2018	3************	360000000			***************************************				***************************************			
12. Totals	XXX	XXX	XXX							1	-	XXX

		Losses	Unpaid		Defense	and Cost C	ontainment Ur	ipaid	Adjusting a Unpa	nd Other id	-	A	25 Number of
	Case I	Basis	Bulk + IE	INR	Case Ba	sis	Bulk +	IBNR	21	22		Total Net	Claims
	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 A	Ceded	Salvage nd Subs n Anticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
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3				1100010000	1444404114441444	**********	*************			-	3	333377344777444	***************************************
4		344444444444		income.	************		***************************************	**********	4	tina		34444444444444	
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	Losses and	Total Loss Expens	ses Incurred	Loss and I (Incurre	.oss Expense P ed/Premiums E	antage arned)		Discount	34		lance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 eded		Loss	Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
I	XXX	XXX	XXX	XXX	XXX	X	***************************************		XXX	2010100111000111111111	
2		************			· · · · · · · · · · · · · · · · · · ·		311100010101010101010101010101010101010	-tennerous conser-		: mannon is remerciones.	
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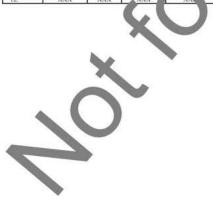
XX

SCHEDULE P – PART 1G – SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY) (S000 OMITTED)

	1	remiums E	arned	2			Loss and L	oss Expense Pa	yments		1	12
	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting Payn	and Other nents	10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols, 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Dire and Assumed
I. Prior	XXX	XXX	XXX		Z	V					2	XXX
2 2009					***************************************				***************************************			XX
3. 2010					-	300000000000000000000000000000000000000	14000000000			***************************************		The second
4. 2011												XXX
5. 2012		**********		Terrestation times	income	***************************************			-			XXX
6. 2013	***************************************			Terrorina (Control	************	200000000000			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			XXX
7. 2014		***************************************						***************************************				XXX
8. 2015	***************************************											XXX
9. 2016	2310031001001	-3000000000	003100000010030000			2010/01/2010/01/01	+0000000000	0000000000000	.340039340003344			XXX
10. 2017 11. 2018	***************************************		***************************************	***************************************		**************************************	***********	000800008000	***************************************			XXX
12 Totals	XXX	YYY	YYY		100					205	A AME	YYY

		Losses	Unpaid		Defense	and Cost C	ontainment Un	paid	Adjusting a Unpa		23	24	25 Number of
-	Case E 13 Direct	Basis 14	Bulk + IE 15 Direct	BNR 16	Case Ba 17 Direct	sis 18	Bulk + 19 Direct	IBNR 20	21	22	anu	Total Net Losses and	Claims Outstanding Direct
	and Assumed	Ceded	and Assumed	Ceded	and Assumed	Ceded	and Assumed	Ceded	Assum	Ceded	ubrogation hticipated	Expenses Unpaid	and Assumed
	***************************************	heromonia :	**************		00000000000000			-			M	***************************************	***************************************
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	Losses and	Total Loss Expens	ses Incurred	Loss and L	oss Expense P d/Premiums E	ercena arned)	ontabular	Discount	34		lance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	Ceded	31	Joss Loss	Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	Loss Expenses Unpaid
Limono	XXX	XXX	XXX	XXX	XXX	XX	: anticoprenionate :	: torenomeconna.	XXX	+0.00=0.00=0.00=0	
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12.	XXX	XXX	_XXX	XX	XXX	XXX			XXX		2



$\begin{array}{c} \textbf{SCHEDULE P-PART 1H-SECTION 1-OTHER LIABILITY-OCCURRENCE} \\ \textbf{(S000 OMITTED)} \end{array}$

//	P	remiums E	amed				Loss and Lo	oss Expense Pa	yments		. 3	12
	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting : Paym		10	н	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported
1. Prior	XXX	XXX	XXX		**********	30.0044.00001005	**********					XXX
2. 2009						3444444444444	-0.010000000000		**********		500011000000000000000000000000000000000	
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6. 2013					**********				*************			
7. 2014												
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9. 2016		Vanishing.				***************************************	**********			management of		-
0. 2017 1. 2018		3344414	. 1001101111111111111111111111111111111						4403)44444			
2. Totals	XXX	XXX	XXX		5 3	10	8 3			4766	1	XXX

		Losses	Unpaid		Defense	and Cost C	Containment Ur	npaid	Adjusting ar Unpa				25 Number of
	Case Ba	sis	Bulk +	IBNR	Case Ba	sis	Bulk +	IBNR	21	22		Total Net	Claims
	Direct and Assumed	14 Ceded	Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and A ped	Ceded	Salvage rid Suo Anticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
Lamont	2011101111011110111	ennous.	DISCOMMENTO:	Communication C	harman coolarest	30000000	***************************************	-00040000000				. 2010 (0.01) (1011111) (1011)	(T) 11 (1) (1) (1) (1) (1) (1) (1) (1) (1)
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4		*********		***************************************	***************************************	201000000000000000000000000000000000000	***************************************		Annual Co.			***************************************	
5		***********		***************************************			- minimum -	distribution (
6			************	*************	***************************************	110.0301				enemme :			
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2 3 4 4 5 5 6 6 7 7 8 8 8 9 9 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Losses and	Total Loss Expens	ses Incurred		oss Expense P. ed/Premiums E		No bular	Discount	34		alance Sheet After Discount
2		Direct and			Direct and			Loss	Loss	Pooling Participation	Losses	Loss Expenses
3. 4. 5. 6. 6. 7. 7. 8. 8. 9. 9. 0. 0. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	1	XXX	XXX	XXX	XXX	XXX			100000000000000000000000000000000000000	XXX		
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$\begin{array}{c} \text{SCHEDULE P-PART 1H-SECTION 2-OTHER LIABILITY-CLAIMS-MADE} \\ \text{(S000 OMITTED)} \end{array}$

- 1	P	remiums E	amed	(s	171	-14	Loss and L	oss Expense Pa	ryments.	v v		12
100-100-100-100-100-100-100-100-100-100	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting Payr	and Other cents	10	н	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct
1. Prior	XXX	XXX	XXX	terroriterature	1000000000	2001100140111			10001110001111			XXX
2. 2009	-					***************************************						
3. 2010	***************************************	***************************************		***************************************		***************************************	1000000000		200000000000000000000000000000000000000		***************************************	
4. 2011			***************************************			320000000000000000000000000000000000000		*************		***************************************		
5. 2012	31003110110111	2000000000	CONTRACTOR CONTRACT	100000000000000000000000000000000000000	: (00000000	.00010000000000000000000000000000000000		0010000000000000	. (100001000010)		record factions	
6. 2013						***************************************			**************	***************************************		
7. 2014							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
8. 2015	***************************************	***************************************			. 1990010000	300000000000000000000000000000000000000		***********			A	-
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10. 2017 11. 2018		>>>			(10.000000	.0011100111011	+100000000		3400344003110		A parmon	****************
12. Totals	XXX	XXX	XXX	2			2 0			446	-	XXX

		Losses	Unpaid		Defense	and Cost C	ontainment Ur	paid	Adjusting a Unpa		1		25 Number of
1	Case Ba	sis	Bulk +	IBNR	Case Ba	isis	Bulk +	IBNR	21	22		Total Net	Claims
	Direct and Assumed	14 Ceded	Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and A sed	Ceded	Salvage. And Sun Anticipated	Losses And Expenses Unpaid	Outstanding Direct and Assumed
L mount	38000000000000000000000000000000000000		20000000000	< 1003HH009T	200000000000000000000000000000000000000	790000000 T	0031100.0031100	: Inches (Inches)		31000031011	13	ECCUSTOCUSTICOUSINS.	2011000101001010010100
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4	***************************************	10111000111	***************************************	***************************************		***********			4				
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	Losses and	Total Loss Expens	ses Incurred		oss Expense Pa ed/Premiums E		No ibular	Discount	34		lance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 eded		Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	36 Loss Expenses Unpaid
Le moner	XXX	XXX	XXX	XXX	XXX		Annual Comment		XXX	***************************************	(0.000000000000000000000000000000000000
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12	XXX	XXX	XXX	YYY	XXX	XXX	-		XXX		7

SCHEDULE P – PART 11 – SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT) (\$000 OMITTED)

	J	remiums E	arned				Loss and Lo	ss Expense Pay	ments			12
	1	2	3	Loss Pay	ments	Defense a Containmen	ind Cost t Payments	Adjusting a Payme		10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Dire and Assumed
1. Prior	XXX	XXX	XXX			300000000	***************************************					12.0
4. Totals	XXX	XXX	XXX									XXX

	8	Losses	Unpaid		Defens	e and Cost Co	ontainment Un	paid	Adjusting : Unp	2.0	23		25 Number of
- [Case Ba	sis	Bulk +	IBNR	Case I	Basis	Bulk + I	BNR	21	22		I Net	Claims
	Direct and Assumed	14 Ceded	Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Saly and Sy ration Ann red	and Expunses aid	Outstanding Direct and Assumed
1 2 3.			***************************************				***************************************	*********		-			

	Losses and	Total Loss Expens	es Incurred		oss Expense Po d/Premiums Ea		Nontalitelar	Disc	34		ance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	Loss	Int Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1 2 3.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
4.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		



SCHEDULE P – PART 1J – AUTO PHYSICAL DAMAGE (\$000 OMITTED)

	F	remiums E	arned	8	- 20	9.7	Loss and Los	ss Expense Pay	ments	A C	v 3	12
	1	2	3	Loss Pay	yments	Defense Containmer	and Cost nt Payments		and Other nents	10	- 311	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols, 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct gd As d
1. Prior 2. 2017 3. 2018	XXX	XXX	XXX			***************************************		***************************************				XX
4. Totals	XXX	XXX	XXX								A	XXX

		Losses	Unpaid		Defen	se and Cost C	ontainment Ur	spaid	10.00	and Other paid		24	25 Number of
	Case	Basis	Bulk +	IBNR	Case I	Basis	Bulk +	IBNR	21	22		Not	Claims
	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	Su on Anticipa	Losse and ses Unitalid	Outstanding Direct and Assumed
1 2 3													

	Losses and	Total Loss Expens	ses Incurred		Loss Expense P ed/Premiums E		Nontabular	coun	La		ance Sheet Ater Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	Lo Expens	h -Company ooling ticipation vercentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1 2 3.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		***************************************
4.	XXX	XXX	XXX	XXX	XXX	XXX	A A	1	XXX	8	

$\begin{array}{c} SCHEDULE\ P-PART\ 1K-FIDELITY/SURETY\\ (8000\ OMITTED) \end{array}$

	1	remiums E	amed	Ø.	- 0	etgt.	Loss and I	oss Expense Pay	yments	N //	,	12
	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting a Paym		10	- 11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols, 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct
1. Prior	XXX	XXX	XXX							5		XXX XXX YXX
4. Totals	XXX	XXX	XXX								AS IN	A AND A

		Losses	Unpaid		Defen	se and Cost C	ontainment Un	paid	Adjusting a Unp		23	4	25 Number of
	Case	Basis	Bulk +	IBNR	Case I	Basis	Bulk +	IBNR	21	22	2 2 4	Total	Claims
	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	Suge Subro Anticipated	Exp Unpair	Outstanding Direct and Assumed
1 2 3.							***************************************					<u> </u>	

	Losses and	Total Loss Expens	es Incurred		oss Expense Po d/Premiums Ea		Nontabular	Hount		alance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	Los P	ompany 35 oling ipation Losses entage Unpaid	36 Loss Expenses Unpaid
1 2 3.	XXX	XXX	XXX	XXX	XXX	XXX			XX	
4.	XXX	XXX	XXX	XXX	XXX	XXX	-	X	XX	5

SCHEDULE P – PART 1L – OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH) $(8000\ OMITTED)$

	P	remiums E	arned	(Loss and Loss	Expense Paym	ents		S.	12
	A	2	3	Loss Pay	yments	Defense Containmer	and Cost at Payments	Adjusting a Payme		10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reporte Direct
1. Prior 2. 2017 3. 2018	XXX	XXX	XXX									XXX
4. Totals	XXX	XXX	XXX								15	All I

		Losses	Unpaid		Defen	se and Cost C	ontainment Un	ipaid	Adjusting a Unpa	2.4	23		25 mber of
	Case I	Basis	Bulk +	IBNR	Case I	Basis	Bulk +	IBNR	21	22	923 = 5	Total !	Claims
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Sal and Subroga Anticipated	Expendungaid	Outstanding Direct and Assumed
1 2 3.													

	Losses and	Total Loss Expens	es Incurred		oss Expense Pe d/Premiums Ea		Nontabular	Lount	2 a		alance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	Los	In Company oling P cipation reentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1 2 3.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
4.	XXX	XXX	XXX	XXX	XXX	XXX	AA	-	XXX		

$\begin{array}{c} \textbf{SCHEDULE P-PART 1M-INTERNATIONAL} \\ \textbf{(S000 OMITTED)} \end{array}$

- 1	P	remiums E	arned	Ø.	99	eg:	Loss and L	oss Expense Payr	ments	(A)		12
	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting as Payme		10	1-1	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols, 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct
1. Prior	XXX	XXX	XXX	100000000000000000000000000000000000000						***************************************	***************************************	XXX
2. 2009		Same and			**********							XXX
3. 2010	(*************	-01101100	200000000000000000000000000000000000000		(100000)	************			***************************************			XXX
4. 2011						************						ASK.
5. 2012	300000000000	5.600000000	333011.00311111111111111111	440000000000000000000000000000000000000	< 40000000	300000000000000000000000000000000000000	.: 9030-0000000000000000000000000000000000	(30000000000000000000000000000000000000	100000000000000000000000000000000000000	***************************************		XX
6. 2013					*********	*************						XXX
7. 2014			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************				177111177111777111				XXX
8. 2015	101111111111111111				+	***********					A	XXX
9. 2016				***************************************	·	· · · · · · · · · · · · · · · · · · ·	and the same of	timent times to the	Section and the			XXX
0. 2017 1. 2018			-3111103111111111103			(40000000000000000000000000000000000000		4330443333464446646	(m000)00001.)			XXX XXX
12. Totals	XXX	XXX	XXX				3		8 8	470	100	XXX

		Losses	Unpaid		Defens	e and Cost Co	ontainment Un	paid	Adjusting : Unp		-		25 Number of
	Case	Basis	Bulk +	IBNR	Case l	Basis	Bulk + I	BNR	21	22		Total Net	Claims
	13 Direct and Assumed	14 Ceded	Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assu	Zeded	Salvage ud Subr Inticipated	Losses and Expenses Unpaid	Outstanding Direct And Assumed
L	: tooosossoot	- 10011001010	200000000000	: +unmammai	101101011100	-tennienousu	334600300000	Secondary 1	- yearnamen	manaut:	Ammunus "	2020000100000	
2					***********		**************	+++++++	·	·			
3							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1	Al	,	
4	(10000000000000000000000000000000000000	-0000000000	***************************************	(**************************************	***********		334443344440	(144)411(4)		dille.		************	
5	- minimum	***************************************		manning .	***************************************	1000000000		· · · · · · · · · · · · · · · · · · ·				***************************************	***************************************
6			*************	+000111001111		***********	***************************************						
7	100000000000000000000000000000000000000		*************	+	**********		2211(1000000000	Acres to .		in the			***************************************
8						: 1100111111111111	***************************************	Book		- minimum -			
9	inconverse.	***************************************	*************	+	***********	innovitores:	3000000000000	700		***************************************	***************************************		
0					***********		***************************************	-44			***************************************	***************************************	

	Losses and	Total Loss Expens	es Incurred		oss Expense P ed/Premiums E		Non ular	Discount	34		Balance Sheet ves After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30		Loss	Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
I	XXX	XXX	XXX	XXX	AXX	A)			XXX	4-1000000000000000000000000000000000000	
2 3	-10000000000000000000000000000000000000	200422000		***************************************			***************************************	************************	(11))	400000000000000000000000000000000000000	
4					180						
5		manage		***************************************				iconomicon		Anticontainments.	
6				***************************************							
7,						·				***************************************	
8		**********			13)1001731100831	***************************************					1-11-1-11-1-11-1-1-1-1-1-1-1-1-1-1-1-1-1
9 0		************			1011001011100115	***************************************		*****************	***************************************	3740001000000	***************************************
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2.	XXX	XXX	XXX	ALT.	XXX	XXX			XXX		
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			X	U							
		×	X								
		×	X								

SCHEDULE P – PART 1N – REINSURANCE NONPROPORTIONAL ASSUMED PROPERTY (\$000 OMITTED)

	P	remiums E	arned				Loss and L	oss Expense Pa	yments			12
	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting Payn	and Other nents	10	- 11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Cla porter Direct and Assumed
1. Prior	XXX	XXX	XXX					************	***************************************			XXX
2. 2009						***************************************	**********			***************************************		401.
3. 2010					**********	***************************************			************			XX
4. 2011										***************************************		XXX
5. 2012	***************************************			. incommissioner	***************************************				***************************************			XXX
6. 2013							************		. innovement	700000000000000000000000000000000000000	A	XXX
7. 2014									***************************************		-	XXX
8. 2015												XXX
9. 2016	: 111010011100100	3100100			10010000	011000000000000000000000000000000000000	3400000000	.41003040000311-1				XXX
10. 2017 11. 2018			***************************************	*************				***************************************	*************		-	XXX
12. Totals	XXX	XXX	XXX							400		XXX

			Losses	Unpaid		Defen	se and Cost C	Containment Un	paid	Adjusting Unp	and Other	23	24	25 Number of
	ő	13 Direct and	Basis 14	Bulk + 15 Direct and	IBNR 16	Case I 17 Direct and	Basis 18	Bulk + 19 Direct and	IBNR 20	21 D	22	Subrogation	Total Net Losses and Expenses	Claims Outstanding Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumco	Ceded	nticipated	Unpaid	Assumed
1.	sicono+	***************************************	moreoner :		***************************************		incommon	400000000	- announce	Y		M	Management :	XXX
2.	mercen.		moonooi			**************	***************************************	1000000000000	, incommer			V	monnoumoù.	XXX
3.	******				***************************************					A				XXX
4.										W				XXX
5.	interpretation (TERRORISON :				> 000000000000000000000000000000000000	714000000000000000000000000000000000000				331.00331.0001.030	3800000000000000	XXX
6.	*******	postorosteter	Henostroon	***************************************				140033400303441		·		***************************************	***************************************	XXX
7.														XXX
8.								14001141111111	1		1001000011111			XXX
9.														XXX
0.	most.				S					-				XXX
2.									485			-		XXX

	Direct and Assumed Ceded Net Assumed Ceded No. Loss Expense Expenses Unpaid Unp	Direct and Assumed Ceded Net Assumed Ceded No. Loss Expense Percentage Unpaid U		Losses and	Total Loss Expens	es Incurred	(Incurr	oss Expense P ed/Premiums E		wabular	Discount	34		dance Sheet After Discount
				Direct and			Direct and	Ceded			Loss	Pooling Participation	Losses	Loss Expenses
			L mon	XXX	XXX	XXX	XXX	XX	XX	344410037104410044		XXX	3403-000-000-000-	
			2			-11010000000000000000000000000000000000				300000000000000000000000000000000000000	***************************************			
			3	***************************************	**********		***************************************			300000000000000000000000000000000000000	*****************			
			*		0.0000000000000000000000000000000000000	and the second second	11 10 10 10 10 10 10 10 10 10 10 10 10 1							311111111111111111111111111111111111111
					100 March 100 Ma		-	STREET, STREET	-					
			7				100							
			0	220000000000000000000000000000000000000	######################################		20	2500 H VIII TO THE						
			O.				1						TV.III.S III.S C. CO.	
			a .		COMMITTEE S	The second second second			1.000					
XXX XXX XXX XXX XXX XXX XXX	XXX XXX XXX XXX XXX XXX	2. XXX XXX XXX XXX XXX XXX XXX XXX	EE.	2.77.20.77.20.20.10.50.				San Contract	0.0000000000000000000000000000000000000		53183,3103531103.2	3000-200,0000000000000000000000000000000	52,00-000,000,000,000	
	80	XXV	12.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
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SCHEDULE P – PART 10 – REINSURANCE NONPROPORTIONAL ASSUMED LIABILITY (S000 OMITTED)

	3	remiums E	arned	S.			Loss and Los	s Expense Pay	ments			12
	1	2	3	Loss Pay	ments	Defense i Containmen		Adjusting a		10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 − 5 + 6 − 7 + 8 − 9)	Dis- and Assumed
L. Prior	XXX	XXX	XXX	***************************************		Andreas Andrea	Trained arrived		Tana di Cara		faccount and a second	XXX
2. 2009			***************************************	************		*****************	************					VX
3. 2010	394974444444444				**********		14444444444		1007011101			NO.
4. 2011		Services.						***********				XXX
5. 2012	***************************************			*************		*****************			A-1000000			XXX
6. 2013	***************************************	processor.	***************************************	nomonomosi.		years and the same of the same	-rossmoore.		100000000			XXX
7. 2014				**********								XXX
8. 2015				************		***************************************						XXX
9. 2016	2010710031101110	Terroresco	01000146401460014	36000000000000000000000000000000000000	1000000000000	22314402314402	100000000000000000000000000000000000000	11014003101103	-01010-00000000-1		the sections	XXX
0. 2017 1. 2018	***************************************	**********	***************************************	VIII.		***************************************		************				XXX
12. Totals	XXX	XXX	XXX									XXX

	Losses	Unpaid		Defen	se and Cost C	ontainment Us	paid	Adjusting a Unpa	nd Other	23	24	25 Number of
Case l	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	21	22		Total Net	Claims
13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Doct am	Ceded	anu ubrogation nticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
 				**************	-Hermanner	Tarrico Constant		Y	· Automot	M	deposition representation to	XXX
 	***************************************	- communication				200000000000000				Ž	***************************************	XXX
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 							SMP					XXX
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 							Shade.					XXX
 			+++++++++++++++++++++++++++++++++++++++	3031000000					(100100100)			XXX
						- All	400		2			XXX

Assumed Ceded Net Assumed Ceded Net Loss Expense Percentage Unpaid Unpa		Losses and	Total Loss Expens	es Incurred		oss Expense P ed/Premiums E		nabular	Discount	34		lance Sheet After Discount
2 3 3 4 4 5 5 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		Direct and			Direct and	Ceded			Loss	Pooling Participation	Losses	
3. 4. 5. 5. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.	L	XXX	XXX	XXX	XXX	XX	XX			XXX		
		-73.000000000000000000000000000000000000		16-20-20-20-20-20-20-20-20-20-20-20-20-20-		100	400	The state of the s		THE RESERVE AND DESCRIPTION OF THE PARTY.	250 DECEMBER 100 DECEMBER 100 DECEMBER 100 DECEMBER 100 DECEMBER 100 DECEMBER 100 DECEMBER 100 DECEMBER 100 DE	300000000000000000000000000000000000000
		Contract Con	100000000000000000000000000000000000000		FEMALES MANAGEMENT		4000		12000000000000000000000000000000000000	CONTROL OF THE PROPERTY OF	and described	
			211 202 1222						- Comment Standard Comment			
8	6		- 600 000 000			A STATE OF THE PARTY OF THE PAR			CREW STREET		2001/02/2014 (0.00)	
9	7											
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	*		***********)**************************************
		XXX	XXX	XXX	YY	XXX	XXX			XXX		
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			V									

SCHEDULE P – PART 1P – REINSURANCE NONPROPORTIONAL ASSUMED FINANCIAL LINES (S000 OMITTED)

		P	remiums E	arned	l.		93.	Loss and Lo	ss Expense Pay	yments	0 8	0.0	12
		.1	2	3	Loss Pay	ments	Defense Containmer	and Cost nt Payments	Adjusting Payn	and Other nents	10	11	Number of
Premi Earned	s in Which iums Were and Losses Incurred	Direct and Assumed	Ceded	Net (Cols, 1 – 2)	4 Direct and Assumed	S Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9	s Reported in Assumo
1. Pric	or	XXX	XXX	XXX	***************************************		*************		11000311003110	Limitedoromodes	****************		XXX
2. 200	19												XXX
3. 201	0	***************************************	***************************************	***************************************	**********		************	30001100001100	140000110000110		000000000000000000000000000000000000000		KX
4. 201	I							***************************************			***********		XXX
5. 201.	2												XXX
6. 201	3				***************************************		***************************************			***********			XXX.
7. 201	4			>0000000000000000000000000000000000000				200000000000					XXX
8. 201	5												XXX
9. 201	6		200000000				************				11 Maria		XXX
0. 201 1. 201	8												XXX
2. Tota	als	XXX	XXX	XXX									XXX

		Losses	Unpaid		Defen	se and Cost C	ontainment U	npaid	Adjusting Unp		23	24	25 Number of
1	Case	Basis	Bulk +	IBNR	Case I	Basis	Bulk +	IBNR	21	22		Total Net	Claims
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	D et an	Ceded	Subrogation nticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
 			***************************************	· serverence ·			anomonini	- ameoning	V		M		XXX
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								************	C				XXX
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danet :	Tentermoner	management .		· · ammannar	*****************	: mannanco	tenamenani.				201102101010101010	Anni anni anni anni anni anni anni anni	XXX
								4.0					XXX
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	Losses and	Total Loss Expens	es Incurred	Loss and L (Incurre	oss Expense P ed/Premiums E	ercenta arned)	abular	Discount	34	Net Ba Reserves	lance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 N.	J2 Loss	Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
L 110000	XXX	XXX	XXX	XXX	VXX	XX	Энинийнийн		XXX	1010-0010-0010-0010-001	
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3	Terrorionien n.c.	3000000000000				- many Jime	300000000000000000000000000000000000000			340000000000000000	
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9				Management A	30011111111111	***************************************	34401000010440010004			300000000000000000000000000000000000000	
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12	XXX	XXX	XXX	YY	VYY	XXX		13	XXX	6	



$\begin{array}{c} \textbf{SCHEDULE P-PART 1R-SECTION 1-PRODUCTS LIABILITY-OCCURRENCE} \\ \textbf{(S000 OMITTED)} \end{array}$

		Premiums Ear	med	W			Loss and Lo	ss Expense Pay	yments			12
	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting a Paym		10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct
1. Prior	XXX	XXX	XXX	************		21.000.11.00111						XXX
2. 2009			*************					**********			***************************************	
3. 2010	(*************				1000000	200001710073	Summer .			***************************************		
4. 2011	immonom			***************************************		110000000000		***************************************				
5. 2012	300000000000	> 0.000.00.000	010011111111111111111111111111111111111	200000000000000000000000000000000000000	- 30000000	***************************************	× 1000000000000000000000000000000000000	015100000000000000000000000000000000000	(mountainment)			
6. 2013		***************************************					***************************************	***************************************				
7. 2014								***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
8. 2015	1001000000000		***************************************	************	************	***************************************		***************************************			A	
9. 2016				***********	Territoria.	month of the		limitem in	hannaman.			
10. 2017 11. 2018			010011111111111111111111111111111111111		20000000	***************************************			(400)000			
12. Totals	XXX	XXX	XXX							470	1	XXX

			Losses	Unpaid		Defens	e and Cost Co	ontainment Un	paid	Adjusting a Unpo		-		25 Number of
		Case	Basis	Bulk +	IBNR	Case I	Basis	Bulk + l	BNR	21	22		Total Net	Claims
		13 Direct and Assumed	14 Ceded	Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	Direct and Assumed	20 Ceded	Direct and Assu	Leded	Salvage ud Subr Inticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
L	1003100	:-(+0.00.000.000.000.000.000.000.000.000.0	- 10010000000	Teamountee	***********************	10111010111001	-310031000000	3346603300000	3000000	- Approximately	Toronous :	Ammuni.	300000000000000000000000000000000000000	. 010177311000101773110011
2.	+00000			***************************************		**********			+++++++	·				
3.								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			The same	Al	,	
4.	*******	(10000000000000000000000000000000000000	-0000000000	***************************************	***************************************	***********			(1444)		dillin.		(10000000000000000000000000000000000000	
5.		- management	***************************************			************								
6.				************		·	************	***************************************			enem.		******************	
7.	*********			*****************		**********		22810000000000	hammen.					
8.								***************************************	Should be		minimum :			
9.		incomment.		**************	+	***********	************	************	786		***************************************	***************************************		
0.					**********				44			***************************************	***************************************	
12.	_							9.4	7	The same of	-			

	Losses and	Total Loss Expens	es Incurred		Loss Expense P ed/Premiums E		Non ular	Discount	.34		Alance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 sed		Loss	Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
L	XXX	XXX	XXX	XXX	AXX	77			XXX	(-10.010)	
3		************			-					***************************************	
4							100000000000000000000000000000000000000				***************************************
5										***************************************	
7										***************************************	
8		**********			***************************************					***************************************	
9		H00000000				***************************************	,			***************************************	
0 1.			/**************************************				(Announcement)	Commission.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2.	XXX	XXX	XXX	W.Y.	XXX	XXX			XXX		
		×	×								

SCHEDULE P – PART 1R – SECTION 2 – PRODUCTS LIABILITY – CLAIMS–MADE (\$000 OMITTED)

	P	remiums E	amed				Loss and Lo	ss Expense Pay	ments			12
	31	2	-3	Loss Pay	ments	Defense a Containment		Adjusting a		10	11	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	Claims Reported Direct Assum
1. Prior	XXX	XXX	XXX		**********	· · · · · · · · · · · · · · · · · · ·	200010000000	14141000111000		3510110003111100111		XXX
2. 2009		2000000000	***************************************									
3. 2010		************	***************************************	and the same of			30001100011	**************		2010/10/2000		
4. 2011							3000000000	************				
5. 2012	-94003140340444	C 000000000	31514600000000000000000000000000000000000	************	1000000000	: managamenan	30000000	341000000000000000000000000000000000000		3310110300000000		anical since
6. 2013		***************************************					3000000000		***************************************			
7. 2014												
8. 2015		***************************************		***************************************		************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			A	
9. 2016							***************************************		***************************************			
0. 2017 1. 2018	2001000001		300000000000000000000000000000000000000	(**************************************		***************************************	30000000					
2. Totals	XXX	XXX	XXX	3						49	-	XXX

			Losses	Unpaid		Defens	e and Cost Co	ontainment Un	paid	Adjusting a		3		25 Number of
		Case I	Basis	Bulk +	IBNR	Case I	Basis	Bulk + 1	BNR.	21	22		Total Net	Claims
		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 Assu	Leded	Salvage ul Subv Inticipated	Losses and Expenses Unpaid	Outstanding Direct and Assumed
I	m+ 3	300000000000000000000000000000000000000	1100-000000-		- santophinae	************	:-(10,000,000,000)	190031100001	· monor				THE CONTROL OF THE CO	
2	4					************	- construction	***************************************	*********	·	A			
3												All		
4				***************************************		************	(10000000000	(**)00000000000000000000000000000000000	*********					***************************************
5		vertice and the		and distinctions	· monumer.		. management	140000000000		- N	J			
6	04.1		amana.					***************************************		A		***************************************		
T			**********			****************	-1010000000000		A		and Same	3340374001374440144		
š			************						-					
9	with the											394031-00031-0000-01		
D				***************************************										
1.	-								_	The same				

	Losses and	Total Loss Expens	es Incurred		oss Expense Pe ed/Premiums Ea		Non sular l	Discount	34		alance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30		Loss	Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
L	XXX	XXX	XXX	XXX	XXX	X.	344414444144441		XXX	30000000000	
Z. many	300000000000000000000000000000000000000		-110144191144011144				3440100001044010004			300000000000000000000000000000000000000	
	30000001100000						300000000000000000000000000000000000000	000000000000000000000000000000000000000	***********************	3***********	
5		Southern							***************************************		
5									***************************************		
7											
8		distribution .				***************************************	**************************************	commencement .		300000000000000000000000000000000000000	
)											
)											
2.	XXX	XXX	XXX	MALE.	XXX	XXX			XXX		
			6								
			X								

$\begin{array}{c} \textbf{SCHEDULE P-PART 1S-FINANCIAL GUARANTY/MORTGAGE GUARANTY} \\ \textbf{(S000 OMITTED)} \end{array}$

	P	remiums E	amed	8	9	25/3	Loss and L	oss Expense Pa	syments	6 40		12
	1	2	3	Loss Pay	ments	Defense a Containmen			and Other nents	10	1-1	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct
1. Prior	XXX	XXX	XXX						***************************************			XXX XXX XXX
4. Totals	XXX	XXX	XXX								100	100

		Losses	Unpaid		Defen	se and Cost C	Containment Ur	ipaid	Adjusting as Unpa		23		25 umber of
	Case 1	Basis	Bulk +	IBNR	Case I	Basis	Bulk +	IBNR	21	22	- 2 1	Total .	Claims
	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	Sal are an Subroga Anticipated	Expen- Unpaid	Outstanding Direct and Assumed
I 2													

	Losses and	Total Loss Expens	es Incurred		oss Expense Pe d/Premiums Ea		Nontabular	Qunt	7		lance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 🔷	Los	Into Company I ling Pa lipation Contage	35 Losses Unpaid	36 Loss Expenses Unpaid
1 2 3.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
4.	XXX	XXX	XXX	XXX	XXX	XXX	AA		XXX		3

SCHEDULE P – PART 1T - WARRANTY (\$000 OMITTED)

	F	remiums E	amed	(S	- 0	:0	Loss and L	oss Expense Pa	yments	0.00		12
	1	2	3	Loss Pay	ments	Defense a Containmen		Adjusting Payn		10	Н	Number of
Years in Which Premiums Were Earned and Losses Were Incurred	Direct and Assumed	Ceded	Net (Cols. 1 – 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 – 5 + 6 – 7 + 8 – 9)	Claims Reported Direct
1. Prior	XXX	XXX	XXX									XXX
4. Totals	XXX	XXX	XXX								B	A STATE OF THE STA

		Losses	Unpaid		Defen	se and Cost C	Containment Ur	npaid	Adjusting a Unpa		23		25 Number of
	Case I	Basis	Bulk +	IBNR	Case I	Basis	Bulk +	IBNR	21	22	100	Total	Claims
	Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Subroy Anticipateo	Expu Unpaio	Outstanding Direct and Assumed
1 2 3.				***************************************		************			3000000000		onne onn		

	Losses and	Total Loss Expens	es Incurred		oss Expense Pe d/Premiums Ea		Nontabulas	cour			ilance Sheet After Discount
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	Loss Loss	D. Expens	In Company oling P icipation ercentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1 2 3.	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
4	XXX	XXX	XXX	XXX	XXX	XXX	A VIII	7	XXX		

SCHEDULE P – PART 2A – HOMEOWNERS/FARMOWNERS

	INC	URRED NET	LOSSES AND I	DEFENSE AND	COST CONTAI	NMENT EXPEN	SES REPORTE	ED AT YEAR-E	ND (\$000 OMIT	(ED)	DEVELO	DPMENT
Years in Which Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	11 One Year	12 Two Year
1. Prior	************	3010100000000	***************************************	***************************************		Antitropolitation in	***************************************	10001000110000	***************************************	001110000000011	1111000111001111	+111000714001140
2 2009	*************	Section of the last of the las							***************************************			
3. 2010	XXX				. 314101111111111111111111111111111111111						4	
4. 2011	XXX	XXX	(**************************************	***************************************			**************		*****************		-	
5. 2012	XXX	XXX	XXX		***************************************							
6. 2013	XXX	XXX	XXX	XXX		***************************************	***************************************					·
7. 2014	XXX	XXX	XXX	XXX	XXX							
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX	>>+010141444444444				· mind	:::::::::::::::::::::::::::::::::::::::
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	iconsecution			XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2 (277man)	XXX	XXX

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY TOICA

1.	Prior		***************************************	STREET, STREET	энсониению	111000100011100	***************************************				· Ammonia	неотонностично	******************
2.	2009												
3.	2010	XXX		***************************************									
4.	2011	XXX	XXX	***************************************									
5.	2012	XXX	XXX	XXX		110000144001000	/accommonation				***************************************		
6.	2013	XXX	XXX	XXX	XXX								***************************************
7.	2014	XXX	XXX	XXX	XXX	XXX	-00000400111000000000000000000000000000				31000000000000000000000000000000000000		************
8;	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXXX		- PRINCE AND ADDRESS OF THE PARTY OF THE PAR		management .	***************************************
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XIII.	CVV	XXX		XXX	XXX
_			\$://2		7.	27.	4	The same		12 Totals	- 2	

SCHEDULE P - PART 2C - COMMERCIAL A. O/TR CK LIABILITY/MEDICAL

								- W					
1.	Prior				*****************			A.A	*****************	***************************************	300000000000000000000000000000000000000		
2.	2009			***************************************			Contract		***************				
3.	2010	XXX	***************************************		***************************************		V			graditation types.			
4.	2011	XXX	XXX	***************************************		A			***************************************				
5.	2012	XXX	XXX	XXX		V							
6.	2013	XXX	XXX	XXX	XXX				nanamananan :	0.0000000000000000000000000000000000000	annound on the contract	Samuel Constitution	
7.	2014	XXX	XXX	XXX	XXX	XXX							
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	X		XXX	XXX	2222222222	200000000000000000000000000000000000000		***************************************	
10.	2017	XXX	XXX	XXX	× ×	XX	XXX	XXX	XXX				XXX
11.	2018	XXX	XXX	XXX	XX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
_					-						12. Totals		

SCHEDULE P – PART – WORKERS' COMPENSATION (EXC. UDING EXCESS WORKERS' COMPENSATION)

1.	Prior					**************			************	***************************************			
2.	2009	************		innie (Zanazaza				
3,	2010	XXX	WOUND CONTRACTOR			20200100000000000	(10000000000000000000000000000000000000		010100000000000000000000000000000000000	-000-0000000000000000000000000000000000			
4.	201 L	XXX	XXX	A		300000000000000000000000000000000000000		400000400000000	(10)300000000000	40.00.000.000.000.00	(1011)(1011)(1011)(1011)		
5.	2012	XXX	N K	XXX	100000000000000000000000000000000000000	***************************************							
6.	2013	XXX	- W A	XXX	XXX	*************		***************************************	417174011110111111	*****************			************
7.	2014	XXX	XX	A.	XXX	XXX			***************************************	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		- Terretal Internation	
8.	2015	XXX	XX	A. A.	XXX	XXX	XXX	***************************************					***********
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	enormonome:	-00000000000000000000000000000000000000		XXX
1.	2018	XXX	XXX	X	XXX	XXX	XXX	XXX	XXX	XXX	- Automobile	XXX	XXX
_		-	(b)	-							12. Totals		

MEDULE P – PART 2E – COMMERCIAL MULTIPLE PERIL

1. Prior				344000000000000000000000000000000000000		**************		*************	***************			
2 2009	A	M		30071111111111111111111								
3. 2010	The same of	Ø						***********				
4. 2011	XXX	XXX	HUMANIONEDIN	300000000000000000000000000000000000000								
5 2012	XXX	XXX	XXX	344000000000000000000000000000000000000				*****************			***************************************	
	XX	XXX	XXX	XXX					***************************************			
914	XX	XXX	XXX	XXX	XXX							************
8.	XXX	XXX	XXX	XXX	XXX	XXX						
9. 201	XXX	XXX	XXX	XXX	XXX	XXX	XXX	**************		-030310014444400144445	: OLIGINAL PRODUCTION OF	***************
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	**************			XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
			/							12. Totals		

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

1	IN	CURRED NET I	OSSES AND D	EFENSE AND C	OST CONTAIN	MENT EXPENS	ES REPORTED	AT YEAR-END	(\$000 OMITTE	D)	DEVELO	OPMENT
Years in Which osses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	11 One Year	12 Two Year
I. Prior	************	***************************************	0.001100318100311	X031400338100580	***************************************	***************	************	***********		000000000000000000000000000000000000000	202000000000000000	0.000000000000000
2. 2009												
3. 2010	XXX	***************************************						***************************************				
4. 2011	XXX	XXX				101111111111111111111111111111111111111		400000000000000000000000000000000000000	***************************************		/	
5. 2012	XXX	XXX	XXX	************							A ALLEMAN	
6. 2013	XXX	XXX	XXX	XXX			**************	*****************				·
7. 2014	XXX	XXX	XXX	XXX	XXX	***************************************		440000000000000000000000000000000000000	***************************************			
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX	9148411110110111000 -					011110001000000000000000000000000000000
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				A	
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- VERNON PROTECTION OF THE		-	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1000	XXX	XXX

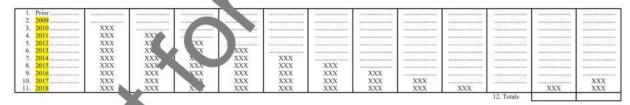
SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY. CLAY 'S-MADE

ŀ,	Prior,	110003100310010		0.00111003111000311		***************************************		100000000000000000000000000000000000000	(40000000000000000000000000000000000000		×	200000000000000000000000000000000000000	300000000000000
2.	2009									minus vin			
3.	2010	XXX						1					
4.	2011	XXX	XXX	LOUISIANANANANANANANANANANANANANANANANANANA	***************************************							***************************************	***************************************
5.	2012	XXX	XXX	XXX		***************************************	management of	- communicación			Contraction (Contraction)	140000000000000000000000000000000000000	
6.	2013	XXX	XXX	XXX	XXX							140000000000000000000000000000000000000	
7.	2014	XXX	XXX	XXX	XXX	XXX	21010100100010001					14000101010101411111	201100000000000000000000000000000000000
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9	2016	XXX	XXX	XXX	XXX	XXX	XXX	AXXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	J		2000	XXX
II.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XX	The same of the sa	XXX	CARLEST MARKET STATE	XXX	XXX
_			77		77	7		4 6			12. Totals		

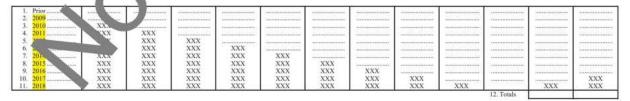
SCHEDULE P – PART 2G – SPECIAL LIABILITY (OC. (N.M., RINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)



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



SC. DULL P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE



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

I	INC	URRED NET L	OSSES AND DE	FENSE AND C	OST CONTAIN	MENT EXPEN	SES REPORTI	ED AT YEAR-EN	D (\$000 OMITT	ED)	DEVELO	OPMENT
Years in Which Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	9 2017	2018	11 One Year	12 Two Year
1. Prior 2. 2017 3. 2018	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX	XXX		XXX	XXX XXX

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	***************************************		 	
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A	 incommence.	XXX
3, 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 2K - FIDELITY, SURETY

1. Prior	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	- AAAA			XXX	XXX XXX
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SCHEDULE P - PART 2L - OTHER (INCLUDING CREPIT, CCL SNT AND HEALTH)

1. Prior	XXX	XXX XXX	XXX		XXX	XXX XXX
----------	-----	------------	-----	--	-----	------------

SCHEDULE P - PART 2 1 - AL RNATIONAL

						_	480						-
1.	Prior			***************************************	***************************************				***********	***************************************	******************		
2	2009												
3.	2010	XXX	***************************************						************		***************************************		
4.	2011	XXX	XXX				·		**********		*************		
5.	2012	XXX	XXX	XXX	A		***************************************		**********		***************************************		
6.	2013	XXX	XXX	XXX	A.A.A.		.: (1110) 1111 1111 1111 11111	::0000000000000000000000000000000000000	33300000000000		*****************	***************************************	- 201031400316
7.	2014	XXX	XXX	XXX		XXX					***************************************		
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XZ	XXX	XXX	**********				*****************
10.	2017	XXX	XXX	XXX	XXX	NAME OF THE OWNER, THE	XXX	XXX	XXX		***************************************		XXX
11.	2018	XXX	XXX	XXX	XXX	CXX	XXX	XXX	XXX	XXX		XXX	XXX
_				100							12 Tatale		

SCHEDULE P – PART 2N – REINSURANCE NONPROPORTIONAL ASSUMED PROPERTY

	INC	URRED NET LO	SSES AND DE	FENSE AND C	OST CONTAIN	MENT EXPENS	SES REPORTEI	AT YEAR-EN	D (\$000 OMITT	ED)	DEVELO	PMENT
Years in Which Losses Were Incurred	2009	2010	2011	2012	5	6 2014	7 2015	2016	2017	2018	One Year	12 Two Year
1 Deine	22/20/20/20/20/20	W47132	100000000000000000000000000000000000000	Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda Sanda S	- HOTE		Commence and I have be	12.00 A 02.7 (00.1)	200000000000000000000000000000000000000	Company of the Company		1 020125000012
2. 2009			100000000000000000000000000000000000000	.1141.000111.004117		THE REAL PROPERTY.						
3 2010	XXX		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	711111111111111111111111111111111111111								
4 2011	XXX	XXX			***************************************					4		
5. 2012	XXX	XXX	XXX									¥
6. 2013	XXX	XXX	XXX	XXX	***************************************							
7. 2014	XXX	XXX	XXX	XXX	XXX							
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			- M		10101010101010101
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			100	XXX
11, 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100	XXX	XXX

SCHEDULE P – PART 20 – REINSURANCE NONPROPORTIONAL ASSUMED LIABILITY

L	Prior		300000000000000000000000000000000000000										240000000000000000000000000000000000000
2	2009				400000000000000000000000000000000000000					A			
3.	2010	XXX	30000000000000000000000000000000000000	.33343400000000000000000000000000000000			M1100011100011100	monagement y		Value !			
4.	2011	XXX	XXX	***************************************									
5.	2012	XXX	XXX	XXX									
6.	2013	XXX	XXX	XXX	XXX	(14144444100341003	*************	·		1100111031110001	(11101111111111111111111111111111111111		
7.	2014	XXX	XXX	XXX	XXX	XXX				340004000000000000000000000000000000000			
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				+	
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX 4	XXX	XXX	XXX		XXX	XXX
							- Ban As	100			12. Totals		

SCHEDULE P – PART 2 REIN ANCE NONPROPORTIONAL ASS MED ANCIAL LINES



$SCHEDULE\ P-PART\ 2R-SECTION\ 1-PRODUCTS\ LIABILITY-OCCURRENCE$

3	INC	URRED NET LO	OSSES AND DE	FENSE AND C	OST CONTAIN	MENT EXPEN	SES REPORTED	AT YEAR-EN	D (\$000 OMITT	ED)	DEVELO	PMENT
Years in Which osses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	12 Two Year
1. Prior		***************************************	***************************************	transferontinos:	***************************************	*************	100011000000001	***************************************	100000000000000000000000000000000000000		3400440004400044	
2. 2009						***************************************	***************************************					***************************************
3. 2010	XXX	***************************************										
4. 2011	XXX	XXX				***************************************		***************************************	344440044444	311011031101101		
5. 2012	XXX	XXX	XXX	***************			***************************************	***************************************	***************************************		A	
6. 2013	XXX	XXX	XXX	XXX	***************************************	***************************************	***************************************					·
7. 2014	XXX	XXX	XXX	XXX	XXX				3000000000000	34400000000000		
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX			344944000000000000000000000000000000000			234916000994444
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX		Secretarion second	- Aller		200000000000000000000000000000000000000
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.00700007000000	A		XXX
1. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLA. 'S-MA' E

1.	Prior	***************************************	***************************************		-1000010011100110		.0000	0.0011.00011.000011			A		
2.	2009										***************************************		
3.	2010	XXX	***************************************		*************	***************************************					***************************************		
4.	2011	XXX	XXX	************	***************************************						***************************************	***************************************	
5.	2012	XXX	XXX	XXX	***************************************	· maniaconiman	***************************************	100000000000000000000000000000000000000	200000000000000000000000000000000000000				
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX	144490000000000000000000000000000000000		-		:::::::::::::::::::::::::::::::::::::::	***************************************	.:
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				***************************************		***************************************
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX		***************************************			immonomore
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	3	- CACA	XXX		XXX	XXX
_		1/2		77				4 6	The same of		12. Totals		

SCHEDULE P - PART 2S - FINANCIAL GUA NTY YORTGAGE GUARANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	VXX	XXX	100000000000000000000000000000000000000	300000000000000000000000000000000000000	***************************************		
2. 2017	XXX	XXX	XXX	XXX	XXX	AXX	The same of the sa	XXX				XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
2-11/2-12				-	_	St. Allert		* ***		4 Totale		

SCHEDL E P - ART T - WARRANTY

1. Prior 2. 2017	XXX	XXX	XXX	1	XXX	XXX	XXX XXX XXX	XXX	1000	333110331031011	VVV	XXX
3. 2018	XXX	XXX	XXX	XXX	XXY	XXX	XXX	XXX	XXX	4. Totals	XXX	XXX

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

	CUMULAT	TIVE PAID NE	T LOSSES AN	D DEFENSE AN	D COST CONT.	AINMENT EXI	PENSES REPOR	RTED AT YEAR-	END (\$000 ON	AITTED)	. 115	12
Years in Which Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
I. Prior	000					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
2. 2009		1011010000000	10.000.000.000.000.000		1011111110011110	formation of the same of the s	himmingoning		(10000000000000000000000000000000000000			
3. 2010	XXX	And de la contraction de la co	***************************************									
4. 2011	XXX	XXX			1000000000000							
5. 2012	XXX	XXX	XXX									
6. 2013	XXX	XXX	XXX	XXX		***************************************		300000000000000000000000000000000000000			100	
7. 2014	XXX	XXX	XXX	XXX	XXX		necessarios and	***************************************			-	
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX						~
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
0. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		·		
1. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A 4		

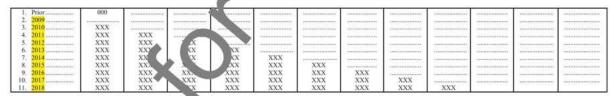
SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/M. PICAL

, L	Prior	000	***************************************	***************************************	70040770111010111				SHOWNER		Statement of the last	minument :	
2.	2009												
3.	2010	XXX		***************************************		***************************************							
4.	2011	XXX	XXX	THE PROPERTY OF THE PARTY OF TH	пининения	: summeronumes :	:mannonmer	:tnoneconsum::				.00000000000000000000000000000000000000	
5.	2012	XXX	XXX	XXX							/		***************************************
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	XXX	XXX	XXX	XXX	XXX				S			
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX		- And money			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX 🌰	XX				
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

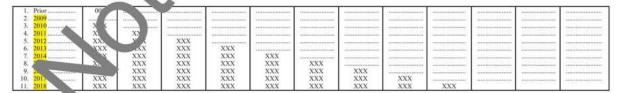
SCHEDULE P - PART 3C - COMMERCIAL A DOTA CK LIABILITY/MEDICAL

. J.	Prior	000											
2.	2009		.00000000000000000000000000000000000000	.01010111111111111111111111111111111111	***************************************				3000316600300000316		-0.00.000.000.000	.00010000000000000000000000000000000000	: NATIONAL DESCRIPTION (1993) NATIONAL (1993)
3.	2010	XXX								***************************************	***************************************		***************************************
4.	2011	XXX	XXX								2011110001111011111	17111107271077711111	
- 5.	2012	XXX	XXX	XXX					38841100041488111	2010111001110001111		100011111111111111111111111111111111111	*********************
6.	2013	XXX	XXX	XXX	XXX	4			***************************************				
7.	2014	XXX	XXX	XXX	XXX	XXX	A	9		***************************************	***************************************		
8.	2015	XXX	XXX	XXX	XXX		XX	£					
9.	2016	XXX	XXX	XXX	XXX A	XXX	1	XXX	201100000000000	334311033414411111	2011/2010/1010/101	1045451111141141141141	
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2018	XXX	XXX	XXX	XX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P – PAR 3D WORKERS' COMPENSATION (EXCLUDING EXCL.) WORKERS' COMPENSATION)



SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL



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

	CUMULA	TIVE PAID NE	T LOSSES AN	D DEFENSE AN	ND COST CON	TAINMENT EX	PENSES REPO	RTED AT YEA	R-END (\$000 C	DMITTED)	1.1	12
Years in Which Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior	000											
2. 2009	******************************			************		030000010000		***************************************	************	110111111111111111111111111111111111111	manner france	
3. 2010	XXX							*************				7
4. 2011	XXX	XXX						***************************************	************			
5. 2012	XXX	XXX	XXX					***************************************	***************************************			
6. 2013	XXX	XXX	XXX	XXX				***************************************	************			~~~~~~~~~~~~
7. 2014	XXX	XXX	XXX	XXX	XXX							
8, 2015	XXX	XXX	XXX	XXX	XXX	XXX						1
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				Marie Annual Control	
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		P		
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

4.	Prior	000		animaliamining			entropelatory control		***************************************				
2	2009								***************************************	A			
3.	2010	XXX							*************				
4.	2011	XXX	XXX		2003444400400000	00101010101011011011			33334043040033341	- march	A commence of the commence of	1160001160011600116	
5.	2012	XXX	XXX	XXX							y		
6.	2013	XXX	XXX	XXX	XXX	www.common				1			
7.	2014	XXX	XXX	XXX	XXX	XXX	100000010000						*****************
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX		1				·
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XX				***************************************	
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX 4	XX		0-11-11-11-11-11-11-1		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P – PART 3G – SPECIAL LIABILITY (OCTAN M. RINE, AIRCRAFT (ALL PERILS). BOILER AND MACALETRY)

1.	Prior	.000	consumptions:	003441413100014	10 HM 014 H0 014 C		con from	- unimon	32284040000002000	33300000000000000	100010000000000000	XXX	XXX
2.	2009	- 300110011100111						-	**************	***************************************		XXX	XXX
3.	2010	XXX										XXX	XXX
4.	2011	XXX	XXX									XXX	XXX
5.	2012	XXX	XXX	XXX	***************************************		A					XXX	XXX
6.	2013	XXX	XXX	XXX	XXX					*************		XXX	XXX
7.	2014	XXX	XXX	XXX	XXX	AAA			*************			XXX	XXX
8,	2015	XXX	XXX	XXX	XXX A	XXX	XXX					XXX	XXX
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 2H - SECTA N 1 - OTHER LIABILITY - OCCURRENCE

1.	Prior	000			-							
2	2009								***************************************			
3.	2010	XXX										
4.	2011	XXX	XXX									
5.	2012	XXX	XXX	1 XX								
6.	2013	XXX	XXX	X	XX			***************************************	***************************************	*************	*************	
7.	2014	XXX	XX	A TOTAL	MXX.	XXX						
- 8.	2015	XXX	XXX	X	XX	XXX	XXX	***************************************	***************************************	***************************************	************	
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	***************************************	***************************************	***************************************	
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
- 11.	2018	XXX	XXX	407	XXX	XXX	XXX	XXX	XXX	XXX		

SCHL ULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1.	Prior	100			************	************		************	+++++++++++++	+++++++++++++++++++++++++++++++++++++++			
2.	2009			***************************************					************	.,		************	,
3.	2010	X				************	000000000000000000000000000000000000000		***********		***************************************		
4.	2011	700	KX	000000000000000000000000000000000000000	000000000000000000000000000000000000000	10030400-0031430#0	00.000000000000000000000000000000000000	100100000000000000000000000000000000000	34344043040433344	303000030000000000000000000000000000000	(1000100000000000000000000000000000000	Henoreson senter	X0000000000000000
5,	2012	XX	XXX	XXX							*****************	***************************************	
6.	2013	XXX	XXX	XXX	XXX								
7.	2014	CI.	XXX	XXX	XXX	XXX							400000000000000
8.	-	100	XXX	XXX	XXX	XXX	XXX						
9.	20	- Summer	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	Accommodate.	1111-011110711-111	

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

	CUMULAT	TIVE PAID NE	T LOSSES ANI	DEFENSE AN	ND COST CON	TAINMENT EX	PENSES REPO	DRTED AT YE	AR-END (\$000)	OMITTED)	11	12
Years in Which Losses Were Incurred	2009	2010	3 2011	2012	2013	2014	2015	2016	2017	2018	Number of Claims Closed With Loss Payme	Number of Claims Closed Without Loss Payment
1. Prior 2. 2017	XXX XXX	XXX XXX	XXX XXX	XXX XXX	XXX XXX	XXX	XXX XXX	000 XXX			XV X X	XXX XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		A STATE OF THE STA	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

The Late of the Control of the Contr	0.000000	to contract to	u	0		CEL PROPERTY TO			400	. 100.	 400
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000		A	
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	MX A		MANAGAMANAN

SCHEDULE P - PART 3K - FIDELITY/SURETY

									100		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000		 XXX	XXX
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 XXX	XXX
3, 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	 XXX	XXX

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, A. CIDEN AND HEALTH)

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	N. I.	00	3140003140401414001	 XXX	XXX
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	CX.	XXX	1100111000111001	 XXX	XXX
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XX	XX	XXX	XXX	XXX

SCHEDULE P - PART 3M - INT RNATIONAL

I. Prior		T									XXX	XXX
2. 2009			- announcement	- and control and con-				34000344403400	340000100000000000000000000000000000000		XXX	XXX
3. 2010	XXX								***************************************		XXX	XXX
2011	XXX	XXX					M				XXX	XXX
. 2012	XXX	XXX	XXX	***************************************				*************	14.0003100.00100004	3443000444444400	XXX	XXX
. 2013	XXX	XXX	XXX	XXX 🕒							XXX	XXX
2014	XXX	XXX	XXX	XXX	X.Ac		***************************************				XXX	XXX
2015	XXX	XXX	XXX	XX	XXX	XXX	onomenous.	40000000000000	-11000010001000101011	34000000000	XXX	XXX
. 2016	XXX	XXX	XXX	Year.	XXX	XXX	XXX	***************************************	******************	***************************************	XXX	XXX
. 2017	XXX	XXX	XXX	X.	XXX	XXX	XXX	XXX			XXX	XXX
2018	YYY	XXX	YYY	YYY	YYY	VYY	XXX	YYY	YYY		XXX	XXX



SCHEDULE P – PART 3N – REINSURANCE NONPROPORTIONAL ASSUMED PROPERTY

	CUMULAT	IVE PAID NET	LOSSES AND	DEFENSE AN	D COST CON	TAINMENT EX	PENSES REPO	DRTED AT YEA	AR-END (\$000 (OMITTED)	11	12
Years in Which	3.	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss	Number of Claims Closed Without Loss
Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Paymor	Payment
1. Prior	000				· ····································		***************************************	. THE CONTRACT OF THE CONTRACT	***************************************	-	X	XXX
2. 2009							***************************************	***************************************			X X	XXX
3. 2010	XXX						***************************************				X.	XXX
4. 2011	XXX	XXX	handa and a second	100000000000000000000000000000000000000		: 1000000000000000000000000000000000000	(00000000000000000000000000000000000000	***************************************	33344333603046		1	XXX
5. 2012	XXX	XXX	XXX		100000000000000000000000000000000000000			***************************************	222000220000000000000000000000000000000		XX.	XXX
6. 2013	XXX	XXX	XXX	XXX							XXX.	XXX
7. 2014	XXX	XXX	XXX	XXX	XXX		***************************************	*************				XXX
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX					XX	XXX
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			·	XX	XXX
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XX	XXX
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	X	XXX

SCHEDULE P – PART 30 – REINSURANCE NONPROPORTIONAL ASSUMED LIABILITY

1.	Prior	000	*************	******************	+000114001110001	30.000.000000000	200000000000000000000000000000000000000	***************************************				XXX	XXX
2.	2009	100000000000000000000000000000000000000						*****************			***************************************	XXX	XXX
3.	2010	XXX				310011101111111	. 31001010101010101		4			XXX	XXX
4.	2011	XXX	XXX	***************************************	***************************************	3000011100010001	30001033000000				***************************************	XXX	XXX
5.	2012	XXX	XXX	XXX								XXX	XXX
6.	2013	XXX	XXX	XXX	XXX					100		XXX	XXX
1.	2014	XXX	XXX	XXX	XXX	XXX				7		XXX	XXX
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX			Z	***************************************	XXX	XXX
9,	2016	XXX	XXX	XXX	XXX	XXX	XXX	1 1/2	A			XXX	XXX
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XX	XXX	***************************************		XXX	XXX
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XX	LY.	XXX	124000000000000000000000000000000000000	XXX	XXX

SCHEDULE P – PART 3P – ŘE SURANCE NONPROPORTIONAL ASSU JED FIN. CIAL LINES

1.	Prior	000								111011011111111111111111111111111111111	***************************************	XXX	XXX
2.	2009							<i>[</i>]			***************************************	XXX	XXX
3.	2010	XXX										XXX	XXX
4.	2011	XXX	XXX					.,				XXX	XXX
5.	2012	XXX	XXX	XXX				393010393044444	1040003300033034	104000000000000000000000000000000000000		XXX	XXX
6.	2013	XXX	XXX	XXX	XX				*****************	***************************************		XXX	XXX
7.	2014	XXX	XXX	XXX	Y	XXX		**********				XXX	XXX
8.	2015	XXX	XXX	XXX	. The same	XXX	XXX	***************************************	***************************************		***************************************	XXX	XXX
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	the section of the se			XXX	XXX
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(111/0710000001)0000	>91000M000M0000C-	XXX	XXX
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	CHARLES TO C	XXX	XXX

$SCHEDULE\ P-PART\ 3R-SECTION\ 1-PRODUCTS\ LIABILITY-OCCURRENCE$

	CUMULAT	IVE PAID NE	T LOSSES AND	DEFENSE AN	D COST CON	TAINMENT EX	PENSES REPO	DRTED AT YEA	AR-END (\$000)	OMITTED)	41	12
Years in Which Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior	000	***************************************	Territoria de la composición dela composición de la composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición de la composición dela composición de la composición dela composición dela composición dela composición dela composición dela composición dela compos						***************************************			
2. 2009												
3. 2010	XXX	***************************************	***************************************		3440440044444			***************************************	10000011000000			
4. 2011	XXX	XXX	***************************************	***************************************					***************************************			
5. 2012	XXX	XXX	XXX						-roommuns			
6. 2013	XXX	XXX	XXX	XXX	344071000000440				***************************************			
7. 2014	XXX	XXX	XXX	XXX	XXX				***************************************			((01)0**********************************
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX			************			
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11000001101000110000	211000011110111111111111111111111111111			
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX S	P W.	100	

SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLA. 1S-M. F

										-	700		
4.	Prior	000	***************************************		***************************************	***************************************	**************	***************************************	***************		A11.	***************************************	****************
2.	2009	· www.interproject.com	***************************************		Ometition to the control of the cont		Overthen statement.	Overtiles the same of			terrational stemp		***************************************
3.	2010	XXX					***************************************						***************************************
4.	2011	XXX	XXX		***************************************	***************************************	***************************************	***************************************			·	***************************************	
5.	2012	XXX	XXX	XXX	: mesonomes:		< surrousmentes:	C STREET STREET	_ sn.cool.coon.		C	- sourcesourcesource	0.0000000000000000000000000000000000000
6.	2013	XXX	XXX	XXX	XXX		***************************************	***************************************			***************************************	***************************************	
7.	2014	XXX	XXX	XXX	XXX	XXX			-				
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX			A			
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	MXX					
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XX	Az knowingowani		- 464410140041001416	113000000000000000000000000000000000000
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	by (Carlotto Market)	Outsian Market (CONTROL SECTION

SCHEDULE P - PART 3S - FINANCIAL GU/RAN. 'MORT GAGE GUARANTY

	45 h 07 doi 16111	5.1x + 300004411	THE WINGSTON .	5. SANGARA	AT THE RESIDENCE OF THE PARTY O	and the second second second	B		7.44			The state of the s
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000			XXX	XXX
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	***************************************	***************************************	XXX	XXX
3, 2018	XXX	XXX	XXX	XXX	XXX	400	100	XXX	XXX		XXX	XXX

SCHEDULE P - I PT 3T - V ARRANTY

	1. Land 1. Lan		CO	and the second second		100	Laurence Control Control				
1. Prior	XXX	XXX	XXX	XXX	XA	JI.	XXX	000	3*00001000100		 01000000000000000000000000000000000000
2. 2017	XXX	XXX	XXX	XX	XXX	XXX	XXX	XXX			
2 2019	VVV	VVV	VVV	14000	VVV	vvv	vvv	VVV	WWW	1	



SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

		BU	LK AND IBNR RE	SERVES ON NET	LOSSES AND DE	FENSE AND COST	CONTAINMENT	EXPENSES REPO	RTED AT YEAR-I	END (\$000 OMITTI	(D)
Y	ears in Which	- 1	2	3	4	5	6	7	8	9	10
Loss	es Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior										
2.	2009	terminorial country		1400000400004000041		***************************************		****************		*******************************	
3.	2010	XXX	***************************************	***************************************			***************************************	*********			***************************************
4.	2011	XXX	XXX								£
5.	2012	XXX	XXX	XXX	***************************************		niconnicon contra		111110010111111111111111111111111111111	more francis	
6.	2013	XXX	XXX	XXX	XXX	***************************************	***************************************				7
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			~~~
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	X	

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILIT VEDI 1L

I.	Prior				Tanana and a second					*	
2.	2009						***************************************				
3.	2010	XXX									
4.	2011	XXX	XXX				Name and Address of the Owner, when the Owner, which the Owner,				
5.	2012	XXX	XXX	XXX			***************************************				torrecommon moon.
6.	2013	XXX	XXX	XXX	XXX		***************************************				
7.	2014	XXX	XXX	XXX	XXX	XXX	39400404337743340003345.0				344000000000000000000000000000000000000
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	Comment of the control of the contro	5		
9.	2016	XXX	XXX	XXX	XXX	XXX	XX	XX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	CXX	XXX	XXX	XXX	

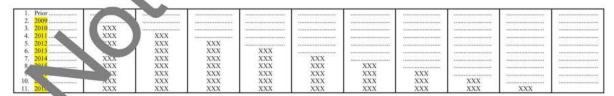
SCHEDULE P - PART 4C - COMMERCIAL AUTOR RUCK & ABILITY/MEDICAL

1.	Prior	***************************************	************					***************************************			*****************
2.	2009										
3.	2010	XXX		101101011010111111111111111111111111111				200000000000000000000000000000000000000		***************************************	34140007644131400
4.	2011	XXX	XXX				market decomme	***************************************			3000000000000000
5.	2012	XXX	XXX	XXX				***************************************			
6.	2013	XXX	XXX	XXX	XXX			***************************************			
7.	2014	XXX	XXX	XXX	XXX					***************************************	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	***************************************	***************************************		
9.	2016	XXX	XXX	XXX	YYY	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	Assemble	LX.	XXX	XXX	XXX	distribution de constitution de	***************************************
11.	2018	XXX	XXX	XXX	XXX	100	XXX	XXX	XXX	XXX	41,000,000,000,000,000

SCHEDULE P – PA T 4D - NORKERS' COMPENSATION (EXCLUDING EX. S' WORKERS' COMPENSATION)

				-	-						
1. Pri	ior		31103110111111103110	inough conne	(110100111111011110111	***************************************	304003000000000000000000000000000000000	110000000000000000000000000000000000000		(testemontocontemp)	300000000000000000000000000000000000000
2. 200	09							***************************************			
3. 20	10	XXX					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
4. 20	11	XXX	XXX					***************************************			
5. 20	12	XXX	XXX	A. A.							
6. 20	13	XXX	XXX	X	XXX		***************************************				
7. 20	14	XXX	XXX	XX	XXX	XXX			***************************************		
8, 20	15	XXX	XXX	XXX	XXX	XXX	XXX				
9, 20	16	XXX	The second	XX	XXX	XXX	XXX	XXX			
10. 20	17	XXX	**		XXX	XXX	XXX	XXX	XXX		
11. 20	18	XXX	9.0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL



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

	BU	JLK AND IBNR RE	ESERVES ON NET	LOSSES AND DE	FENSE AND COST	CONTAINMENT	EXPENSES REPO	RTED AT YEAR-I	END (\$000 OMITTI	ED)
Years in Which Losses Were Incurred	2008	2010	3 2011	2012	5 2013	2014	7 2015	8 2016	2017	10 2018
1. Prior	Tanamanan mar	***************************************								
2. 2009	***************************************	200000000000000000000000000000000000000				100000000000000000000000000000000000000		< *************************************		***************************************
3. 2010	XXX	arminimization and			***************************************			***************************************		
4. 2011	XXX	XXX								
5. 2012	XXX	XXX	XXX		***************************************		101111111111111111111111111111111111111	***************************************		
6. 2013	XXX	XXX	XXX	XXX				***************************************		
7. 2014	XXX	XXX	XXX	XXX	XXX		***************************************			
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX		***************************************		
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX A	W 100 100	
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	X	P.

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY CT 1MS-MADE

1.	Prior	***************************************			***************************************					Y	
2.	2009	mannagamann	***************************************								***************************************
3.	2010	XXX	***************		- 20030000000000000000000000000000000000		**************	***************************************	(11111111111111111111111111111111111111	*****************	
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX					A		
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX	: 120010500000000000000000000000000000000				
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX			******************	
9.	2016	XXX	XXX	XXX	XXX	XXX	XX	XX	*****************		
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

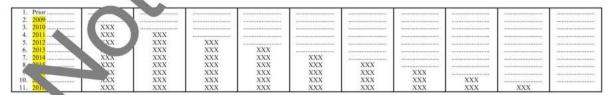
SCHEDULE P – PART 4G – SPECIAL LIABILITY (OCEAN ARINE, RCRAFT (ALL PERILS), BOILER AND MAG TERR

1.	Prior		***************************************				V	***************************************	- *************************************		
2.	2009										
3.	2010	XXX		200000000000000000000000000000000000000			anoma manoma con a	31000325003310003314	< memoreumoneumone		
4.	2011	XXX	XXX						***************************************		***************************************
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX		A	(0.0001000000000111			
7.	2014	XXX	XXX	XXX	XXX	XXX		***************************************		noncommunities.	
8.	2015	XXX	XXX	XXX		YXX	XXX		< *************************************		******************
9.	2016	XXX	XXX	XXX	11.1.1	A.	XXX	XXX			***************************************
10.	2017	XXX	XXX	XXX	XXX	, X	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	[] terminimum trinter

SCHEDULE P - PART 4H - SEC 10 1 - OTHER LIABILITY - OCCURRENCE

1.	Prior		**************		. 100110111110011001	+0.001100311111111111	-troommunitoonist				>=0.00000000000000000000000000000000000
2.	2009				***************************************			***************************************	***************************************		
3.	2010	XXX				,					
4.	2011	XXX	XXX						***************************************		
5.	2012	XXX	XXX	A. A.							
6.	2013	XXX	XXX	N. A.	XXX	***************************************					
7.	2014	XXX	XXX	XX.	XXX	XXX	***************************************	***************************************	***************************************		******************
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	- Table 1	XX	XXX	XXX	XXX	XXX		******************	
10.	2017	XXX			XXX	XXX	XXX	XXX	XXX	****************	
11.	2018	XXX	- XX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SC. PULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE



SCHEDULE P – PART 4I – SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

	BU	LK AND IBNR RE	SERVES ON NET	LOSSES AND DE	FENSE AND COST	F CONTAINMENT	EXPENSES REI	ORTED AT YEAR-	END (\$000 OMITTI	ED)
Years in Which Losses Were Incurred	2009	2010	2011	2012	2013	2014	7 2015	2016	2017	10 2018
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX		- невомнения пенения	200000000000000
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

			According to the Control of the Cont			No. of Contract Contr				
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A		
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-	V.	Separation of the second

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior	5xx	XXX	
----------	-----	-----	--

SCHEDULE P - PART 4L - OTHER (INCLUDING CREAT, A CIDEN LAND HEALTH)

1 3 4	W (C)	0.9	(0				450	A.V		6
1. Prior	XXX	XXX	XXX	XXX	XXX	KX	2X			
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- 4644444444444444444	
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	E-7079001112 59800

SCHEDULE P - PART 4M INTE. NATIONAL

1.	Prior	3331163346444603466				1 Carry 10					300000000000000
2.	2009		***************************************		***************************************		<i></i>	***************************************		***************************************	
3.	2010	XXX					W				200000000000000000000000000000000000000
4.	2011	XXX	XXX	+		A		-1401/1004/100/1100/1004/4444		400010000000000000000000000000000000000	300000000000000000000000000000000000000
5.	2012	XXX	XXX	XXX	A						
6.	2013	XXX	XXX	XXX	XXX					_ +000000000000000000000000000000000000	
7.	2014	XXX	XXX	XXX	XXX	XXX		1001001100010000101010	- 1110001100101100000000000000000000000	***************************************	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX		: +64440010-00004000-	S 4000000000000000000000000000000000000	
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 4N – REINSURANCE NONPROPORTIONAL ASSUMED PROPERTY

	В	ULK AND IBNR R	ESERVES ON NET	LOSSES AND DE	FENSE AND COST	CONTAINMENT	EXPENSES REPO	RTED AT YEAR-E	ND (\$000 OMITTE	D)
Years in Which Losses Were Incurred	2009	2010	2011	2012	5 2013	2014	2015	8 2016	9 2017	10 2018
1. Prior		***************************************	200100000000000000000000000000000000000		***************************************					***************************************
2. 2009	***************************************									
3. 2010	XXX	simmeron di dinamina	rommonomoni.				icomonwoon.	monroomonia.		
4. 2011	XXX	XXX		***************************************			isoniticomoconiii-			
5. 2012	XXX	XXX	XXX							
6. 2013	XXX	XXX	XXX	XXX		- 3000000000000000000000000000000000000	- demonstration and the control of t	***************************************	minute Source	***************************************
7. 2014	XXX	XXX	XXX	XXX	XXX					
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX				L
9. 2016	XXX									
10. 2017	XXX	XXX								
11. 2018	XXX	XXX	XX							

SCHEDULE P – PART 40 – REINSURANCE NONPROPORTIONAL ASSUMED LIABILITY

1.	Prior	70.000000000000000000000000000000000000	300000000000000000000000000000000000000				(90000000000000000000000000000000000000		and January		100000000000000000000000000000000000000
2.	2009	***************************************									
3.	2010	XXX	300000000000000000000000000000000000000	3031600318880316005	- 3000000000000000000000000000000000000		3440010110011100111001				>346003004000000
4.	2011	XXX	XXX			704001000000000000000000000000000000000					***************************************
5.	2012	XXX	XXX	XXX				-			
6.	2013	XXX	XXX	XXX	XXX						***************************************
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	A	- ***********************		
9.	2016	XXX	XXX	XXX	XXX	XXX	XX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XX		XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	CXX	XXX	XXX	XXX	100000000000000000000000000000000000000

SCHEDULE P – PART 4P – K. NSUK NCE NONPROPORTIONAL ASSUM D FILE MEIAL LINES

1. Prior							100010000000000			
2, 2009	THE REAL PROPERTY.	***************************************								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3. 2010	XXX					/				
4. 2011	XXX	XXX								
5. 2012	XXX	XXX	XXX	A second		***************************************	300000000000000000000000000000000000000			
6. 2013	XXX	XXX	XXX	XXX			*******************			***************************************
7. 2014	XXX	XXX	XXX	XXX	XXX					
8. 2015	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018	XXX	XXX	XXX	XX A	XXX	XXX	XXX	XXX	XXX	750000000000000000000000000000000000000

SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

		BU	JLK AND IBNR RI	SERVES ON NET	LOSSES AND DE	FENSE AND COST	CONTAINMENT	EXPENSES REPO	RTED AT YEAR-E	ND (\$000 OMITTE	:D)
	ears in Which	1	2	3	4	5	6	7	8	9	10
Loss	ses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior									141444444444444444444444444444444444444	Time time time
2.	2009	***************************************		***************************************	***************************************			*****************		++++000100001000011	
3.	2010	XXX		***************************************	***************************************		***************************************	***************************************	***************************************		
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX	*****************	(10000100000000000000000000000000000000			04440070704444400070	Distances America	
6.	2013	XXX	XXX	XXX	XXX						-
7.	2014	XXX	XXX	XXX	XXX	XXX	***************************************		200000000000000000000000000000000000000		
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX		***************************************		
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- 2000000000000000000000000000000000000		
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX /	1	7

SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CL. VIS-. 1DE

_						-		<u> </u>	7.70		
1.	Prior	*******************		*****************	***************************************					***************************************	
2.	2009										
3.	2010	XXX	***************************************				1040411004104041010404			***************************************	*****************
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX		***************************************				
7.	2014	XXX	XXX	XXX	XXX	XXX	394000000000000000000000000000000000000				
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	0-0			
9.	2016	XXX	XXX	XXX	XXX	XXX	XX	XX			
10.	2017	XXX	XXX	XXX	XXX	XXX	AXXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	CXX V	XXX	XXX	XXX	3.330-7.44053-0-330

SCHEDULE P – PART 4S – FINANCIAL GUARANT /MC TGAGE GUARANTY

					- A-	2000	V			
1. Prior	XXX	XXX	XXX	XXX	XXX	X	XXX			
2. 2017	XXX	XXX	XXX	XXX	XXX	.1	XXX	XXX	***************************************	
3 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE PAR W RRANTY

		2000000	F 17000 F 100			W	M	5.0		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX		***************************************	
2. 2017	XXX	XXX	XXX	4	A.X.	XXX	XXX	XXX		
2 2010	3.13.15.1	ACREA?	WINING.	NAMES		ACREAL.	323237	ACKENE	ACAPAC.	Starting State of the Starting Starting



SCHEDULE P – PART 5A – HOMEOWNERS/FARMOWNERS

SECTION 1

	Contraction to the Contract of		CUM	ULATIVE NUMB	ER OF CLAIMS O	LOSED WITH LO	OSS PAYMENT D	RECT AND ASS	UMED AT YEAR	-END	
	rs in Which Premiums Were	1	2	3	4	5	6	7	8	9	10
Earn	ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior					***************************************	A)1000000000000000000000000000000000000	***************************************			//////////////////////////////////////
2.	2009		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	***************************************		***************************************	,71770777777777777777777777777777777777			
3.	2010	XXX				3000100031111101000	214003311403110003110			The monomia	
4.	2011	XXX	XXX							-	
5.	2012	XXX	XXX	XXX		Territoria de la constitución	Accountment course :		- severation and and	- marena	
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX				AV VA	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	Visit Proposition Control			
9	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX 4	XX		
11	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A XX	X	555770000000000000000000000000000000000

SECTION 2

	THE STATE OF THE STATE OF			NUME	BER OF CLAIMS	OUTSTANDING	DIRECT AND ASS	SUMED AT Y	END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	2015	2016	2017	10 2018
1,	Prior		***************************************				***************************************	Comment of the Commen		***************************************	*********
2.	2009	***************************************					y				
3.	2010	XXX		***************************************	***************************************						
4.	2011	XXX	XXX							***************************************	***************************************
5.	2012	XXX	XXX	XXX							*************
6.	2013	XXX	XXX	XXX	XXX						22
7.	2014	XXX	XXX	XXX	XXX	XXX	- T			immonomorphism	
8.	2015	XXX	XXX	XXX	XXX	XXX	A STATE OF THE PARTY OF THE PAR	. S			510000000000000000000000000000000000000
9.	2016	XXX	XXX	XXX	XXX	XXX	1	XXX			7,0000000000000000000000000000000000000
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- 40000000000000	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

				CUMULAT	IVI UMBER 6	MSR OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	20	200	6 2014	7 2015	8 2016	2017	10 2018
1.	Prior	****************	*****************		-		****************	300000000000000000000000000000000000000	+		.,
2.	2009			-innanto	and James and						
3.	2010	XXX	***************	comment of farmers		**	*******************				
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	CONT.							
6.	2013	XXX	XXX	A. Carrier	XXX	3000000000000000	310000000000000000000000000000000000000	***************************************	***************************************		*************
7.	2014	XXX	XXX	XXX	XX	XXX					
8.	2015	XXX	XXX	XXX	Y Y	XXX	XXX				
9.	2016	XXX	XXX	XXX	XX	XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	***************************************	***************************************
11.	2018	XXX	XXX A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	***************************************



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

SECTION 1

	and statement of voice	1441 2.5	CUM	ULATIVE NUMB	ER OF CLAIMS O	CLOSED WITH LO	OSS PAYMENT D	DIRECT AND ASS	UMED AT YEAR	-END	
Yea	rs in Which Premiums Were	1	2	3	4	5	6	7	8	9	10
Earn	ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior		***************************************	Anna Company Company	***************************************	***************************************					****************
2.	2009		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
3.	2010	XXX								· · · · · · · · · · · · · · · · · · ·	
4.	2011	XXX	XXX							-	·
5.	2012	XXX	XXX	XXX	14000119401140010141	100000000000000000000000000000000000000		compounds compour	100000000000000000000000000000000000000	in annual	
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX .			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX @	XX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A XX	XX.	S-111111111111111111111111111111111111

SECTION 2

	a region and a second			NUMI	BER OF CLAIMS	OUTSTANDING	DIRECT AND AS	SUMED AT Y	LEND		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	7015	2016	2017	10 2018
1.	Prior			***************************************						100000000000000000000000000000000000000	
2.	2009						·				
3.	2010	XXX			-11400014401440000000000000000000000000	1000000111000000000	anna Tuna		***************************************		
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XXX	100000000000000000000000000000000000000						
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX		-			
8.	2015	XXX	XXX	XXX	XXX	XXX 🔳	A COURT				
9.	2016	XXX	XXX	XXX	XXX	XXX	T.	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- hand before the second	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

				CUMULAT	IVI UMBER	OSR OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	3 2011	20	20	2014	7 2015	8 2016	2017	10 2018
1.	Prior							***************************************		***************************************	
2.	2009	400000000000000000000000000000000000000			Total Section						
3.	2010	XXX	hateronica colonia anno			2			300000000000000000000000000000000000000		
4.	2011	XXX	XXX					***************************************			
5.	2012	XXX	XXX	A XX							
6.	2013	XXX	XXX	T.	XXX		***************************************		1904-1914-1914-1915		
7.	2014	XXX	XXX	XXX	XX	XXX					
8.	2015	XXX	XXX	XXX	Y	XXX	XXX				
9.	2016	XXX	XXX	XXX	XX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

$SCHEDULE\ P-PART\ 5C-COMMERCIAL\ AUTO/TRUCK\ LIABILITY/MEDICAL$

SECTION 1

	Autocomposite on control (CUM	ULATIVE NUME	ER OF CLAIMS O	LOSED WITH LO	OSS PAYMENT D	RECT AND ASS	UMED AT YEAR	-END	
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	7 2015	2016	2017	10 2018
1.	Prior			-		***************************************	334000000000000000000000000000000000000				W
2.	2009		***************************************	vicensum umumir		.000110001110011100	micromounicom.		To our room opening		
3.	2010	XXX				3000100031111101000	2100000110000000				<u> </u>
4.	2011	XXX	XXX							-	
5.	2012	XXX	XXX	XXX		Territoria de la constitución	Accommunication :		- severation management	- management	
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	Valley and the same of the sam			***************************************
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX 4	XX		
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A XX	XX	2222.252.352.350.532.3

SECTION 2

	CONTRACTOR OF MAKE TO	2/2		NUME	BER OF CLAIMS	OUTSTANDING	DIRECT AND ASS	SUMED AT Y	END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	2015	2016	2017	10 2018
1.	Prior						***************************************		9	~ entrementalisment	*************
2.	2009						y	- YES			
3.	2010	XXX		***************************************	***************************************						
4.	2011	XXX	XXX							***************************************	***************************************
5.	2012	XXX	XXX	XXX					. (************************************		***************************************
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX	- B			incommunity	
8.	2015	XXX	XXX	XXX	XXX	XXX	A CALL			520000000000000000000000000000000000000	201000000000000000000000000000000000000
9.	2016	XXX	XXX	XXX	XXX	XXX	T. I	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- 400000000000000	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000000000000000000000000000000000000000

				CUMULAT	IVI UMBER	MSR OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	20	5	2014	7 2015	8 2016	2017	10 2018
1.	Prior		***************				***************************************	3			
2.	2009			-immonion Fra	and James and		***************************************		The second second		
3.	2010	XXX	***************	comment of famous		**	**************				
4.	2011	XXX	XXX				***************************************				
5.	2012	XXX	XXX	CONT.							
6.	2013	XXX	XXX	1	XXX				***************************************		
7.	2014	XXX	XXX	XXX	XX	XXX					
8.	2015	XXX	XXX	XXX	No. of the last	XXX	XXX				
9	2016	XXX	XXX	XXX	XX	XXX	XXX	XXX			
10	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		***************************************
11.	2018	XXX	XXX A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 5D – WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1

	- A TOTAL THE STATE OF		CUM	ULATIVE NUMB	ER OF CLAIMS (LOSED WITH LO	OSS PAYMENT D	IRECT AND ASS	UMED AT YEAR	-END	
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	5 2013	6 2014	7 2015	8 2016	9	10 2018
1.	Prior	-00000000000000000000000000000000000000		333140033344034007	***************************************	(-0.000000000000000000000000000000000000	(10000000000000000000000000000000000000		
2.	2009	***************************************					******************		***************************************	A	
3.	2010	XXX	100000000000000000000000000000000000000	**************************************					, m	9	- A
4.	2011	XXX	XXX				***************************************				
5.	2012	XXX	XXX	XXX			- 2401010101010101010101010101010101010101				
6.	2013	XXX	XXX	XXX	XXX					- The same of the	
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX		GAME AND ST	
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	AXXX	All	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	JULY	XXX	DEFENDERATES

SECTION 2

				NUME	BER OF CLAIMS	OUTSTANDING	DIRECT AND AS	SV ED AT YEAR	D		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014		2016	2017	10 2018
1.	Prior		*****************		100000000000000000000000000000000000000	***************************************	A	-			
2.	2009						Toronto				
3.	2010	XXX	inconstruction	300000000000000000000000000000000000000	310301000100000000000000000000000000000	· control control control	- 01000	man summer :	*****************************	: trackers and constrained.	< 10031100000000000000000000000000000000
4.	2011	XXX	XXX	***************************************							
5.	2012	XXX	XXX	XXX			A			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
6.	2013	XXX	XXX	XXX	XXX					***************************************	***************************************
7.	2014	XXX	XXX	XXX	XXX	XXX		·			
8.	2015	XXX	XXX	XXX	XXX	XXX	XX	***************************************			
9.	2016	XXX	XXX	XXX	XXX	. XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	

				CUMULAT	IVE NUMBER OF	CLAIMS P POR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	7 2015	8 2016	2017	10 2018
1.	Prior					·					
2.	2009					***************************************				Distribution	< 10071011101007101
3.	2010	XXX	>=====================================	man de la communa de la commun							
4.	2011	XXX	XXX				***************************************				
5.	2012	XXX	XXX	XX			DA4440444444444444444444444444444444444				
6.	2013	XXX	XXX	XXX	XX	***************************************	2400044400440004400				***************************************
7.	2014	XXX	XXX	XXX	2 7	XXX					
8.	2015	XXX	XXX	XXX	XX.	XXX	XXX	**************	***************************************	- treeters and constitutes	
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX 📤	XXX	XXX	XXX	XXX	XXX	XXX	XXX	Same

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL

SECTION 1

	Authorization on the C		CUM	ULATIVE NUMB	ER OF CLAIMS O	LOSED WITH LO	OSS PAYMENT D	IRECT AND ASS	UMED AT YEAR	-END	
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	5 2013	6 2014	7 2015	2016	2017	2018
1.	Prior						***************************************				//
2.	2009			***************************************			***************************************				
3.	2010	XXX				300000000000000000000000000000000000000	214003311403110003110				
4.	2011	XXX	XXX							-	·
5.	2012	XXX	XXX	XXX		***************************************	-0.400004440000000000000000000000000000	300000000000000000000000000000000000000			
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	Visitorialismostorial			*****************
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX 4	XX		
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A XX	XX	SECTION SECTIO

SECTION 2

	CONSTRUCTION DE MINO ES			NUMI	BER OF CLAIMS	OUTSTANDING	DIRECT AND ASS	SUMED AT Y	LEND		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	2015	2016	2017	10 2018
1.	Prior		***************************************				***************************************		M		**************
2.	2009	***************************************			***************************************		y		/		
3.	2010	XXX		***************************************	***************************************						
4.	2011	XXX	XXX							***************************************	*****************
5.	2012	XXX	XXX	XXX							>>>+>+>+
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX	- B			innonnennen	
8.	2015	XXX	XXX	XXX	XXX	XXX	A CAN A			5	5030000000000
9.	2016	XXX	XXX	XXX	XXX	XXX	1	XXX			200000000000000000000000000000000000000
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- 4400000000000000	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000000000000000000000000000000000000000

				CUMULAT	IVI UMBER 6	MSR OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	20	200	6 2014	7 2015	8 2016	2017	10 2018
1.	Prior	****************	*****************		-		****************	300000000000000000000000000000000000000	+		.,
2.	2009			-innanto	and James and						
3.	2010	XXX	**************	comment of farming		**	************************				
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	CONT.							
6.	2013	XXX	XXX	A. Carrier	XXX	3000000000000000	310000000000000000000000000000000000000	***************************************	***************************************		*************
7.	2014	XXX	XXX	XXX	XX	XXX					
8.	2015	XXX	XXX	XXX	Y Y	XXX	XXX				
9.	2016	XXX	XXX	XXX	XX	XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	***************************************	***************************************
11.	2018	XXX	XXX A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	***************************************



$SCHEDULE\ P-PART\ 5F-MEDICAL\ PROFESSIONAL\ LIABILITY-OCCURRENCE$

SECTION 1A

	and statement of voice	141 71	CUM	ULATIVE NUMB	ER OF CLAIMS O	LOSED WITH LO	OSS PAYMENT D	DIRECT AND ASS	UMED AT YEAR	-END	
Yea	rs in Which Premiums Were	1	2	3	4	5	6	7	8	9	10
Earn	ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior		***************************************	Anna Company Company	***************************************			***************************************			******************
2,	2009		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						***************************************		
3.	2010	XXX								· · · · · · · · · · · · · · · · · · ·	
4.	2011	XXX	XXX							-	·
5.	2012	XXX	XXX	XXX	Terroritani terroritani		C Shistern assemblement	summer manager	100000000000000000000000000000000000000	in and a second	
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX .		AND AND A	
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX @	XX		
11	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A XX	CX.	5.533115.001000

SECTION 2A

	activities when you will be			NUMI	BER OF CLAIMS	OUTSTANDING	DIRECT AND AS	SUMED AT Y	LEND		
	rs in Which Premiums Were and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	7015	2016	2017	10 2018
1.	Prior			***************************************					-	***************************************	
2.	2009						·				
3.	2010	XXX			-1140-0144-0144-0144-0144-0144-0144-014	1000000111000000000	anna Tues		***************************************		
4.	2011	XXX	XXX						***************************************		
5.	2012	XXX	XXX	XXX					***************************************		- 400 Herrin Herrin
6.	2013	XXX	XXX	XXX	XXX					***************************************	
7.	2014	XXX	XXX	XXX	XXX	XXX			**************************************	immountment	
8.	2015	XXX	XXX	XXX	XXX	XXX 🔳	A CONTRACTOR				
9.	2016	XXX	XXX	XXX	XXX	XXX	T.	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- Interconnections	- 400014044014004
O.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

				CUMULAT	IVI UMBER	SIS R OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	3 2011	20	20	6 2014	7 2015	8 2016	2017	10 2018
1.	Prior		***************************************					*********************		100000000000000000000000000000000000000	
2.	2009	***************************************		manage for	Account See		- International Control			Annual Control of the	
3.	2010	XXX				·		<0.000.000.000.000.000.000	***************************************		
4.	2011	XXX	XXX					***************************************			
5.	2012	XXX	XXX	XX							
6.	2013	XXX	XXX	T.	XXX		***************************************	(0.00)	***************************************		
7.	2014	XXX	XXX	XXX	XX	XXX					
8.	2015	XXX	XXX	XXX	Y	XXX	XXX				
9.	2016	XXX	XXX	XXX	XX	XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

$SCHEDULE\ P-PART\ 5F-MEDICAL\ PROFESSIONAL\ LIABILITY-CLAIMS-MADE$

SECTION 1B

	Authorization on the C		CUM	ULATIVE NUME	BER OF CLAIMS O	CLOSED WITH LO	OSS PAYMENT D	DIRECT AND ASS	UMED AT YEAR	-END	
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	5 2013	6 2014	7 2015	8 2016	2017	10 2018
1.	Prior						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************			
2.	2009		***************************************	vicemumini,			***************************************				
3.	2010	XXX				300010000000000000000000000000000000000	3140033144131400313				
4.	2011	XXX	XXX							-	·
5.	2012	XXX	XXX	XXX		Territorio de la constitución de	.01000000000000000000000000000000000000	100000000000000000000000000000000000000	- severation management	- manager - manager	
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX				All Marie	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	Visitorenitario			****************
9	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX 4	XX		
1	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A XX	X	PROGRAMMENT STATES

SECTION 2B

	THE STATE OF THE STATE OF			NUME	BER OF CLAIMS	OUTSTANDING	DIRECT AND AS	SUMED AT Y	LEND		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	2015	2016	2017	10 2018
1,	Prior						***************************************		9		**********
2.	2009	***************************************			***************************************		y			***************************************	
3.	2010	XXX	was a series of the series of	***************************************	***************************************				(2240)14100014100100		*************
4.	2011	XXX	XXX							***************************************	***********
5.	2012	XXX	XXX	XXX							*************
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX	6 T			immonomorphis	
8.	2015	XXX	XXX	XXX	XXX	XXX	W. A.				200000000000000000000000000000000000000
9.	2016	XXX	XXX	XXX	XXX	XXX	1	XXX			7,0000000000000000000000000000000000000
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- 4000000000000000000000000000000000000	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

				CUMULAT	IVI UMBER	MSR OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	20	5	2014	7 2015	8 2016	2017	10 2018
1.	Prior		**************				***************************************	300000000000000000000000000000000000000	+		.,
2.	2009			-immonion Fra	Airman Air		***************************************		in the second se	· manifestation in the control of th	
3.	2010	XXX	***************	comment of farmers		**	***************************************		: +0-01100001100011-	<	
4.	2011	XXX	XXX				***************************************	**************		***************************************	***************************************
5.	2012	XXX	XXX	CONT.							
6.	2013	XXX	XXX	A. Carrier	XXX	300000000000000000000000000000000000000	3140034440031400310	***************************************			**************
7.	2014	XXX	XXX	XXX	XX	XXX					
8.	2015	XXX	XXX	XXX	Yes	XXX	XXX	***************************************			
9.	2016	XXX	XXX	XXX	XX	XXX	XXX	XXX			
10.	2017	XXX	XXX	at XXX	XXX	XXX	XXX	XXX	XXX		**************
11.	2018	XXX	XXX A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	***************************************



SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

			CUM	ULATIVE NUME	BER OF CLAIMS	CLOSED WITH LO	OSS PAYMENT D	DIRECT AND ASS	UMED AT YEAR	R-END	
	ars in Which Premiums Were sed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	10 2018
1.	Prior	400000000000000000000000000000000000000	Minoria Company	2011/10011/10011100	700000000000000000000000000000000000000			00.000000000000000000000000000000000000	***************************************		
2.	2009			300110011110000100	110000100011100011			(11111111111111111111111111111111111111			S-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-00-11-
3.	2010	XXX		304010101010101000	-1+0010111100010001010		_ 3000000000000000000000000000000000000		***************************************	A	
4.	2011	XXX	XXX								· ·
5.	2012	XXX	XXX	XXX	and a few partitions of the second		Samuel Control of the	***************************************			
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX				- Comment	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX 🗥			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XX		
11	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	AVXX	XX	2.000

SECTION 2A

				NUM	BER OF CLAIMS	OUTSTANDING I	DIRECT AND A	SSUMED AT YES	END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	7 115	8 2016	2017	10 2018
1.	Prior		MERCHANICO STREET	201011001011110101100	-11000000000000000000000000000000000000				J	111000110001100	< +00*****************************
2.	2009	***************************************	111001110001100011		-100001000011000016		A	7	***************************************	+++++++++++++++++++++++++++++++++++++++	
3.	2010	XXX					- II				. 10011111111111000
4.	2011	XXX	XXX	391110033111111100						11100001010111000-	
5.	2012	XXX	XXX	XXX	***************************************	99					
6.	2013	XXX	XXX	XXX	XXX				***************************************	****************	
7.	2014	XXX	XXX	XXX	XXX	XXX			***************************************		
8.	2015	XXX	XXX	XXX	XXX	XXX	100	7			
9.	2016	XXX	XXX	XXX	XXX	XXX A	XX	XXX	100000000000000000000000000000000000000		
0.	2017	XXX	XXX	XXX	XXX	► XXX	XXX	XXX	XXX	and the state of t	
11.	2018	XXX	XXX	XXX	XXX	NY N	XXX	XXX	XXX	XXX	

SECTIO 3A

				CUMULAT	IVE UMBER	MMS R OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	ars in Which Premiums Were aed and Losses Were Incurred	2009	2010	2011	201		2014	7 2015	2016	2017	10 2018
1.	Prior				1			***************************************			
2	2009	343434	haternoon continuence.			T		***************************************	***************************************	***************************************	
3.	2010	XXX	***************************************	Annage Janeau	manual free	W	***************************************	*****************	***************************************		
4.	2011	XXX	XXX					****************			
5.	2012	XXX	XXX	1			***************************************	*****************	***************************************		***************************************
6.	2013	XXX	XXX	XX	XXX			<0.000000000000000000000000000000000000	344000110001100044C	: tire(00*160000000000000000000000000000000000	C 400 1100 0 10100 11
7.	2014	XXX	XXX	XXX	XX	XXX	34444403444444444	***************************************	***************************************		
8.	2015	XXX	XXX	XXX	X	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1111000010101111000	*****************
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

			CUM	ULATIVE NUMB	ER OF CLAIMS O	LOSED WITH LO	OSS PAYMENT I	DIRECT AND ASS	UMED AT YEAR	-END	
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	8 2016	2017	10 2018
1.	Prior		Communication				·				
2.	2009		10000000000000000			30001000011000111	314003344443140033)	***************************************	(*******************	man famous a	
3.	2010	XXX	Xxxxxxxxxx		***************************************			***************************************		A	
4.	2011	XXX	XXX				***************************************	***************************************		900	·
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX	3000000000000000	3160039449931814147	***************************************			113000000000000000000000000000000000000
7.	2014	XXX	XXX	XXX	XXX	XXX		***************************************		- A	*************
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX 🔈			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XX		0.0000000000000000000000000000000000000
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XX	

SECTION 2B

	ÿ.		3	NUM	BER OF CLAIMS	OUTSTANDING I	DIRECT AND AS	SUMED AT YES	END	3	
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	5 2013	2014	215	8 2016	2017	10 2018
1,	Prior								J		*************
2.	2009						A			***************************************	
3.	2010	XXX									
4.	2011	XXX	XXX		S (1000000000000000000000000000000000000	Temperature and the control of the c				- scienniamiciones	***********
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX		A				
7.	2014	XXX	XXX	XXX	XXX	XXX			***************************************		0.0000000000000000000000000000000000000
8.	2015	XXX	XXX	XXX	XXX	XXX A	A TON	10			
9.	2016	XXX	XXX	XXX	XXX	XXX .	XX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	XXX	VWV	XXX	XXX	XXX	XXX	

SECTIO 3D

	- 3			CUMULAT	IVE UMBER	MS R OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	20%	5	6 2014	2015	8 2016	2017	10 2018
1.	Prior										
2.	2009		200000000000000000000000000000000000000								
3.	2010	XXX				V	2140091010000100000	*1010-001100010-0	(0.010000000000000000000000000000000000	4440040000000	222001100000000000000000000000000000000
4.	2011	XXX	XXX			200000000000000000000000000000000000000	***************************************		-10001000000000000000000000000000000000		2220400000000000
5.	2012	XXX	XXX	100							
6.	2013	XXX	XXX	XX	XXX						***********
7.	2014	XXX	XXX	XXX	XX	XXX				***************************************	
8.	2015	XXX	XXX	XXX	75%	XXX	XXX	***************			*************
9.	2016	XXX	XXX	XXX	XX	XXX	XXX	XXX		- economonicones	1120111111111111111111
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		*************
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

2000	and statement of voice	141 71	CUM	ULATIVE NUMB	ER OF CLAIMS	CLOSED WITH LO	OSS PAYMENT I	DIRECT AND ASS	UMED AT YEAR	-END	
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	3 2011	2012	2013	2014	7 2015	2016	2017	10 2018
1.	Prior						***************************************				
2.	2009	isomorphonic	muumoomuum	***************************************					***************************************		
3.	2010	XXX									
4.	2011	XXX	XXX								·
5.	2012	XXX	XXX	XXX	140000000000000000000000000000000000000		C SOLICE DESCRIPTION OF THE PARTY OF THE PAR		***************************************		
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX				All more	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				*************
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX @	XX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A XX	XX.	-5 - 6 9 13 1 0 0 III 10 5 0 0

SECTION 2A

	ACTIVITIES AND ACTIVITIES			NUM	BER OF CLAIMS	OUTSTANDING	DIRECT AND AS	SUMED AT Y	LEND		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	7015	2016	2017	10 2018
1.	Prior			***************************************		**************		anni James	Pag	telementary :	
2.	2009			***************************************		***************************************	·				
3.	2010	XXX		200000000000000000000000000000000000000		100000010000000000000000000000000000000	anna from		***************************************		
4.	2011	XXX	XXX	300000000000000000000000000000000000000					***************************************		
5.	2012	XXX	XXX	XXX	-0.000000000000000000000000000000000000				***************************************		
6.	2013	XXX	XXX	XXX	XXX					***************************************	
7.	2014	XXX	XXX	XXX	XXX	XXX			**************************************	immountment	icomoromoon
8.	2015	XXX	XXX	XXX	XXX	XXX 🔳	A CONTRACTOR				
9.	2016	XXX	XXX	XXX	XXX	XXX	T.	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- Interconnections	
II.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION

				CUMULAT	IVE EMBER	MSR OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	3 2011	20	20	6 2014	7 2015	8 2016	2017	10 2018
1.	Prior							*************			
2.	2009	411111111111111111111111111111111111111			- 100 minus			24.11.11.11.11.11.11.11.11.11.11.11.11.11			
3.	2010	XXX	harman and the second			·		***************************************	***************************************		
4.	2011	XXX	XXX					***************************************	***************************************		
5.	2012	XXX	XXX	A. A.							
6.	2013	XXX	XXX	T	XXX	***************************************	***************************************				
7.	2014	XXX	XXX	XXX	XX	XXX					
8.	2015	XXX	XXX	XXX	Y	XXX	XXX				
9.	2016	XXX	XXX	XXX	XX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	AXX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX /	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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$SCHEDULE\ P-PART\ 5R-PRODUCTS\ LIABILITY-CLAIMS-MADE$

SECTION 1B

	PURTURE OF THE PARTY		CUM	ULATIVE NUMB	ER OF CLAIMS (CLOSED WITH LO	OSS PAYMENT I	DIRECT AND ASS	UMED AT YEAR	-END	
Year	rs in Which Premiums Were	1	2	3	4	5	6	7	- 8	9	10
Earn	ed and Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior					***************************************	Accommencers	***************************************			**************
2.	2009		***************************************	vicensumumumi			***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Terromomomo		
3.	2010	XXX				300000000000000000000000000000000000000	3140333144331400314)				
4.	2011	XXX	XXX							-	·
5.	2012	XXX	XXX	XXX	: ####################################	Territoria de la constitución de	-31400334003334003437		:		
6.	2013	XXX	XXX	XXX	XXX		3110333111131110313				***************************************
7.	2014	XXX	XXX	XXX	XXX	XXX				All	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	Villendellendellen			*************
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX 4	XX		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A XX	XX	3337 373 375 375

SECTION 2B

	THE STATE OF THE STATE OF	200		NUMI	BER OF CLAIMS	OUTSTANDING	DIRECT AND AS	SUMED AT Y	LEND		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	2015	2016	2017	10 2018
1,	Prior									- entremental de la constitución	stanta inclusione
2.	2009				***************************************				/		
3.	2010	XXX	***************************************	***************************************	(1)				(2240-1240-001110-100		***************
4.	2011	XXX	XXX							***************************************	
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX	- T			immonomorphis	
8.	2015	XXX	XXX	XXX	XXX	XXX	A TOPY				500000000000000000000000000000000000000
9.	2016	XXX	XXX	XXX	XXX	XXX	1	XXX			700000000000000000000000000000000000000
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	- 4000000000000000000	
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

				CUMULAT	IVI UMBER	MSR OR	TED DIRECT AN	D ASSUMED AT	YEAR-END		
	rs in Which Premiums Were ed and Losses Were Incurred	2009	2010	2011	20	201	2014	7 2015	8 2016	9 2017	10 2018
d _e :	Prior				The same of the sa		***************************************		+		.,
2.	2009			-immonia Fra	and annual		***************************************		termination of the		
3.	2010	XXX		· · · · · · · · · · · · · · · · · · ·		·	*************	***************************************	: +0.0110000100001-:		
4.	2011	XXX	XXX				***************************************			***************************************	
5.	2012	XXX	XXX	CONT.							
6.	2013	XXX	XXX	The state of the s	XXX	100000000000000000000000000000000000000	200000000000000000000000000000000000000	***************************************		***************************************	
7.	2014	XXX	XXX	XXX	XX	XXX					
8.	2015	XXX	XXX	XXX	Yes	XXX	XXX	***************************************			
9	2016	XXX	XXX	XXX	W.X.X	XXX	XXX	XXX			
10.	2017	XXX	XXX	xXX	XXX	XXX	XXX	XXX	XXX		***************************************
11.	2018	XXX	XXX A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	



SCHEDULE P - PART 5T - WARRANTY

SECTION 1

		CUM	ULATIVE NUME	ER OF CLAIMS	CLOSED WITH L	OSS PAYMENT I	DIRECT AND AS	SSUMED AT YEAR	-END	
Years in Which Premiums Were	1	2	-3	4	5	6	7	- 8	A STATE OF THE PARTY OF THE PAR	10
Earned and Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	.017	2018
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX		A	·
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SECTION 2

			NUM	BER OF CLAIMS	OUTSTANDING	DIRECT AND AS	SUMED AT YEAR	-EA		
Years in Which Premiums Were Earned and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	2015	2016	2017	10 2018
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	W		
2. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XX	11.3	XXX	. 100111111111001

	0	z = 0	CUMULAT	IVE NUMBER OF	CLAIMS REPOR	Tr. VR	TANDA	MED A	T YEAR-END	.v. = .	
Years in Which Premiums Were Earned and Losses Were Incurred	2009	2010	2011	2012	2013	20).		15	8 2016	2017	10 2018
1. Prior	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	XXX XXX XXX	, the second	7	XXX XXX XXX	XXX	xxx	***************************************

$SCHEDULE\ P-PART\ 6C-COMMERCIAL\ AUTO/TRUCK\ LIABILITY/MEDICAL$

SECTION 1

	a managamanan sa masa		CUN	MULATIVE PRE	MIUMS EAR?	NED DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT)	TED)	10 010 4	11
	ears in Which Premiums Were irned and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	7 2015	2016	2017	10 2018	Current Year Premiums Earned
1.	Prior		******************	*****************	***************************************	хонновинин	**************	300000000000000000000000000000000000000	340044449400			2
2.	2009	. omenonomy	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			***************************************	200000000000000000000000000000000000000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		- percentagement	Townson and the	1
3.	2010	XXX				22121111111111111111	201010000000000000000000000000000000000	20011000000000			tong-	
4.	2011	XXX	XXX						***************************************			
5.	2012	XXX	XXX	XXX	**************************************	21121100-material	3311140001110004		- 2000000000000			301000000000000000000000000000000000000
6.	2013	XXX	XXX	XXX	XXX							L
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	200000000000000000000000000000000000000	700000000000000000000000000000000000000			V
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	Description A			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX 🚳			
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	AXXX		
2.	Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	WXX V		
3.	Earned Premiums (Sc P-Pt 1)	07975	800000	(00000)		10000000		00000		100		XXX

SECTION 2

				CUMULA	TIVE PREMIU	MS EARNED O	EDED AT YEA	AR-END (\$000)	STIED)	MA.		- 11
	ears in Which Premiums Were med and Losses Were Incurred	2009	2010	2011	2012	5 2013	2014	20/		2017	10 2018	Current Year Premiums Earned
1.	Prior			***************************************	***************************************			T				
3.	2010	XXX		***************************************	***************************************						(10000000000000000000000000000000000000	344400030404000304001
4.	2011	XXX	XXX	XXX	***************************************	X0444404444444		Santa Carre	<i>J</i>		***************************************	
6.	2013	XXX	XXX	XXX	XXX	2311111311111111			·····		10000000000	
7.	2014	XXX	XXX	XXX	XXX	XXX				***************************************		***************************************
9.	2016	XXX	XXX	XXX	XXX	XXX	1.16	XXX	30001000100	+000100000000		***************************************
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Total	XXX	XXX	XXX	XXX	XXX	XX	XXX	XXX	XXX	XXX	***************************************
13.	Earned Premiums (Sc P-Pt 1)					-	-					XXX

SCHEDULE P – PART 6D WORKEP COMPENSATION (EXCLUDING FOR SSS WORKER COMPENSATION)

			CUN	MULAT PR	EMIUMS EAR?	DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)		11
	ears in Which Premiums Were rned and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	7 2015	8 2016	2017	10 2018	Current Year Premiums Earned
1.	Prior						***************************************	300000000000000000000000000000000000000			***************************************	
2.	2009								34001110300000			
3.	2010	XXX		A			20101000101111111111		330031103331010			
4.	2011	XXX	XXX	(C)		***************************************	***************************************	200010000000000000000000000000000000000	200000000000000000000000000000000000000			
5.	2012	XXX	XXX 🔺	XXX	***************************************	one of the second second	200000000000000000000000000000000000000	zoomroomroom.		Terrestration		
6.	2013	XXX	XXX	XXX	XXX							
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	V		XXX	XXX	XXX	- 2000001000100011			100000000000000000000000000000000000000	301001010000000000000
9.	2016	XXX	AX	XX	XXX	XXX	XXX	XXX				
0.	2017	XMK.	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
L	2018	7 8	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2.	Total	- X A	XX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3.	Earned Premiums (Sc P-Pt 1)			100	3							XXX

	100		CUMUL	ATIVE PREMI	JMS EARNED (EDED AT YE	AR-END (\$000)	OMITTED)		- 1	11
Years in Which Premiums W Earned and Losses Were J	200	2010	2011	2012	5 2013	6 2014	2015	8 2016	2017	10 2018	Current Year Premiums Earned
1. Prior	·					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			- www.		
2. 2009.				311111103111111	***************************************			+000110011111	(-0.00100)-0001		
3. 2010	XXX		animum mar	***************************************		transportation.	- transmission	Internation.	innermonaria.	manufacture.	
4. 2011	XXX	XXX	300000000000000000000000000000000000000		**************						
5. 2012	XXX	XXX	XXX								
6. 2013	XXX	XXX	XXX	XXX			: :::::::::::::::::::::::::::::::::::::			-1141930101010144410-	
2	XXX	XXX	XXX	XXX	XXX				i-morrowanie	***************************************	
8. 915	XXX	XXX	XXX	XXX	XXX	XXX					
9.	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
0. 201	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			***************************************
1. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	310000000000000000000000000000000000000	30100101000000000000
2. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

-0.00	O SECURE OF SECURIOR		CUN	MULATIVE PR	EMIUMS EAR!	NED DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)	and the same	11
	ears in Which Premiums Were	1	2	3	4	5	.6	7	8	9	10	Current Year
Ea	irned and Losses Were Incurred	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	Premiums Earned
1.	Prior				***************************************	***************************************		***************************************				
2,	2009					****************				***************************************		The
3.	2010	XXX		***************************************	***************************************				1			
4.	2011	XXX	XXX	***************************************					·			
5.	2012	XXX	XXX	XXX	: secondata de construir ;	300000000000000000000000000000000000000			- 100003100000000	300000000000000000000000000000000000000		
6.	2013	XXX	XXX	XXX	XXX	memoranian	ненинин		toromoune			
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX		************			V
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	merconicom a			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX 🐗			
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	AXXX		
12.	Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	A.Y.	-	
13.	Earned Premiums (Sc P-Pt 1)	1005-024	-1931045	Described 1	26/63/26/24	13053250	100000	1000000	1			XXX

SECTION 2

				CUMULA	TIVE PREMIU	MS EARNED O	EDED AT YEA	AR-END (\$000)	TTED)	E.A.		11.
	ears in Which Premiums Were arned and Losses Were Incurred	2009	2010	2011	2012	5 2013	2014	7 201	2	2017	10 2018	Current Year Premiums Earned
1.	Prior			***************************************	(**************************************						**************	
2.	2009		· innereconnect	300,000,000,000	200-0007-0039441						*************	
3.	2010	XXX		***************************************	31000031031111	HARMOTOTION :						
4.	2011	XXX	XXX						J			
5.	2012	XXX	XXX	XXX						THE STATE OF THE S	, incommon and .	
6.	2013	XXX	XXX	XXX	XXX			January Salar	\$			
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	48		- Internation marks	***************************************	***************************************	
9.	2016	XXX	XXX	XXX	XXX	XXX	A 150	XXX		***************************************	***************************************	
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
II.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sc P-Pt 1)						-					XXX

SCHEDULE P - PART 6H - OZ YER LIAP LITY - OCCURRENCE

CTIO.

			CUN	MULAT PR	EMIUMS EARN	DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)		11
	ears in Which Premiums Were rned and Losses Were Incurred	2009	2010	2011	2012	2013	2014	7 2015	8 2016	2017	10 2018	Current Year Premiums Earned
1,	Prior									***************************************		
2.	2009							***************************************		***************************************	***********	
3.	2010	XXX		A	minima him		11100310111031400		:		***************************************	
4.	2011	XXX	XXX	P	***************************************					***************************************		
5.	2012	XXX	XXX 🛕	XXX	***************************************	maconocompic	erropromoner.		- commonwer	***************************************	www.	***************************************
6.	2013	XXX	XXX	XXX	XXX					***************************************	**************	
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	Y		XXX	XXX	XXX	: 4140034000330016:::	: 101003110111110	:wormancooursec	SHARON GEOOFFEESS	ALCO DE CONTRO D
9.	2016	XXX	ZXX	XX	XXX-	XXX	XXX	XXX		***************************************	*************	
10.	2017	XMK	XXX	XXX	XXX	XXX	XXX	XXX	XXX	111711000010111111		
11.	2018	2000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Total	- The A	XX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sc P-Pt 1)	400										XXX

SECTION 2A

	-		CUMULA	TIVE PREMIU	MS EARNED C	EDED AT YEA	AR-END (\$000 C	OMITTED)			11
Years in Which Premiums W Earned and Losses Were	200	2010	2011	2012	5 2013	6 2014	2015	8 2016	2017	10 2018	Current Year Premiums Earned
1. Prior		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
2. 2009		***************************************		************			***********	****************		100000000000000000000000000000000000000	
3. 2010	XXX	homennini		in the second second	***************************************	***************************************	***************************************	manuscon and			
4. 2011	XXX	XXX		1110-0-1111/11110	***********	: 394400000000000000000000000000000000000					
5. 2012	XXX	XXX	XXX	100000000000000000000000000000000000000	***************************************						1010344711000710344771000710
6. 2013	XXX	XXX	XXX	XXX				.1400.01111.0111111	*****************		
3	XXX	XXX	XXX	XXX	XXX	101111001110011	***************************************	***************************************			
8. 915	XXX	XXX	XXX	XXX	XXX	XXX	************	***************************************			
9.	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 201	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

11.00	Harriston on the state		CUN	MULATIVE PRI	EMIUMS EAR?	NED DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)	100 000 0	11
	ears in Which Premiums Were med and Losses Were Incurred	2009	2010	3 2011	2012	2013	6 2014	7 2015	8 2016	2017	10 2018	Current Year Premiums Earned
1.	Prior		***************************************	***************************************	***************************************	X000000000000						
2.	2009	, increase and in				***************************************	*************				Townson of the	
3.	2010	XXX				22121111111111111111	201011000301111110	>=====================================			torque from	
4.	2011	XXX	XXX					***************************************	***************************************			
5.	2012	XXX	XXX	XXX	THEORET CONTRACTOR	***************************************	3310140000000000	3 00000 00000 0000 C				30100011110001100111100
6.	2013	XXX	XXX	XXX	XXX			30001000000000000000000000000000000000				
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	200000000000000000000000000000000000000	20-00-00-00-00-00-00			×
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	menoniment A			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX 🚳			
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		***************************************
2.	Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XX V		
3.	Earned Premiums (Sc P-Pt 1)	1000755	(0.0574)	1000000		100000000	2000 May 1	1000000		1		XXX

SECTION 2B

				CUMULA	TIVE PREMIU	MS EARNED C	EDED AT YEA	R-END (\$000)	TTED)	80		11
	ears in Which Premiums Were med and Losses Were Incurred	2009	2010	3 2011	2012	5 2013	6 2014	7 204	2	2017	10 2018	Current Year Premiums Earned
1.	Prior											
2,	2009			******************			30011000000000		romon		100000000000000000000000000000000000000	-14440(0)01(04000000000000000000000000000
3.	2010	XXX		***************************************	***************************************	200701130000000		\				30000000000000000000000000000000000000
4.	2011	XXX	XXX	***************************************	***************************************				All		***************************************	100000000000000000000000000000000000000
5.	2012	XXX	XXX	XXX	annecourse.	300000000000000000000000000000000000000				Toomioonioo	TOPHOTOGRAPH.	
6.	2013	XXX	XXX	XXX	XXX	222211111111111111111			5		100000000000000000000000000000000000000	
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	44					301000111000110011000110000
9.	2016	XXX	XXX	XXX	XXX	XXX	A	XXX	3010031100381000			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2018	XXX	XXX	XXX	XXX	XXX A	XXX	XXX	XXX	XXX		*******************************
12.	Total	XXX	XXX	XXX	XXX	XXX	XX	XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sc P-Pt 1)					-	-					XXX

SCHEDULE P - PAR 6M - INT RNATIONAL

CTIC.

			CUN	MULAT PR	EMIUMS EAR?	DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)		11
	ears in Which Premiums Were med and Losses Were Incurred	2009	2010	2011	2012	2013	6 2014	7 2015	8 2016	2017	10 2018	Current Year Premiums Earned
1.	Prior						***************************************	300000000000000000000000000000000000000				
2.	2009								34001110300000			
3.	2010	XXX		A			20101000000000000		330031103331010			
4.	2011	XXX	XXX	(C)		***************************************	201000000000000000000000000000000000000	200010000000000000000000000000000000000	200000000000000000000000000000000000000			
5.	2012	XXX	XXX 🔺	XXX	***************************************	one of the second	200000000000000000000000000000000000000	zoomeoomeoni -		, proming and the same of the	100000000000000000000000000000000000000	
6.	2013	XXX	XXX	XXX	XXX			34447144444444				
7.	2014	XXX	XXX	XX	XXX	XXX						
8.	2015	XXX	V		XXX	XXX	XXX	- 200000 (D000000000000000000000000000000			100000000000000000000000000000000000000	301000000000000000000000000000000000000
9.	2016	XXX	AX	XX	XXX	XXX	XXX	XXX	300000000000000000000000000000000000000			
0.	2017	XMK.	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
I.	2018	7 1	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2.	Total	1 × A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sc P-Pt 1)											XXX



SCHEDULE P – PART 6N – REINSURANCE NONPROPORTIONAL ASSUMED PROPERTY

SECTION 1

			CUN	MULATIVE PRI	EMIUMS EARN	NED DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)		11
	ears in Which Premiums Were rned and Losses Were Incurred	2009	2010	2011	4 2012	2013	6 2014	2015	8 2016	2017	10 201	Current Year termiums Earned
1.	Prior	in the same of the		31111131611131611	510000000000000000000000000000000000000			- Immunitations	10000000000			
2.	2009				***************************************							
3.	2010	XXX		340000000000000			HERMAN CONTRACTOR		: 100001100 mire	***************************************		
4.	2011	XXX	XXX						10000000000			L
5.	2012	XXX	XXX	XXX								
6.	2013	XXX	XXX	XXX	XXX				*************			Y
7.	2014	XXX	XXX	XXX	XXX	XXX	interestations.		Tarreton di tarreto A			
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX					
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX		A		
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
H.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XX	100		
12.	Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	months and a second contract to
13.	Earned Premiums (Sc P-Pt 1)		0000000		1.000000	33322	110000	100000	-	N 4		XXX

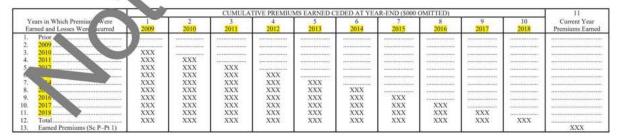
SECTION 2

				CUMULA	TIVE PREMIU	MS EARNED (EDED AT YEA	AR-END	TIME	9		11
	ears in Which Premiums Were rned and Losses Were Incurred	2009	2010	2011	2012	2013	2014	015	3 <mark>016</mark>	2017	10 2018	Current Year Premiums Earned
1,	Prior	***************************************			310000010010111			-				
2.	2009	***************************************		20000000000000	***************************************				-			
3.	2010	XXX		,manuscommun.						THE PERSON NAMED IN COLUMN 1	,	***************************************
4.	2011	XXX	XXX		***************************************			· · · · · · · · · · · · · · · · · · ·			-10000000000000000000000000000000000000	
5.	2012	XXX	XXX	XXX	***************************************		man desire					
6.	2013	XXX	XXX	XXX	XXX	monogeni					*************	
7.	2014	XXX	XXX	XXX	XXX	XXX	A		-20000000000000	*****************	*************	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
9.	2016	XXX	XXX	XXX	XXX	XXX A	XXX	XXX				
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2018	XXX	XXX	XXX	XXX	XXX	700	XXX	XXX	XXX		***************************************
12.	Total	XXX	XXX	XXX	XXX	ALC: N	XX	XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sc P-Pt 1)					M a						XXX

SCHEDULE P – PA T 60 – PJ INSURANCE NONPROPO VAL SUMED LIABILITY

SEC ION

			CUN	MULATIVE PR	UMS EAR	D DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)		11
	ears in Which Premiums Were rned and Losses Were Incurred	2009	2010	3 2011		2013	2014	7 2015	8 2016	2017	10 2018	Current Year Premiums Earned
1.	Prior					***********	inteleprotections.	:		Section (1997)		
2.	2009				***************************************		1414440011100110				***************************************	
3.	2010	XXX										
4.	2011	XXX	XXX	Vanamur .	300001100011	Terromore constants	HOUSEHHOUSE :	2 mm m m m m m m m m m m m m m m m m m	7 (compress comp.	3939-0039-00344466	3137001110000010115	110101111111111111111111111111111111111
5.	2012	XXX	XXX	T.								
6.	2013	XXX	1	L.	XXX							
7.	2014	XXX	XXX	XXX	XXX	XXX		timing the time	Total Control of Contr	***************************************	***************	***************************************
8.	2015	X	XXX	XXX	XXX	XXX	XXX					
9.	2016	X A	XXX	XXX	XXX	XXX	XXX	XXX				
10.	2017	1300	KX.	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2018	XX	1	XXX	XXX	XXX	XXX	XXX	XXX	XXX	noonen men	
12.	Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sc P-Pt 1)		1	15000000	5000000000	100.000	200 ACA		1,000,000,000	Service Control	1440400000	XXX



$SCHEDULE\ P-PART\ 6R-PRODUCTS\ LIABILITY-OCCURRENCE$

SECTION 1A

100	HATCHARD OF THE STATE		CUN	MULATIVE PRI	EMIUMS EAR?	NED DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)	NO 1946 W	11
	ears in Which Premiums Were med and Losses Were Incurred	2009	2010	3 2011	2012	5 2013	6 2014	7 2015	8 2016	2017	10 2018	Current Year Premiums Earned
1.	Prior		***************************************	***************************************	***************************************	***************************************	***************************************	300000000000000000000000000000000000000				
2.	2009						*************					
3.	2010	XXX		***************************************		221211111111111111111111111111111111111		>=====================================	20-00311031111111		tonge from	
4.	2011	XXX	XXX						***************************************			
5.	2012	XXX	XXX	XXX	Terroristance	33041000000000111	20101000000000	: 000000000000000000000000000000000000	200000000000000000000000000000000000000			300000000000000000000000000000000000000
6.	2013	XXX	XXX	XXX	XXX							L
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX		7-1-1-1-1			
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX 🚳			
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	AXXX		
2	Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	WXX V	The same of the sa	
3.	Earned Premiums (Sc P-Pt 1)				- AAA			aaa	-			XXX

SECTION 2A

				CUMULA	TIVE PREMIU	MS EARNED C	EDED AT YEA	AR-END (\$000)	(TED)	10		11
	ears in Which Premiums Were med and Losses Were Incurred	2009	2010	3 2011	2012	5 2013	2014	7 204	2	2017	10 2018	Current Year Premiums Earned
1.	Prior			***************************************								
2,	2009			****************			3911100000000		- Common	(4440) (4410) (4414)	100000000000000000000000000000000000000	
3.	2010	XXX									***************************************	
4.	2011	XXX	XXX	***************************************					All		***************************************	
5.	2012	XXX	XXX	XXX	moreoven.	307000000000000000000000000000000000000				recommende	TOPHOTOGRAPH.	
6.	2013	XXX	XXX	XXX	XXX	222211111111111111111			5		100000000000000000000000000000000000000	
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	44		20000000000000			300000000000000000000000000000000000000
9.	2016	XXX	XXX	XXX	XXX	XXX	A	XXX	3000037000380000			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11.	2018	XXX	XXX	XXX	XXX	XXX A	XXX	XXX	XXX	XXX		***************************************
12.	Total	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sc P-Pt 1)			-		-	1					XXX

SCHEDULE P – PART 6R – PRO VCTS LIA JILITY – CLAIMS–MADE

STIO. B

			CU	MULAT PR	EMIUMS EAR?	DIRECT A	ND ASSUMED	AT YEAR-EN	D (\$000 OMIT	TED)		11
	ears in Which Premiums Were med and Losses Were Incurred	2009	2010	2011	2012	5 2013	6 2014	7 2015	8 2016	2017	10 2018	Current Year Premiums Earned
1.	Prior			***************************************			***************************************	30000000000000000000000000000000000000			***************************************	
2.	2009								34001110300000			
3.	2010	XXX		A			201010000000000000		330031103331010			
4.	2011	XXX	XXX	(C)		***************************************	201000000000000000000000000000000000000	200010000000000000000000000000000000000	200000000000000000000000000000000000000			
5.	2012	XXX	XXX 🔺	XXX	***************************************	STREET, STREET	200000000000000000000000000000000000000	zoomeoomeoni -		- personal properties		300000000000000000000000000000000000000
6.	2013	XXX	XXX	XXX	XXX							
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	V		XXX	XXX	XXX				100000000000000000000000000000000000000	
9.	2016	XXX	ACK	XI	XXX	XXX	XXX	XXX				
0.	2017	XMK	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
L	2018	3 8	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2.	Total	100	XX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3.	Earned Premiums (Sc P-Pt 1)			100				-				XXX

SECTION 2B



SCHEDULE P – PART 7A – PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 OMITTED)

SECTION 1

		1 Total Net Losses	2 Net Losses and Expenses Unpaid on Loss	3 Loss Sensitive as	4 Total Net	Net Premiums Written on Loss	Loss sitive as
	Schedule P-Part 1	Expenses Unpaid	Sensitive Contracts	Percentage of Total	Premiums Written	Sensitive Contr	Percentag Total
1.	Homeowners/Farmowners		·	5.00.000.000.000.000.000			
2.	Private Passenger Auto Liability/Medical			- 2000000000000000000000000000000000000			Manager 1
3.	Commercial Auto/Truck Liability/Medical						
4.	Workers' Compensation						
5.	Commercial Multiple Peril	200000000000000000000000000000000000000	191-0-01-11-00-11-00-11-00-11-00-1	: 2000000000000000000000000000000000000		- min vanconomic	
6.	Medical Professional Liability—Occurrence						7
7.	Medical Professional Liability-Claims-made					A	/
8,	Special Liability						
9.	Other Liability—Occurrence						
10	Other Liabilities Claims-made	Territorio de constitución de la					
11.	Special Property						
12	Auto Physical Damage						
13.	Fidelity/ Surety			340000000000000000000000000000000000000			
14.	Other						
15.	International		MINERAL CONTRACTOR CON				
16.	Reinsurance-Nonproportional Assumed					TO THE REAL PROPERTY.	15-40017-10-0000-017-10-10-000-
	Property	XXX	XXX	XXX	Tr.	XXX	XXX
17.	Reinsurance-Nonproportional Assumed	-10010000	-1.0354050			1855000	0.03697
	Liability	XXX	XXX	MAX P	XXX	XXX	XXX
18.	Reinsurance-Nonproportional Assumed	000000	000000			62000	520,000
	Financial Lines	XXX	XXX	XXX	CX	XXX	XXX
19.	Products Liability—Occurrence						
20.	Products Liability—Claims-made						
21.	Financial Guaranty/Mortgage Guaranty						
22.	Warranty						
23.	Totals			AT TO			

SECTION 2

			Tree-Contractor	PEODOLO MIND D	PER ECOL PRINTS C	I CONTAINM	LUCKE KOPER KALENDERS	KLI OKTLD AT I	FOAK 1214D (2000)	OWNER TEADY	
	ears in Which		2	-3	A4		6	7	8	9	10
Pol	icies Were Issued	2009	2010	2011		2013	2014	2015	2016	2017	2018
1,	Prior	***************				***************************************	***************************************	311100000000000000			***************************************
2	2009	***************************************					***************************************	***************************************		101100000000000000000000000000000000000	. 1000000000000
3	2010	XXX	***************************************					300000000000000000000000000000000000000	- moone or on moone in		
4.	2011	XXX	XXX				***************************************	***************************************		[11100011100111101]	. 1000000000000000000000000000000000000
5.	2012	XXX	XXX	XXX							
6.	2013	XXX	XXX	X	XXX		***************************************	310000000000000000		: Interestéronteron.	
7.	2014	XXX	XXX	XA	XXX	XXX	***************************************			***************************************	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	hand the same of t	A STATE OF THE STA	
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1	2018	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	

	A PARTICIPATION OF THE PARTICI			A A	EXPI	NSES AT YEAR-	END (\$000 OMIT	TED)			
	Years in Which	1	2	3	(4)	5	6	7	8	9	10
Pol	icies Were Issued	2009	10	2011	2012	2013	2014	2015	2016	2017	2018
1.	Prior							4000000000000	***************************************		
2.	2009		-	J	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			***************************************			
3,	2010	XXX			311111111111111111111111111111111111111		***************************************	***************************************		10101	
4.	2011	XXX	XX				***************************************	*******************			
5.	2012	XXX	T.	XXX	- Sentimonento meneral	440000400000000000000000000000000000000	***************************************	300000000000000000000000000000000000000	THEOREMON HOUSE	: +1144000114000114000+11	
6.	2013	AXX.	XXX	XXX	XXX	201002011111111111111111111111111111111					
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	TY	XXX	XXX	XXX	XXX	XXX				
9.	2016	T.	XXX	XXX	XXX	XXX	XXX	XXX			
0.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	America (1997)

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (Continued)

SECTION 4

Years in Which Policies Were Issued		NET EARNED PREMIUMS REPORTED AT YEAR-END (\$000 OMITTED)										
		2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
												1.
2.	2009						.,					
3.	2010	XXX					*****************	(10001111111111111111111111111111111111				
4.	2011	XXX	XXX	***************************************								
5.	2012	XXX	XXX	XXX	(10000000000000000000000000000000000000	T0101000000000000000000000000000000000				144.0403419-031410-44		
6.	2013	XXX	XXX	XXX	XXX	100000000000000000000000000000000000000	****************	***************************************	***************************************			
7.	2014	XXX	XXX	XXX	XXX	XXX						
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				M	
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			10	
.01	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		///	
II.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	. XXX		100	

7.107	Company to the Company	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR D (\$000 OMITTED)									
	ears in Which ies Were Issued	2009	2010	2011	2012	5 2013	6 2014	2015	2016	2017	10 2018
1.	Prior	*************		***************************************		***************************************		111	J	141411111111111111111111111111111111111	
2.	2009	pateria constituent			***************************************						
3.	2010	XXX									
4.	2011	XXX	XXX						***************************************		
5.	2012	XXX	XXX	XXX	Second/entuners	200010001010010101	- minovinonyma		×	ucos-1100141011	- 2000000000000000000000000000000000000
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	The state of the s				
9.	2016	XXX	XXX	XXX	XXX	XXX	A KX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	T.	XX	XXX	Herocontrol (Control)	
11.	2018	XXX	XXX	XXX	XXX	XXX	A. A. S.	XXX	XXX	XXX	D 102 67 00 21 100

SCHEDULE P – PART 7B – REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

	Schedule P—Part I	Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	Net Premiums Written on Los Sensitive Coph	6 Percen of Total
1.	Homeowners/Farmowners	***************************************		340000000000000000000000000000000000000			
2.	Private Passenger Auto Liability/Medical			***************************************			
3.	Commercial Auto/Truck Liability/Medical	300000000000000000000000000000000000000					Mar.
4.	Workers' Compensation	300000000000000000000000000000000000000				and American	32
5.	Commercial Multiple Peril						
6.	Medical Professional Liability—Occurrence						
7.	Medical Professional Liability—Claims-made						
8.	Special Liability						
9.	Other Liability—Occurrence	300000000000000000000000000000000000000	34-0-0-(410-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-			pominimonimor :	-: 1007010301000100010001000
10.	Other Liability-Claims-made						
11	Special Property						
12.	Auto Physical Damage		H-1000000000000000000000000000000000000	hipsoid designation of the contraction of the contr		monganiamontomition.	- 4003140.000.003140.001100
13.	Fidelity/ Surety			***************************************			
14.	Other						
15.	International					***************************************	
16.	Reinsurance-Nonproportional Assumed				6 W		
	Property						
17.	Reinsurance-Nonproportional Assumed						
	Liability						
18.	Reinsurance-Nonproportional Assumed					1 1/21/2007	
	Financial Lines				communication of the communica	< 1001000000000000000000000000000000000	.: 111111111111111111111111111111111111
19.	Products Liability—Occurrence						
20,	Products Liability—Claims-made						
21.	Financial Guaranty/Mortgage Guaranty	344044034444444		many kanganan			
22.	Warranty				*		
23.	Totals				N20	1	

SECTION 2

			INCURRED	LOSSES AND I	DEFENSE AND C	ONTAIN	XPENSES	REPORTED AT Y	EAR-END (\$000	OMITTED)	
P	Years in Which tolicies Were Issued	2009	2010	2011	2012		2014	2015	8 2016	2017	10 2018
.1.	Prior										
2.	2009					· · · · · · · · · · · · · · · · · · ·					- concentermose
3.	2010	XXX						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
4.	2011	XXX	XXX								
5.	2012	XXX	XXX	XX2	130						
6.	2013	XXX	XXX	X		·	-teatronnameno-		: manufacturing		- annountement
7.	2014	XXX	XXX	WXX.	XX	XXX					
8.	2015	XXX	XXX	XX	XXX	XXX	XXX				
9.	2016	XXX	XXX		XXX	XXX	XXX	XXX	***************************************	***************************************	
10.	2017	XXX	XXX	XXX	XX	XXX	XXX	XXX	XXX		
11.	2018	XXX	XXX	XXX	V	XXX	XXX	XXX	XXX	XXX	

SECTION 3

	BULK AND IN	CURRED BUT N	REPORTED	RESERVES FOR	LOSSES AND DE	FENSE AND CO	ST CONTAINME	NT EXPENSES A	T YEAR-END (S	000 OMITTED)
Years in Which Policies Were Issued	2009	_010	1	2012	2013	2014	7 2015	8 2016	2017	10 2018
1. Prior 2. 2009		\(\(\)	à							
3. 2010 4. 2011	XX		y							
5. 2012	XXX	XX.	XXX							
7. 2014	XXX	XXX	XXX	XXX	XXX					*******************
8. 2015 9. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017	XXX	XXX XXX	XXX	XXX	XXX	XXX	XXX	XXX XXX	XXX	***************************************

SCHEDULE P – PART 7B – REINSURANCE LOSS SENSITIVE CONTRACTS (Continued) SECTION 4

				NET E	ARNED PREM	IUMS REPORT	ED AT YEAR-I	ND (\$000 OMI	TTED)		
Yea	ars in Which	I	2	3	- 4	5	6	7	8	9	10
Policie	es Were Issued	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
L	Prior	***************************************		***************************************	***************************************	***************************************	***************************************	***************************************		***************************************	_ 101000000000000
2.	2009			***************************************	***************************************	*****************	***************************************	*************	***************************************	***************************************	
3.	2010	XXX	· management					<			
4.	2011	XXX	XXX			***************************************					
5.	2012	XXX	XXX	XXX	· immoormoonnii ·	· verroomeroomer	, introcommonanti	· immorrows	· immonimum i	. iconomiconomico	400
6.	2013	XXX	XXX	XXX	XXX						
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX	- mormonema			
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			-
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX A		
11.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	X	

SECTION 5

		NET	RESERVE FOR	PREMIUM AD	JUSTMENTS A	ND ACCRUEE	RETROSPECT	TVE PREMIUM	S AT YEAR-E	\$000,0MIT	TED)
	es Were Issued	2009	2010	2011	2012	2013	6 2014	7 2015	2014	2017	10 2018
1	Prior	***************************************		***************************************		******************	***************************************			CONTRACTOR OF THE PARTY OF THE	
2.	2009			***************************************	***************************************	***************************************				·	
3.	2010	XXX	: minorimonino:	::::::::::::::::::::::::::::::::::::		< surrouszmunszet ::		< 0.00000000000000000000000000000000000		Zamonamono:	_ remonents
4.	2011	XXX	XXX		***************************************	***************************************				***************************************	
5.	2012	XXX	XXX	XXX				4			
6.	2013	XXX	XXX	XXX	XXX	(00000000000000000000000000000000000000		T	A		**************
7.	2014	XXX	XXX	XXX	XXX	XXX					
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX.		A		
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX		Ø	***************************************	
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		. 400100000000
11.	2018	XXX	XXX	XXX	XXX	XXX	187	XXX	XXX	XXX	3 50 30 30 30 30 30 30 30 30 30 30 30 30 30

SECTION &

				INCURRED AI	DJUSTABLE CO	OMMISSIONS	REI TEDAT	YEAR-END (\$	000 OMITTED)	
	ars in Which s Were Issued	2009	2010	2011	2012	2013	2014	2015	8 2016	2017	2018
1.	Prior		***************************************						***************************************		***************************************
3.	2010	XXX		*****************							_ 101011110111
4.	2011	XXX	XXX	XXX				***************************************	***************************************		
6.	2013	XXX	XXX	XXX	XX						
7.	2014	XXX	XXX	XX	XXX	XXX	XXX				
9,	2016	XXX	XXX	A.	XXX	XXX	XXX	XXX	***************************************	***************************************	4000000000
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7

				ESERVES	FOR COMMIS	SION ADJUST	MENTS AT YE	AR-END (\$000	OMITTED)		
Yea	rs in Which Were Issued	2009	2010	2011	2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1	Prior	· mark francis			***************************************	*************	***************	***************************************	(*************************************	***************************************	
2.	2009			/	***************************************	***************************************	***************************************	***************************************	491100000000000000000000000000000000000	***************************************	***************************************
3.	2010	XX		Ø	,						
4.	2011	XX	X						***************************************		
5.	2012	XXX	XXX	XXX	in the statement	Secretarion	Separate sep	**************************************	incommunity :		***************************************
6.	2013	XXX	XX	XXX	XXX		***************************************		***************************************	***************************************	***************************************
7.	2014	XXX	X X	XXX	XXX	XXX				***************************************	
8.	2015	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2018	XX A	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	221100000000000000000000000000000000000

SCHEDULE P INTERROGATORIES

1.		orting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in EREs provided for reasons other than DDR are not to be included.		
1.1	Does the company issue Medical Professional Liability Claims M "ERE") benefits in the event of Death, Disability, or Retirement	Made insurance policies that provide tail (also known as an extended reporting endorsement, or	Yes []	No []
1.2		Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?	S	-
1.3	Does the company report any DDR reserve as Uncarned Premium		Yes []	
	Does the company report any DDR reserve as loss or loss adjustr		Yes []	
1.4	Ministration representative framework and a second		ies []	
1.5	If the company reports DDR reserve as Unearned Premium Reserve Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 pl	erve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – lus 11.2?	1	No 1
1.6	If the company reports DDR reserve as loss or loss adjustment ex- reported in Schedule P;	xpense reserve, please complete the following table corresponding to where these reservas are		
		DDR Reserve Included in	1	5
		Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	-	
	Years in Which Premiums Were Earned and	1	-	_
	Losses Were Incurred	Section 1: Occurrence Section 2s ims-Made		_
	1,601 Prior			
	1.602 2009			#6
	1.603 2010 1.604 2011			
	1.605 2012			20
	1.606 2013			41
	1.608 2015			26
	1.609 2016		***************************************	
	1.610 2017			43
	1.612 Totals			
	A A A A A A A A A A A A A A A A A A A			
2.	The definition of allocated loss adjustment expenses (ALAE) at 1998. This change in definition applies to both paid and ung "Adjusting and Other") reported in compliance with these definit	paid expenses. Are these expenses (now) and as "Defense and Cost Containment" and	Yes []	No []
3.	The Adjusting and Other expense payments and reserves shoul reported, closed and outstanding in those years. When allocating expense should be allocated in the same percentage used for it should be reported according to the reinsurance contract. For A count information is not available, Adjusting and Other expension that the property of the property.	e Adjusting and Other expense etwo and estimate in a group or a pool, the Adjusting and Other expense assumed Adjusting and Other expense assumed Adjusting and Other expense assumed representations where suitable claim	Yes []	No []
4.	Do any lines in Schedule P include reserves that are reported discounts on Page 10?	gross any discours coresent are of future payments, and that are reported net of such	Yes []	No []
	If yes, proper disclosure must be made in the Notes to Financial Part 1, Columns 32 and 33.	Stan units, as specified in a Instructions. Also, the discounts must be reported in Schedule P -		
	Schedule P must be completed gross of non-tabular discounting.	Work paper stating assecuent calculations must be available for examination upon request.		
	Discounting is allowed only if expressly permitted by the state in	to the state of th		
5.	What were the net premiums in force at the end of the year	5.1 Fidelity	S	
	(in thousands of dollars)	5.2 Surety	s	
6.	Claim count information is reported per claim or per claimant	icate which).		
	If not the same in all years, explain in Interrog			
7.1	The information provided in Schoole P will be used by many	persons to estimate the adequacy of the current loss and expense reserves, among other things, r accounting changes that have occurred that must be considered when making such analyses?	Yes []	No []
7.2	An extended statement may be attac		#0	
			55	
			70	
			II.)	
			41	
			80	
			#5	

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN Allocated By States And Territories

		1	and Membership Premiums and Policies 1	Including Policy Fees Less Return Premiums on Not Taken	4 Dividends Paid	5	6	7	Finance and Service	9 Direct Premit Written for Federal
	States, Etc.	Active Status	Direct Premiums Written	Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Charges Inc ded in P miums	Purchasing Groups (Included in Col. 2)
	Alabama AL		***************************************	***************************************	***************************************		*******************	100010000000000		
	AlaskaAK			200110031103110010	313111111111111111111111111111111111111	:: maximum max	900000000000000000000000000000000000000	***************************************	. manner of	((01)0-010-010-010-01
	Arizona AZ			***************************************			***************************************			
	Arkansas AR									
	alifomiaCA	***************************************			***************************************	***************************************	***************************************			40100111111001111
	ColoradoCO									
	ConnecticutCT				***************************************	***************************************	3	A		
	Delaware				***************************************	`*************************************				<(13)34444444(13)344
								and the same of		***************************************
				*****************************		**************************************				
	GA Gawaii GA		***************************************	***************************************	***************************************				***************************************	
	daho ID	***************************************				***************************************		-	***************************************	******************
			***************************************	(*****************************				100	464000400306660	400000000000
	Ilinois IL ndiana IN	4911003310009110041		(100.0000000000000000000000000000000000	410001011000000000000000000000000000000		manocontropy		***************************************	0103700000000000000
	owa IA			***************************************			X	Controllination .	- 40(400440000000)	000000000000000000000000000000000000000
							() (
	Cansas KS Centucky KY									((0))
		· interestination of the		***************************************						
	ouisiana LA daine ME			300M00011000000000000000000000000000000			-		***************************************	
				***************************************	***************************************		- Comment		***************************************	*****************
										4
23. N	dassachusetts MA dichigan MI		***************************************	***************************************	340000000000000000000000000000000000000			+0-0+1000000000000000	***************************************	************
		Antonomico de la constitución de		Years and the second				- tooleanni marini marini	***************************************	*****************
	Minnesota MN									
	Mississippi MS		AUDITED DITECTO TELLONIC	(00000000000000000000000000000000000000	-241010444070000370444070		***************************************			010130404000003331
	dissouri MO		·	someonementoro	33344444444003444444444		***************************************	+0-010000000000000000000000000000000000		<0.010000000000000000000000000000000000
	Montana MT Nebraska NE			300000000000000000000000000000000000000			viiimmittoiimmi.			doberneous
	Nevada NV		***************************************	***************************************						
								+		510100000000000000000000000000000000000
	New HampshireNH								***************************************	
	New JerseyNJ	******************		200102030000000000000000000000000000000	A13400-011100311104014		4101010111001011101	+0311400111031140		0.0000000000000000000000000000000000000
	New York NY		***************************************	1401000010000100010			310000000000000000000000000000000000000		***************************************	**************
	New York									
										((0))
		***************************************					***************************************			
	OhioOH	***************************************	001101010000000000000000000000000000000		A		.00000000000000000000000000000000000000		4441000410004111	**************
	OklahomaOK		000000000000000000000000000000000000000	200100000000000000000000000000000000000			. 1010101001100101010101			400000000000000000000000000000000000000
	Oregon OR									
	PennsylvaniaPA	- interessessional	***************************************		framen frame	***************************************	***************************************	+0.011110111101111		****
	Rhode Island		***************************************	/			***************************************			***************************************
							***********			**************
	So. DakotaSD TennesseeTN	: presumentation				***************************************	201110001100111001			***************************************
				- Commerce			***************************************		***************************************	000000000000000000000000000000000000000
	exasTX			ming	A		***************************************		***************************************	***************************************
	JtahUT			many fair			500000000000000000000000000000000000000		3.3344444444444444444444444444444444444	
	/ermontVT				7				***************************************	
7. 1	/irginiaVA	***************************************				***************************************	***************************************		***************************************	
8. 1	VashingtonWA						.00000000000000000000000000000000000000		***************************************	**************
	West VirginiaWV			2001(0000000000000000000000000000000000			1001010001100001	. 10-0100-000-010-01	. 10100010001000	((0))((1)(0)(1)))
	WisconsinWI									
	Wyoming WY				***************************************		***************************************	++	***************************************	***************************************
	American SamoaAS GuamGU	;	- Common				240000000000000000000000000000000000000			*****************
	GuamGU Puerto RicoPR		- Constant	A	711111111111111111111111111111111111111		311111110111110111111111111111111111111			
4. 1	Puerto Rico PR J.S. Virgin Islands VI				***************************************	***************************************	****************			4000000000
						***************************************	***************************************			***************************************
	Northern Mariana Islands MP						***************************************			***************************************
	anada	X			741111111111111111111111111111111111111	· · · · · · · · · · · · · · · · · · ·	The state of the state of		-	***************************************
		VIII					0			
	otals	XXX								
	ILS OF WRITE-INS									
001		XXX	- h				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
002.		XXX			***************************************		***************************************			***********
003.		XXX		***************************************	***************************************		***************************************		***************************************	
998.	Sum. of remaining write-ins									
	for Line 58 from overflow	1			1					
999.	page			,						
agg	Totals (Lines 58001 rough 58003+58998) (Lin 58 above)					The second secon				

Explanation of basis of allocation of premiums by states, etc.

(a) Active Status Cond.	
mod insurance carrier or domiciled RRG	R - Registered - Non-domiciled RRGs
Eligible - Reporting - digible or approved to write surplus lines in the state (other than their state of domicile - See DSLI)	Q - Qualified - Qualified or accredited reinsurer
Despets Surplus Lines Insurer (DSLI) - Reporting contines authorized to write surplus lines in the state of domicile	N - None of the above - Not allowed to write business in the state

SCHEDULE T - PART 2

INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN Allocated By States and Territories

			2	Direct Bu	siness Only	2 5	_
	States, Etc.	l Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Typ Contract	6 Totals
J.S	Alabama AL						
2.	AlaskaAK						
3.	ArizonaAZ	(10000000000000000000000000000000000000		***************************************			
4.	ArkansasAR						·
5.	CaliforniaCA			***************************************			
6.	ColoradoCO						
7.	ConnecticutCT						
8.	DelawareDE			***************************************			
9.	District of Columbia DC			***************************************			
10.	Florida FL						
11.	GeorgiaGA						
12.	HawaiiHI	: 4.0.000.000.000.000.000.000.000.000.000	000000000000000000000000000000000000000		-01001101101010101010101010101010101010	onangamentanananana	201111111111111111111111111111111111111
13.	IdahoID						
14.	Illinois IL						
15.	IndianaIN						
16.	Iowa IA						
17.	Kansas KS					Y	*************************
18.	Kentucky KY						
19.	Louisiana LA						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
20.	Maine ME						
21.	Maryland MD						
22.	Massachusetts MA			A			***************************************
23.	Michigan MI						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
24.			Солешнесонемитегонеми				399911111111111111111111111111111111111
							33777
25.	Mississippi		***************************************				***************************************
26.	Missouri MO						***************************************
27.	MontanaMT				— ———————————————————————————————————		330311131111003110331111131111111111111
28.	NebraskaNE						***************************************
29.	Nevada NV				010010000000000000000000000000000000000		
30.	New HampshireNH		remonstrommentscontent 1				***************************************
31.	New Jersey NJ						
32.	New MexicoNM						***************************************
33.	New YorkNY						***************************************
34.	North Carolina	***************************************	consequences and frame	Manage Comments	Waterwoodstooksensensensensen	-33400000000000000000000000000000000000	3545144004000000000000000000000000000000
35.	North DakotaND				0.0000000000000000000000000000000000000		3944400944009460094040314034
36.	OhioOH						20*************************************
37.	OklahomaOK						
38,	OregonOR	700000000000000000000000000000000000000	and the same of the same of		***************************************		
39.	Pennsylvania PA			***************************************			
40.	Rhode Island						
41.	South CarolinaSC		minimum of the second		0.000.000.000.000.000.000.000.000	. 1000000000000000000000000000000000000	
42.	South DakotaSD						
43.	TennesseeTN						
44.	Texas TX						
45.	Utah UT						
46.	Vermont VT						
47.	Virginia VA				***************************************		
48.	Washington WA		Total and the control of the control		5		355000000000000000000000000000000000000
49.	West Virginia WV						
50.	Wisconsin WI		***************************************				
51.	Wyoming		***************************************	20100101010101010101010101010111	***************************************		
52.	American Samoa AS		***************************************	***************************************	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
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54.	Puerto RicoPI	- months - months					
55.	US Virgin IslandsV						
56.	Northern Mariana IslandsMl						
57.	CanadaCAN			***************************************			
58.	Aggregate Other AlienOT						
59.	Totals						

SCHE TEY - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART I - ORGANIZATIONAL CHART

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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Is an SCA Filing Required? (V/N)			***************************************	-			-	-	***************************************				+			-		-	***************************************		depression.		desired countries.				
Is an SCA Is an SCA Filing Filing Required? Entitytics/Person(s) (7/N)			***************************************	HI COMMISSION COMMISSI		***************************************									succession and a second			***************************************		***************************************	***************************************						
I3 If Control is Ownership Provide Percentage						***************************************	***************************************		***************************************				0														
Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)						***************************************			(minimum manufactural minimum											***************************************		***************************************	Commence of the commence of the commence of				
11 Directly Conrolled by (Name of Entity/Person)			A CONTRACTOR OF THE PARTY OF TH	- Marian Commission Co		***************************************			***************************************				diameter contribution that the contribution of		011111111111111111111111111111111111111						Attended to the control of the contr		at the second se				4
10 Relationship to Reporting Entity						*	-			404444444444444444444444444444444444444					***************************************							***************************************				uc	- Total Co.
9 Domiciliary Location			***************************************												Marin Marin				***************************************	•	Management .		······································		4	Explo	Control of the last of the las
8 Names of Parent, Subsidiaries Or Affiliates			- I and the second seco					***************************************							×									- The state of the	*		
Name of Securities Exchange if Publicly Traded (U.S. or International)		-								- Therends - Control					· · · · · · · · · · · · · · · · · · ·	×											
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P/C

SCHEDULE Y

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

NAIC Company Number Affilia			Lina property and a				_			
	fres or Sharoholder	Capital Contributions	Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income (Disbusements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income ⁽ (Disbursements) Incured Under Reinsurace Agreements		Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Tonk	Reinsurance Recoverable' (Payable) on Losses and/or Reserve Credit Taken' (Liability)
	- International Control of the Contr					111111111111111111111111111111111111111				
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ORGANISATION PROPERTY TRANSPORTED PROPERTY PROPE		111111111111111111111111111111111111111			911011111111111111111111111111111111111	***************************************				
9999999 Control Totals					4		XXX			

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?	
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 12	
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 17	
200	APRIL FILING	
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	
6.	Will Management's Discussion and Analysis be filed by April 1?	
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	
	MAY FILING	
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1? JUNE FILING	
9.	Will an audited financial report be filed by June 1?	
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? AUGUST FILING	
II.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the NAIC (as a regulator-only non-public document) by August 1?	
		owever, in the event that your
ar code	does not transact the type of business for which the special report must be filed, your response of NO to the cific rogatic sill be accepted in lieu of will be printed below, if the supplement is required of your company but is not being filed for whatever reason, or SEE b. ANATION and provide an explanation of the supplement is required of your company but is not being filed for whatever reason.	filing a "NONE" report and a ation following the interrogatory
uestions.	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March	
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicily and the NAIC by Navar 1?	
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) by Gled by Mach 12	
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC be March re-	
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March J.2	
18.	Will the Reinsurance Summary Supplemental Filing for General Internatory 9 book with the safe of domicile and the NAIC by March 1?	
19.	Will the Medicare Part D Coverage Supplement be filed with the of domicile and was VAIC by March 1?	
20.	Will the confidential Actuarial Opinion Summary be filed with the sec of domicile, if reserved, by March 15 (or the date otherwise specified)?	
21.	Will the Reinsurance Attestation Supplement be filed with the state of citie and the C by March 1? Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of conicile by March 1?	
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIc search 1?	
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	A 1 A 1 C TO LA CONTROL A
25.	Will an approval from the reporting entity's state of done for relief related to the five-year rotation requirement for lead audit partner be filed	
	electronically with the NAIC by March 1?	
26.	Will an approval from the reporting entity's state of the frelated to the one-year cooling off period for independent CPA be filed	
	electronically with the NAIC by Murch 1?	***************************************
27.	Will an approval from the reporting entity's late of domicilit for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	
28.	Will the Supplemental Schedule flower gance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the	***************************************
	NAIC by March 1?	
	APRIL FILING	
29.	Will the Credit Insura. Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	
30.	Will the Long-term Care E. Sience Reporting Forms be filed with the state of domicile and the NAIC by April 17	\$1000000000000000000000000000000000000
31.	Will the Accid	
32.	Will the Surfemental Hor Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	
33. 4	GII the registor-only (non-sublic) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?	***************************************
34.	Cybers sity and entity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	***************************************
35.	Will the Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the	
17	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be	
1	filed with the state of domicile and the NAIC by April 1?	·
	AUGUST FILING	
37.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	

Explanation:

Bar Code:

OVERFLOW PAGE FOR WRITE-INS



SUMMARY INVESTMENT SCHEDULE

1.1 1.2 1.3 1.4	U.S. government agency obligations (excluding mortgage-backed securities): 1.21 Issued by U.S. government agencies 1.22 Issued by U.S. government sponsored agencies Non-U.S. government (including Canada, excluding mortgage-backed securities) Securities issued by states, territories, and possessions and political subdivisions in the U.S.: 1.41 States, territories and possessions general obligations	Amount	Percentage	3 Amount	4 Securities Lending Reinvested Collateral Amount	al Statement 5 fal (3+4) August	6 Percenta
1.1 1.2 1.3 1.4	nds: U.S. treasury securities U.S. government agency obligations (excluding mortgage-backed securities): 1.21 Issued by U.S. government agencies 1.22 Issued by U.S. government sponsored agencies. Non-U.S. government (including Canada, excluding mortgage-backed securities) Securities issued by states, territories, and possessions and political subdivisions in the U.S.: 1.41 States, territories and possessions general obligations				Amount	As ont	Percenta
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1.2 1.3 1.4 1.5	U.S. government agency obligations (excluding mortgage-backed securities): 1.21 Issued by U.S. government agencies 1.22 Issued by U.S. government sponsored agencies Non-U.S. government (including Canada, excluding mortgage-backed securities) Securities issued by states, territories, and possessions and political subdivisions in the U.S.: 1.41 States, territories and possessions general obligations	***************************************		******************		AT ALL	
1.3 1.4	1.21 Issued by U.S. government agencies 1.22 Issued by U.S. government sponsored agencies. Non-U.S. government (including Canada, excluding mortgage-backed securities) Securities issued by states, territories, and possessions and political subdivisions in the U.S.: 1.41 States, territories and possessions general obligations.						*
1.4 1.5	1.22 Issued by U.S. government sponsored agencies. Non-U.S. government (including Canada, excluding mortgage-backed securities) Securities issued by states, territories, and possessions and political subdivisions in the U.S.; 1.41 States, territories and possessions general obligations	***************************************	oninomenius				
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1.5	Securities issued by states, territories, and possessions and political subdivisions in the U.S.: 1.41 States, territories and possessions general obligations	***************************************			· · · · · · · · · · · · · · · · · · ·		
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t. Oth							
. Oth	1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations.						
. Oth	1.43 Revenue and assessment obligations			A	100		
. Oth	1.44 Industrial development and similar obligations						***************************************
		333304(03140314					
	1.51 Pass-through securities:						
	1.511 Issued or guaranteed by GNMA				*************		·
	1.512 Issued or guaranteed by FNMA and FHLMC		Terrany 6				
	1.513 All other		-				
	1.52 CMOs and REMICs:	- 4		-			
	 1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA 1.522 Issued by non-U.S. Government issuers and collateralized by 			***************************************	******************************		***************************************
	mortgage-backed securities issued or guaranteed by agencies	F 4 4					
	shown in Line 1.521						
	1.523 All other		S				
2.1	ner debt and other fixed income securities (excluding short term):		-				
12:12	securities)	-	***************************************				***************************************
2.2							***************************************
2.3 For	Affiliated securities						1.0000000000000000000000000000000000000
3.1							zananana.
3.2							
	3.21 Affiliated	*					***************************************
	3.22 Unaffiliated		300000000000000000000000000000000000000			101110110111011	
3.3	Publicly traded equity securities (excluding preferred stocks)		0.0000000000000000000000000000000000000				
	3.31 Affiliated		***************************************				/mmmm
2.4	3.32 Unaffiliated		300000000000000000000000000000000000000				
3.4	3.11 (2011)						
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0.0	3.51 Affiliated						10000000
	3.52 Unaffiliated	***************************************					
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	al estate investmen		200000000000				
5.1		***************************************	7,0001111000100				
5.2	Property held for pe action of income (including \$ of property	H-12.000000000000000000000000000000000000	460000000000000000000000000000000000000	nam inniiimii?			
5.3	acquired in ction of the ction		*************			10000000000	
	of debt						***************************************
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Ott	curities Letting (Line 10, Asset Page reinvested collateral)		***************************************		XXX	XXX	XX

SCHEDULE A – VERIFICATION BETWEEN YEARS Real Estate

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 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
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 I, 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)
10.	Deduct total nonadmitted amounts.
11.	Statement value at end of current period (Line 9 minus Line 10)
	SCHEDULE B - VERIFICATIO FTWL N YEARS Mortgage Loans
1,	Book value/recorded investment excluding accrued interest, December 31 of prior par
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, Columnum
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
30	5.2 Totals, Part 3, Column 8
6.	Total gain (loss) on disposals, Part 3, Column 18 Deduct amounts received on disposals, Part 3, Con. 15
7.	
8. 9.	Deduct amortization of premise and me gage interest oints and commitment fees
7.	9.1 Totals, Part 1, Column 13
	9.2 Totals, Part 3, Column 13
10.	Deduct current year's other-than-temporary pairment recognized:
10.	10.1 Totals, Part Ix gran II
	10.2 Totals, Part 3, Colu. 10
11.	Book value/res Ruding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)
12.	Total valuati fallowanc
13.	School (Lie 11 plus Lin 2).
14.	Dedu total in limite imounts.
15	Statement the of Toursease owned at and of owner tracked (I in a 13 minus I in a 14)

SCHEDULE BA – VERIFICATION BETWEEN YEARS Other Long-Term Invested Assets

2.	Book /adjusted carrying value, December 31 of prior year	
	Cost of acquired:	
	2.1 Actual cost at time of acquisition (Part 2, Column 8)	
	2.2 Additional investment made after acquisition (Part 2, Column 9)	
3.	. Capitalized deferred interest and other:	
	3.1 Totals, Part 1, Column 16	
	3.2 Totals, Part 3, Column 12	A .
4.	Accrual of discount.	
5.	Unrealized valuation increase (decrease):	A 4
	5.1 Totals, Part 1, Column 13	
	5.2 Totals, Part 3, Column 9	
6.	Total gain (loss) on disposals, Part 3, Column 19	
7.	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	
	9.2 Totals, Part 3, Column 14	
10.	Deduct current year's other-than-temporary impairment recognized:	
	10.1 Totals, Part 1, Column 15	
	10.2 Totals, Part 3, Column 11	
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).	
	Bonds a stocks	
	. ()	
1.	Book/adjusted carrying value, December 31 of prior year	
2.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7	
3.	Book'adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7 Accrual of discount	
1. 2. 3. 4.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease):	
3.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7 Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12	
3.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7 Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12 4.2 Part 2, Section 1, Column 15	
3.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7 Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12 4.2 Part 2, Section 1, Column 15 4.3 Part 2, Section 2, Column 13	
3.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 15. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11.	
3. 4.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 13. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19.	
3.	Book/adjusted carrying value, December 3I of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount. Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 13. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19. Deduction consideration for bonds and stocks disposed of, Part 2 Column 7	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 15. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19. Deduction consideration for bonds and stocks disposed of, Part 2, Column 7.	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 15. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19. Deduction consideration for bonds and stocks disposed of, Part 4, Column 7.	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 15. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19. Deduct amortization of premium.	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12 4.2 Part 2, Section 1, Column 15 4.3 Part 2, Section 1, Column 13 4.4 Part 4, Column 11 5. Total gain (loss) on disposals, Part 4, Column 19 5. Deduction consideration for bonds and stocks disposed of, Part Column 7. Deduct amortization of premium 5. Total foreign exchange change in book/adjusted carrying value 8.1 Part 1, Column 15.	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12 4.2 Part 2, Section 1, Column 13 4.3 Part 2, Section 2, Column 13 4.4 Part 4, Column 11 Total gain (loss) on disposals, Part 4, Column 19 Deduction consideration for bonds and stocks disposed of, Part 2, Column 7. Deduct amortization of premium Total foreign exchange change in book/adjusted carrying value 8.1 Part 1, Column 15. 8.2 Part 2, Section 1, Column 19	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount. Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 15. 4.3 Part 2, Section 2, Column 16. Total gain (loss) on disposals, Part 4, Column 19. Deduction consideration for bonds and stocks disposed of, Part 2, Column 7. Deduct amortization of premium. 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.	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7 Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12 4.2 Part 2, Section 1, Column 15 4.3 Part 2, Section 1, Column 13 4.4 Part 4, Column 11 Total gain (loss) on disposals, Part 4, Column 19 Deduction consideration for bonds and stocks disposed of, P. P. Column 7 Deduct amortization of premium 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 1, Column 19 8.4 Part 4, Column 15	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 13. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19. Deduction consideration for bonds and stocks disposed of, P. Column 7. Deduct amortization of premium. 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 1, Column 16. 8.4 Part 4, Column 15. Deduct current year's other-than-terms 1, ppairments 2, praized: 9.1 Part 1, Column 15. Deduct current year's other-than-terms 2, ppairments 2, praized: 9.1 Part 1, Column 15.	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7 Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12 4.2 Part 2, Section 1, Column 15 4.3 Part 2, Section 2, Column 13 4.4 Part 4, Column 11 Total gain (loss) on disposals, Part 4, Column 19 Deduction consideration for bonds and stocks disposed of, Part Column 7 Deduct amortization of premium 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 1, Column 19 8.4 Part 4, Column 15 8.5 Part 4, Column 15 8.6 Part 4, Column 15 8.7 Part 4, Column 15 8.8 Part 4, Column 15 8.9 Part 4, Column 15 8.9 Part 4, Column 15 8.9 Part 4, Column 15 8.9 Part 4, Column 15 8.9 Part 4, Column 15 8.9 Part 4, Column 15	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount. Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 15. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19. Deduction consideration for bonds and stocks disposed of, Proceedings of the process of the pro	
3. 4. 5.	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount. Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 15. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19. Deduction consideration for bonds and stocks disposed of, Part Column 7. Deduction consideration for premium. 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. Deduct current year's other-than-term and appairment of priority of the part 1, Column 14. Deduct current year's other-than-term and appairment of priority of the part 1, Column 14. 9.2 Part 2, Section 1, Column 14. 9.3 Part 2, Section 1, Column 14. 9.4 Part 4, Column 15. Deduct current year's other-than-term and appairment of priority of the part 1, Column 19. 9.4 Part 4, Column 15. Deduct current year's other-than-term and appairment of the part 1. Part 1, Column 14. 9.4 Part 3, Section 1, Column 17. 9.5 Part 2, Section 1, Column 19. Sult of prepayment penalties and/or acceleration fees, Notes 5R, Line 5R(2).	
3, 4. 5, 6, 7, 8,	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7 Accrual of discount Unrealized valuation increase (decrease): 4.1 Part 1, Column 12 4.2 Part 2, Section 1, Column 13 4.4 Part 4, Column 13 4.5 Part 2, Section 2, Column 13 4.7 Part 4, Column 11 Deduction consideration for bonds and stocks disposed of, Part Column 7 Deduct amortization of premium 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 1, Column 16 8.4 Part 4, Column 15 8.5 Part 4, Column 16 8.7 Part 4, Column 17 9.8 Part 4, Column 17 9.8 Part 2, Section 1, Column 19 9.1 Part 1, Column 15 9.2 Part 2, Section 1, Column 17 9.3 Part 2, Section 1, Column 17 9.4 Part 4, Column 15 9.5 Part 2, Section 1, Column 17 9.6 Part 4, Column 17 9.7 Part 4, Column 17 9.8 Part 2, Section 1, Column 17 9.9 Part 2, Section 1, Column 17 9.1 Part 1, Column 15 9.2 Part 2, Section 1, Column 17 9.3 Part 2, Section 2, Section 2, Section 2, Section 3, Section 6, Section 6, Section 6, Section 6, Section 7, Section 6, Section 7, Section 7, Section 7, Section 7, Section 7, Section 8, Section 7, Section 8, Section	
3, 4. 5, 6, 7, 8,	Book/adjusted carrying value, December 31 of prior year Cost of bonds and stocks acquired, Part 3, Column 7. Accrual of discount. Unrealized valuation increase (decrease): 4.1 Part 1, Column 12. 4.2 Part 2, Section 1, Column 15. 4.3 Part 2, Section 2, Column 13. 4.4 Part 4, Column 11. Total gain (loss) on disposals, Part 4, Column 19. Deduction consideration for bonds and stocks disposed of, Part Column 7. Deduction consideration for premium. 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. Deduct current year's other-than-term and appairment of priority of the part 1, Column 14. Deduct current year's other-than-term and appairment of priority of the part 1, Column 14. 9.2 Part 2, Section 1, Column 14. 9.3 Part 2, Section 1, Column 14. 9.4 Part 4, Column 15. Deduct current year's other-than-term and appairment of priority of the part 1, Column 19. 9.4 Part 4, Column 15. Deduct current year's other-than-term and appairment of the part 1. Part 1, Column 14. 9.4 Part 3, Section 1, Column 17. 9.5 Part 2, Section 1, Column 19. Sult of prepayment penalties and/or acceleration fees, Notes 5R, Line 5R(2).	

SCHEDULE D – SUMMARY BY COUNTRY Long-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				-	
Governments (including all obligations guaranteed by governments)	United States Canada Other Countries Totals		***************************************		(2) (41 (10) (10) (10) (10) (10) (10) (10) (10
U.S. States, Territories and Possessions (direct and guaranteed)	5. Totals		•		
U.S. Political Subdivisions of States, Territories and Possessions (direct and guaranteed)	6. Totals				
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				
Industrial and Miscellaneous, SVO Identified Funds, Bank Loans and Hybrid Securities (unaffiliated)	United States Canada Other Countries Totals				***************************************
Parent, Subsidiaries and Affiliates	12. Totals 13. Total Bonds	1			
PREFERRED STOCKS		-			
Industrial and Miscellaneous (unaffiliated)	14. United States		***************************************		
Parent, Subsidiaries and Affiliates	18. Totals	100			1
	19. Total Preferred Sto				1
COMMON STOCKS				1	1
Industrial and Miscellaneous (unaffiliated)	20. United Stavs			***************************************	
Parent, Subsidiaries and Affiliates	24. otals 25. otals ocks	A			
	26. Te Stocks				1



SCHEDULE D – PART 1A – SECTION 1

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

L2 Total	Privately Placed (a)		10000000000000000000000000000000000000			10010101010101
= 7	Total Publicly Traded					
10	% From Col. 8 Prior Year					
6	Total from Col. 7 Prior Year	**************************************				
æ	Col. 7 as a % of Line 11.7					
7	Total Ourrent Year					
9	No Maturity Date	XXXXXXXX	****	NE SE		XXXXXXX
\$	Over 20 Years					
4	Over 10 Years Through 20 Years					
8	Over 5 Years Through 10 Years				ranteed	uaranteed
2	Over 1 Year Thro	111111111111111111111111111111111111111		ntoed	Possessions, Gu	tions, etc., Non-Guaranteed
	Year			sions, etc., Guara	tes, Territories and	Assessment Obliga
	NAIC Designation	1. U.S. Governments 1.1 NAIC1 1.2 NAIC3 1.3 NAIC3 1.4 NAIC4 1.5 NAIC5 1.5 NAIC5 1.6 NAIC6 1.7 Totals	2. All Other Governments 2.1 NAIC1 2.2 NAIC2 2.3 NAIC3 2.4 NAIC4 2.4 NAIC4 2.5 NAIC5 2.6 NAIC6 2.7 Totals	3. U.S. States, Territories and Possessions, etc., Guaranteed 3.1 NAIC 2		5. U.S. Special Revenue & Special Assessment Obligations, 5.1 NAC 1

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

			111111111111111111111111111111111111111	
	***************************************	***************************************		Approximation of the control of the
		***************************************	***************************************	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
				XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
				Parties (married for the parties of
		111111111111111111111111111111111111111	10 (mana)	Processing and the second seco
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXX XXX XXX XXX XXX XXX	888 48P		XXXXXXXX
		10000000000000000000000000000000000000	XXX XXXX XXXX XXXX XXXX	
	ACTUAL MANAGEMENT OF THE PROPERTY OF THE PROPE	111111111111111111111111111111111111111	XXX XXXX XXXX XXXX XXXX	
			XXX XXXX XXXX XXXX XXXX	The control of the co
	***************************************		XXX XXX XXX XXX XXX XXX	######################################
			XXX XXXX XXXX XXXX XXXX XXXX XXXX XXXX XXXX	
Industrial and Miscellaneous (um 6.1 NAIC 1	Hybrid Securities 7.2. NAIC 1	Parent, Subsidiaries and Affiliate 8.2 NAIC 1 8.3 NAIC 3 8.3 NAIC 3 8.4 NAIC 4 8.5 NAIC 5 8.6 NAIC 6 8.6 NAIC 6 8.7 Totals	SVO Identified Funds 9.1 NAIC1 9.2 NAIC2 9.3 NAIC3 9.4 NAIC4 9.4 NAIC6 9.6 NAIC6 9.7 Totals	Bank Louis 10.1 NAIC1 10.2 NAIC2 10.3 NAIC3 10.3 NAIC4 10.5 NAIC4 10.5 NAIC6 10.7 Totals
	NAIC 1	Industrial and Miscellaneous (unAffil e3)	Industrial and Miscelaneous (unaffile 3d) 2	Indistrial and Miscellances (marifile 54)

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

		8	mi		<u> </u>
NAIC Designation	Cotal Bonds Current Year 12 NAC 2 13 NAIC 3 14 NAIC 4 15 NAIC 5 16 NAIC 6 16 NAIC 6 17 Totals 18 Timp 17 Totals	Cotal Bonds Prior Year 22.1 NAIC 1	1000	13.7 Totals. 13.8 Line 13.7 as a % of Col. 7 13.9 Line 13.7 as a % of Line 11.7, Col. 7, Section 11	H NAIC NAI
1 Year	(b) (b) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d		6	7	
2 Over 1 Year Through 5 Years	**************************************	100000000000000000000000000000000000000			
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	(a) (b) (c)	XXXXXXX	XXX		**************************************
8 Col. 7 as a % of Line 11.7	AXX	XXXXXXX	XXX	XXX	
9 Total from Col. 7 Prior Year	XXXXXXX	(6)		XXX	XXX
10 % From Col. 8 Prior Year	XXX XXXX XXX XXX XXX XXX XXX XXX XXX X		XXX	XXX	XXX
11 Total Publicly Traded	***************************************				
12 Total Privately Placed (a)			XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXX XXX XXX	

Z* designations. The letter "Z" (a) Includes \$\frac{\text{freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$\frac{\text{current year of bonds with Z designations. S}}{\text{current year of bonds with Z designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because

nds with 6* designations. "5GF"

due to inadequate certification regulatory review.

(c) Includes 5

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 of principal and interest payments.

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

 $SCHEDULE\ D-PART\ 1A-SECTION\ 2$ Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Governments.	1 1 Year or Less	2 Over I 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	% From Col. 8 Prior Year	Total Publicly Traded	12 Total Privately Placed
issuer Obligations. Residential Metagage Backed & nites. Commercial Meragage backed A mites. Totals Assued and Structure Securities.						XXXX XXXX XXXX		***************************************	411000000000000000000000000000000000000			***************************************
Other Governments Start Orbigations. Residential Mortgage-Backed Securities. Commercial Mortgage-Backed Securities. Other Loan-Backed and Structured Securities.	***************************************				***************************************	XXXX			***************************************	***************************************	***************************************	***************************************
States, Territories and Possessions, Guaranteel Seare Obligations	Annual Company	desperate desperate	***************************************	***************************************	111111111111111111111111111111111111111	XXXXXX			***************************************	***************************************		114144444444444444444444444444444444444
Political Studivisions of States, Territories and Possessions, Guaranteed Stsaer Obligations		Change de la company		***************************************	000000000000000000000000000000000000000	XXXX		400000000000000000000000000000000000000	***************************************), manual		***************************************
Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed Starer Obligations	100000000000000000000000000000000000000	Anni principal de la companio del companio del companio de la companio del la companio de la companio de la companio de la companio de la companio de la companio de la companio del la companio de la companio de la companio del la companio de la companio de la companio del la companio	Mass sastis	**************************************		XXXXXXX		11 11 11 11 11 11 11 11 11 11 11 11 11	***************************************	111111111111111111111111111111111111111	100110110110110110110110110110110110110	111111111111111111111111111111111111111
Industrial and Miscellaneous 6.2 Reardenial Mortgage-Backed Sceurities 6.3 Commercial Mortgage-Backed Sceurities 6.4 Other Loan-Backed and Structured Sceurities 6.5 Totals 7. Totals			Annual Control of the	100000000000000000000000000000000000000		XXXXX					00 00 00 00 00 00 00 00 00 00 00 00 00	
Scentries State of St						A WANT						
Subsidiaries and Affiliates Subsidiaries Marianes Subsidiaries Marianes Residental Mortgage-Backed Scentries Commercial Mortgage-Backed Scentries Commercial Mortgage-Backed Scentries Commercial Mortgage-Backed Scentries	200101010101010101010101010101010101010	ALL DESCRIPTION OF THE PROPERTY OF THE PROPERT		Acceptable and a second	Date and the second	MANA	Andrews pro-		411111111111111111111111111111111111111	***************************************		***************************************

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 of Issues

Aype	1 1 Year or Less XXX	2 Over I Year Through 5 Years XXX	3 Over 5 Years Through 10 Years XXX	4 Over 10 Years Through 20 Years XXX	5 Over 20 Years XXX	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	Total Publicly Traded	12 Total Privately Placed
SYO were merchant merchant	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX		
						XXX			XXX	XXX		
onds Current Year Residential Mortgage-Backed Securities Commercial Mortgage-Backed Securities Commercial Mortgage-Backed Securities Doller Lone-Backed and Structured Securities SVO Identified Funds Backed and Structured Securities Totals	XXX	XXX	XXX	XXX	XXX	XXX XXXX XXXX XXXX			XXX XXX XXX XXX XXX	XXX XXXX XXXX XXXX XXXX		
Lines 117 as a % Col. 7 oods Prior Vear Based Collision and Morago-Backed Scentifies. Residential Morago-Backed Scentifies. Commercial Morago-Backed Scentifies. Other Loan-Backed and Structured Scentifies. Bank Loan Totals. Totals.	NXXX XXXX XXXX	XXX XXX XXX xxx xxx xxx xxx xxx xxx xxx	WWX WXX WXX	WWW.	XXXX XXXX	XXX XXX XXXX XXXX XXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	X XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXX	XXX WXX XXX	XXX A THE STATE OF THE STATE O	XXX HELLINGTON AND AND AND AND AND AND AND AND AND AN
blately Traded Boads Issuer Obligations Residential Mortgage-Backed Securities Commercial Mortgage-Backed Securities Commercial Mortgage-Backed Securities Commercial Mortgage-Backed Securities SVO diaentified Funds Beak Lome Beak Lome Tradals Into B 27 as a % of Cit 17 Line B 27 as 8 % of Cit 17 Line B 27 as 8 % of Line B 27.	XXX	XXX	XXX *********************************	The state of the s	A CONTRACTOR OF THE CONTRACTOR	XXXXX XX		XXX	NXXX XXXX	NXX XXX		XXX XXXX XXXX XXXX XXXX XXXX XXXX XXXX XXXX
rivately Placed Bonds Issuer Obligations Issuer Obligations State Obligations Commercial Motingsy-Backed Scentrifies Commercial Motingsy-Backed Scentrifies Stylo Identified Funds Stylo Identified Funds Bank Come	XXX	XXX	XXX	XXX	XXX	XIII.	11111111111111111111111111111111111111		XXXX	XXX	88888 <mark>8</mark> 8	111111111111111111111111111111111111111
Line 14.7 as a % of Col. 7		***************************************		description (columns)		Theres designed designed		XXX	XXX	XXX	XXX	

SCHEDULE DA – VERIFICATION BETWEEN YEARS Short-Term Investments

	I	2	3	4	5
	ī.	9	# 11	Other Short-term Investment	Investments in Parent, Subsidiaries
×	Total	Bonds	Mortgage Loans	Assets (a)	and Affiliates
Book/adjusted carrying value, December of prior year					
Cost of short-term investments acquire		***************************************	***************************************	***************************************	
Accrual of discount	***************************************	***************************************	***************************************	***************************************	***************************************
Unrealized valuation increase (decrease)		***************************************	***************************************	***************************************	
Total gain (loss) on disposals	***************************************	***************************************	***************************************	***************************************	***************************************
Deduct consideration received on disposals				***************************************	***************************************
Deduct amortization of premium			***************************************		
Total foreign exchange change in book/adjusted carrying V					
Deduct current year's other-than-temporary impairment recognized					
Book adjusted carrying value at end of current period (Lines 1+2+44+5-6-7+8-9)	***************************************		***************************************		
Deduct total nonadmitted amounts		***************************************			
Statement value at end of current period (Line 10 minus Line 11)					

1. 5. 6. 4. 6. 6. 6. 1. 5

(a) Indicate the category of such assets, for example, joint ventures, transportation equi-

SCHEDULE DB – PART A – VERIFICATION BETWEEN YEARS Options, Caps, Floors, Collars, Swaps and Forwards

| 1. | Book | adjusted carrying value, December 31, prior year (Line 9, prior year) |
|-----|--------|--|
| 2. | Cost | aid/(consideration received) on additions: |
| | 2.1 | Current year paid/(consideration received) at time of acquisition, still open, |
| | | Section 1, Column 12 |
| | 2.2 | Current year paid/(consideration received) at time of acquisition, terminated, |
| | | Section 2, Column 14 |
| 3. | | lized valuation increase/(decrease): |
| | 3.1 | Section 1, Column 17 |
| 4. | | Section 2, Column 19 |
| 5. | | derations received/(paid) on terminations, Section 2, Column 15 |
| 6. | | actations received (paid) on terminations, section 2, Column 15 |
| U. | 6.1 | Section 1, Column 19 |
| | 6.2 | Section 2, Column 21 |
| 7. | | tment to the book/adjusted carrying value of hedged item: |
| | 7.1 | Section 1, Column 20 |
| | 7.2 | Section 2, Column 23 |
| 8. | Total | foreign exchange change in book/adjusted carrying value: |
| | 8.1 | Section 1, Column 18 |
| | 8.2 | Section 2, Column 20 |
| 9. | | adjusted carrying value at end of current period (Lines 1+2+3+4-5+6+7+8) |
| 10. | | et nonadmitted assets |
| 11. | Stater | nent value at end of current period (Line 9 minus Line 10) |
| | | SCHEDULE DB – PART B – VERIFICATION PETWEEN YEARS Futures Contract |
| 1. | Book | adjusted carrying value, December 31 of prior year (Line 6, prior ye |
| 2. | Cumu | lative cash change (Section 1, Broker Name/Net Cash Deposits For note and lative Cash Change Column) |
| 3.1 | Add: | |
| 3.4 | Aud. | |
| | | Change in variation margin on open contracts – History dges. |
| | 3.11 | Section 1, Column 15, current year minus |
| | 3.12 | Section 1, Column 15, prior year |
| | | Change in the variation margin on open contract. All other: |
| | 3.13 | Section 1, Column 18, current year minus |
| | 3.14 | Section 1, Column 18, prior year |
| 2.2 | | Section 1, Column 16, prior year |
| 3.2 | Add: | |
| | Chang | e in adjustment to basis of hedged item: |
| | 3.21 | Section 1, Column 17, current year to temp. 8 |
| | 3.22 | Section 1, Column , prior par |
| | Chang | te in amount recognize |
| | 3.23 | |
| | | Section 1, Column 19, con at year to date minus |
| | 3.24 | Section 1, Column 19, prior ye |
| 3.3 | Subto | tal (Line 3.1) s Line 3.2) |
| 4.1 | Cumu | lative variation in in on terminated contracts during the year (Section 2, Column 15) |
| 4.2 | Less: | |
| | 4.21 | Am ant used to djust basis of hedged item (Section 2, Column 17) |
| | | 20-30 No. 30-30 No. 30-30 No. 30-30 No. 30-30 No. 3 |
| | 4.2 | Amo recogn ed (Section 2, Column 16) |
| 4.3 | Subto | ia. 'ne 4.1 mnus Line 4.2) |
| 5 | | as (losses) on contracts terminated in prior year: |
| 1 | S.J. | Total gain (loss) recognized for terminations in prior year |
| | 5 | Total gain (loss) adjusted into the hedged item(s) for terminations in prior year |
| 6 | Dont | acjusted carrying value at end of current period (Lines 1+2+3,3-4,3-5,1-5,2) |
| 6. | | . A |
| 7. | | t total nonadmitted amounts |
| 8. | Stater | nent value at end of current period (Line 6 minus Line 7) |

SCHEDULE DB – PART C – SECTION 1
Replication (Synthetic Asset) Transactions Open as of December 31 of Current Year

| | | Rep | plication (Synthe | Replication (Synthetic Asset) Transactions | | | | | | Components | Components of the Replication (Synthetic Asset) Transactions | (Synthetic Asset) | Transactions (| 200 | |
|------------------------------|-------------|--------------------|-------------------|--|--|----------------|---------------|-------------|-------------------------------|------------|--|-------------------|---------------------------------------|----------------------|------------|
| - | 7 | | | 9 | 9 | 7 | × | Denv. | Derivative Instrument(s) Open | Open | | S | Cash Instrument(s) Held | fold | |
| | - | WAIC
Designatio | S. | ok/Adjusted | | | | σ. | 10
Book/Adjusted | = | 12 | <u>E</u> | 14
NAIC
Designation or
Other | 15.
Book/Adjusted | 16 |
| Number | Description | Description | drit | Calvying Value | Fair Value | Effective Date | Maturity Date | Description | Carrying Value | Fair Value | CUSIP | Description | Description | Carrying Value | Fair Value |
| | | | | | The state of the s | | | | | | | | | | |
| 9999999999999999999999999999 | Si. | | | | | XXX | XXX | XXX | | | XXX | XXX | XXX | | |
| | | | | | | | < | | | | | | | | |

SCHEDULE DB – PART C – SECTION 2 Replication (Synthetic Asset) Transactions Open

| > | Fin | First Quarter | Second | Second Quarter | Third | Third Quarter | Four | Fourth Quarter | Year | Year To Date |
|---|----------|---------------------------------------|-----------|---|-----------|-------------------|-----------|---|-----------|---|
| | 1 | 2 | 10 | 4 | \$ | 9 | 1 | 8 | 6 | 10 |
| | | Total Replication | | Total Replication | | Total Replication | | Total Replication | | Total Replication |
| | Number | (Synthetic Asset) | Number | (Synthetic Asset) | Number | (Synthetic Asset) | Number | (Synthetic Asset) | Number | (Synthetic Asset) |
| 6 | Jo J | msactions | jo | Transactions | Jo | Transactions | Jo | Transactions | Jo | Transactions |
| | Position | tement Value | Positions | Statement Value | Positions | Statement Value | Positions | Statement Value | Positions | Statement Value |
| Beginning Inventory | | | | | | | | | | |
| Add: Opened or Acquired | | | | | | | | | | |
| Hallsketolks | | | | | | | | | | |
| Add. Increases in Replication
(Synthetic Asset) Transactions | • | 5 | | | | | | | | |
| Statement Value | XXX | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | XXX | *************************************** | XXX | | XXX | *************************************** | XXX | *************************************** |
| Less: Closed or Disposed of | | | | | | | | | | |
| Transactions | | | | | | | | | | |
| Less: Positions Disposed of for | | | 1 | | | | | | | |
| Failing Effectiveness
Criteria | | | | | | | | | | |
| ess: Decreases in Replication | | | | 4 | | | | | | |
| (Synthetic Asset) Transactions | | | > | | | | | | | |
| Statement Value | XXX | | XXX | | XXX | | XXX | | XXX | - |
| Ending Inventory | | | | 100 | | | | | | |

SCHEDULE DB – VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

| | | Book/Adjusted Carrying Value Cheek |
|------|--|------------------------------------|
| 1. | Part A, Section 1, Column 14 | |
| 2. | Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance | |
| 3. | Total (Line 1 plus Line 2) | |
| 4. | Part D, Section 1, Column 5 | - |
| 5. | Part D, Section 1, Column 6 | |
| 6. | Total (Line 3 minus Line 4 minus Line 5) | |
| | | ir Value ek |
| 7. | Part A, Section 1, Column 16 | |
| 8. | Part B, Section 1, Column 13 | The second second |
| 9. | Total (Line 7 plus Line 8) | |
| 10. | Part D, Section 1, Column 8 | |
| 11. | Part D, Section I, Column 9 | |
| 12. | Total (Line 9 minus Line 10 minus Line 11) | |
| | | |
| | | Potential Exposure Check |
| 13. | Part A, Section 1, Column 21 | |
| 14. | Part B, Section 1, Column 20 | |
| 15. | Part D, Section 1, Column 11 | 2 |
| 16. | Total (Lines 13 plus Line 14 minus Line 15) | |
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SCHEDULE E – PART 2 – VERIFICATION BETWEEN YEARS (Cash Equivalents)

| | | 1. | 2 | 3 | 4 |
|-----|---|---|---|------------------------------|--|
| | | Total | Bonds | Money Market
Mutual Funds | (a) |
| 1. | Book/adjusted carrying value, December 31 of prior year | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| 2, | Cost of cash equivalents acquired | | | | · |
| 3. | Accrual of discount | | | | |
| 4. | Unrealized valuation increase (decrease) | *************************************** | 30000000000000 | | |
| 5. | Total gain (loss) on disposals | | *************************************** | | |
| 6. | Deduct consideration received on disposals | | *************************************** | | |
| 7. | Deduct amortization of premium | | *************************************** | | ., |
| 8. | Total foreign exchange change in book/adjusted carrying value | | | | |
| 9. | Deduct current year's other-than-temporary impairment recognized | | *************************************** | | |
| 10. | Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | | | | |
| 1. | Deduct total nonadmitted amounts | -11007011101111111111111111111111111111 | 204000000000000 | | 041144444444444444444444444444444444444 |
| 12. | Statement value at end of current period (Line 10 minus Line 11) | REPORT CONTRACTOR | 0.0000000000000000000000000000000000000 | | 0.0480.0011020000000000000000000000000000000 |

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment_



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SCHEDULE A – PART 1 Showing All Real Estate OWNED December 31 of Current Year

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SCHEDULE A – PART 2 Showing All Real Estate ACQUIRED and Additions Made During the Year

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SCHEDULE B – PART 1
Showing All Mortgage Loans OWNED December 31 of Current Year

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 $SCHEDULE\ B-PART\ 2$ Showing All Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Year

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SCHEDULE B – PART 3
Showing All Mortgage Loans DISPOSED, Transferred or Repaid During the Current Year

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 $SCHEDULE\ BA-PART\ 2$ Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE December 31 of Current Year

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SCHEDULE D – PART 1
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SCHEDULE D – PART 2 – SECTION 1
Showing All PREFERRED STOCKS Owned December 31 of Current Year

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SCHEDULE D – PART 2 – SECTION 2 Showing all COMMON STOCKS Owned December 31 of Current Year

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| Identification | Description | Code | Shares | Value | Fair Value | Value | Cost | Unpaid | Year | Bat Unpaid | (Decrease) | Recognized | (13-14) | BJA.C.V. | (0) | Acquired |
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(a) For all common stocks bearing the NAIC market indicator "U" provide: the number of such issues ____, the total \$ value (included in Column 8) of all such issues \$____

SCHEDULE D – PART 3
Showing all Long-Term Bonds and Stocks ACQUIRED During Current Year

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SCHEDULE D – PART 4
Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

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(Decrease) | Current Year's
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Accretion) | Year's
Other-Than-
Temperary
Impairment
Recomined | Total
Change in
B/A.C.V. | Total
Foreign
Exchange
Change in
B.A.C.V. | Adjusted
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Disposal
Date | Exchange
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SCHEDULE D – PART 5
Showing all Long-Term Bonds and Stocks ACQUIRED During Year and Fully DISPOSED OF During Current Year

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(Amortization)/ | Than-
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Change in
B/A.C.V. | Foreign
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BAACV | Exchange
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SCHEDULE D – PART 6 – SECTION 1 Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

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Do Insurer's Assets | œ | 6 | 10 | Stock of Such
Company Owned by
Insurer on Statement Date | Such
wned by
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|--|--|---|--|--|---|--|--|---|--|---|
| Descrip ame
of Subsidiary, outroll of
Affiliated Compa | Fo | AC Company Code | ID Number | NAIC Valuation
Method | Include Intangible Assets Connected with Holding of Such Company's Stock? | Total Amount of Such
Intangible Assets. | Book /
Adjusted
Carrying Value | Nonadmitted
Amount | Number
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SCHE TIED PART 6 - SECTION 2

| - | CI. | m | Total Amount of Variety A (1s | | Stock in Lowe
Owned Indirectly by In | Stock in Lower-Tier Company
Owned Indirectly by Insurer on Statement Date |
|---|---|--|--|---------------------------------------|---|--|
| CUSIP
dentification | Name of
Lower-Tier Company | Name of Company Listed in Section 1
Which Controls Lower-Tier Company | Included in Ah, ant Slown
Column 8, Secto | Number | 5
slumber of Shares | 6
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Showing all SHORT-TERM INVESTMENTS Owned December 31 of Current Year

| | Code | - | - | 5 | 9 | 7 | | Change In Book/Adjusted Carving Value | ted Carrying Value | | 12 | 0 | | | Interest | | | | 20 |
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| | 6 | L 0 - u - | 7 | Name | | Book
Adjusted | Unrealized
Valuation | Current
Year's | Current
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Temporary | Total
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tion | Code | 10 2 | Date | Vendor | Manyerty | | (Decrease) | (Amortization)/
Accretium | Recognized | B/A.C.V. | Value | Cost | Not in
Default | Accraed | Rate | Effective
Rate of | When | During | Accrued |
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| 9199999 To | Totals | | | | | | | | | | XXX | | | | 1 | 1 | XXX | | |

 ${\bf SCHEDULE~DB-PART~A-SECTION~1}$ Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of December 31 of Current Year

| - | 2 | | 100 | \$1 | 9 | 2 | × | 6 | 10 | = | 12 | 13 | 14 | 15 | 16 | 11 | 81 | 61 | 30 | 21 | 33 | 23 |
|--------------------|--|--|------------------|--|---|--------------------------------------|----|--------------------|---------|---|--|------------------------|--|------|------------|---|---|---|---------|-------|---|---|
| Description | Description
of Item(s)
Hedged,
Used for
Income
Generation
or
Replicated | Schodule/
Exhibit
Identifier | Typest
Risals | Exchange,
Counterpart
or Center
Seation | X | Date of
Maturity or
Expiration | 20 | Notional
Amount | 8 - R - | Cumulative
Prior Year(s)
Initial Cost
of Premium
(Received)
Paid | Current
fear Initial
Cost of
Premium
Received)
Paid | Current
Year theome | Book/
Adjusted
Carrying
Value | Code | Fair Value | Unrealized
Valuation
Increase
(Decrease) | Total
Foreign
Exchange
Change in
BJA.C.V. | Current Year's
(Amontization)
Accretion | P C C C | 9 H | Credit
Quality of
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Entity | Hedge
Effectiveness
At Inception
and at
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| 1399999999 | Subtotal - Hed | 399999999 Subtotal - Hedging Effective | 5
6 958 | | | | | | | | | | | XXX | | | | | | | XXX | XXX |
| 14099999999 | 1409999999 Subtotal - Hedging Other | dging Other | | | | | | 1 | | | | | | XXX | | | | | | | XXX | XXX |
| 14199999999 | 14199999999 Subtotal - Replication | plication | | | | | | | | 4 | | | - | XXX | | | | | | | XXX | XXX |
| 1429999999 | Subtotal - Ince | 14299999999 Subtotal - Income Generation | . 2 | | | | | | | | | | | XXX | | | | | | | XXX | XXX |
| 1439999999 | 1439999999 Subtotal - Other | 550 | | | | | | | | | | | | XXX | | | | | | | XXX | XXX |
| 14499999999 Totals | Totals | | | | | | | | | | | | | XXX | | | | | | | XXX | XXX |
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| | Commence and the commence of t |
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| Code | Financial or Economic Impact of the Hedge at the End of the Re |
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SCHEDULE DB – PART A – SECTION 2 Showing all Options, Caps, Floors, Collars, Swaps and Forwards Terminated During Current Year

| 525 | Hedge
Effectiveness
at Inception
and at
Termination
(b) | | | | | T | XXX | XXX | XXX | XXX | XXX | XXX | | | | 100000000000000000000000000000000000000 | | | | | | | | | |
|---------------|--|-----|---|---|---|--------|---|------------------------------------|------------------------------------|---|------------------------------|-------------------|---|-----------------------|---|---|------|----|----|---|---|------|----|----|---|
| \$ | E Gain (Loss) 4
on Termi-
nation - T | | | | | t | t | | | | | | | | *************************************** | | | | | | - | | | | |
| | Adjustment
to Carrying
Value of
Hedged
Item | | - | | | 1 | 1 | | | | | | | | *************************************** | | | | | | | | | | |
| *** | Gain (Loss)
on Termi-
ration –
Recognized | | | | | | | | | | | | | | | | | | | | | | | | |
| | Current
Year's
(Amortiza-
tion)/Accre- | 0 | Ì | | | | | | | | | | | | - | | | | | | | | | 4 | |
| | Total
Foreign
Exchange
Change in
B/A.C.V. | | | | | | | | | | | | | | | | | | | | | | | × | |
| 8 | Unrenfized
Valuation
Increase
(Decrease) | | | | | | | | | | | | | | | | | | | | | | 4 | | |
| 8 | Code | | | | | | XXX | XXX | XXX | XXX | XXX | XXX | | | despitation of some | | | | _ | 4 | | | | | F |
| 10. | Book
Adjusted
Carrying
Value | | | | | | | | | | | | | | | | | • | | ortino .c. | | | | | |
| 10 | Current
Year
Income | | - | | | | | | | | | | | | | | | 1 | 1 | 10 | | A | | | |
| 100 | Considem-
tion
Received
(Paid) on
Termina-
tion | | - | | | | | | | | | | | ed Risk(s) | All managed colored | | × | | | at the End o | h | | | | |
| | Corrent
Year Initial
Cost of
Premium
(Received)
Paid | | - | | | | | | | | | | 4 | ion of Hedged Risk(s) | | 1 | | | 3 | Financial or Economic Impact of the Hedge at the End of the | | | | | |
| 13 | Cumulative
Price
Vear(s)
Initial Cost
of Premium
(Received)
Paid | | - | | | | | | | | | | | Desc | | J | Y | | | c Impact of | | | | | |
| 4 | Strike
Prior, Rate
or Index
Received
(Paid) | | - | | | | | | | 4 | | | | | | | | | | я Есопотії | | | | | |
| + | Notional
Amount | | - | | | | | | | | | | | | 7 | | | | | Financial | | | | | |
| 10 | Number of
Contracts | | | | | | | 4 | 1 | | | | | | | | | | | | | | | | |
| 0 | Indicate
Exercise,
Expiration,
Maturity or
Sale | | - | | • | 1 | | | | | • | | | | | | | | | | | | | | |
| 0 | Termina-
tion Date | | - | 1 | | | | | | , | | | | | | | | | | | | | | | |
| 8 | Date of Aty or Stration | 2 | | | | 9 | - | 2 | | | | | | | *************************************** | | | | | | | | | | |
| 0 | Trade | | | | | - | | | | | | | | | | | | | | | | | | | |
| | change,
custerparty
or Central
Clearinghouse | | | | | | | | | | | | | | | | | | | | | | | | |
| | 993 | 4.4 | | | | | Tective | por | | scration | | | | | | | | | | | | | | | |
| | Schodule/
Exhibit
Identifier | | | | | | - Hedging Et | - Hedging Or | - Replication | - Income Ger | -Other | | | | | | | | | | | | | | |
| Participal in | Description of Rem(s) Hodged, Used for Income Generation or Description | | | | | | 1309090999 Subastal - Hedging Effective | 1409999999 Subotal - Hedging Other | 1419999999 Subterial - Replication | 1429999999 Subtotal - Income Generation | 14399999999 Subtotal - Other | 1449999999 Totals | | Code | - | | | | | Code | * | | | ì | |
| - | Assemblica | | | | | 100000 | 1399999 | 1409999 | 1419999 | 1429999 | 1439999 | 1449999 | | (a) | | | 50.0 | ř. | Į. | (a) | | - 55 | 22 | 56 | J |

SCHEDULE DB - PART B - SECTION 1

| | 2 | | 1 100 | 5 | 9 | 7 | 96 | 6 | 10 | П | 12 | 13 | 14 | High | Highly Effective Hedges | dges | | 16 | 20 | 21 | . 22 |
|------------------|---|--------------------|-------------------------|---|----|---------------------|--|------------|--|----------------------|-------------------------------|-------------|--|--|---------------------------------------|--|--|---|---|---|------------------------------|
| Ticker
Symbol | Number of
Contracts | Notional
Amount | Description | Secription of a gradual description of or or or | į. | Aype(s) of of (a) E | of
ty or
tion | nge | Trade Date | Transaction
Price | Rep | -> | Book/
Adjusted
Carrying
Value | 15
Cumulative
Variation
Margin | 16
Deferred
Variation
Margin | Change in Variation Margin Gain (Loss) Used to Adjust Basis of Hedged Item | Cumulative
Variation
Margin for
All Other
Hedges | Cha
Van
M
M
M
M
G
G
G
G
G | Potential
Exposure | Hodge
Effectiveness
at Inception
and at
Year-End
(b) | Value of
One (1)
Point |
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| 5666666 | 13999999999999999999999999999999999999 | - Hedging | Effective | | | | | 1 | 0 | | | | | | | | | | | XXX | XXX |
| 666666 | 14099999999 Subtotal - Hedging Other | - Hedging | Other | | | | | | | 4 | | | | | | | | | | XXX | XXX |
| 5666661 | 1419999999 Subtotal - Replication | - Replicati | on | | | | , | | | | | | | | | | | | | XXX | XXX |
| 5666666 | 1429999999 Subtotal - Income Generation | - Income C | eneration | | | | | | | | | | | | | | | | | XXX | XXX |
| 3999999 | 143999999 Subtotal - Other | - Other | | | | | | | V | | | • | | | | | | | | XXX | XXX |
| 1999999 | 14499999999 Totals | | | | | | | | - | | - | | | | | | | | | XXX | XXX |
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| | | Total | Total Net Cash Deposits | osits | | | | | the formation of the first of t | | | | The second second | | | | | | | : 1 | |
| 8 | Code | | | | | | | | | 0.00 | Description of Hedged Risk(s) | of Hedged ! | Risk(s) | - | | | | | | | |
| | 1 | | | | | | | | | | | | | | Tanaga Maria | | | | | | 1 1 1 |
| | | | | | | | | | | | | | | | • | | | | | | |
| (g) | Code | | | | | | | | Financial o | r Economic | Impact of the | Hedge at t | he End of the R | Financial or Economic Impact of the Hedge at the End of the Reporting Period | | | | | | | -1 |
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SCHEDULE DB – PART B – SECTION 2 Future Contracts Terminated December 31 of Current Year

| - | 2 | 3 | | 5 | 9 | 7 | 8 | 6 | 10 | 11 | 12 | .13 | 14 | 15 | Change | Change in Variation Margin | Margin | 19 | 20 |
|-------------------|---|---|---|--------------------------------|---|-------------|--|---|---|---|---------------------|---|--------------------------------------|--------------------------|---------------------------|---|---|--|---------------------|
| | * | | | Description
of Item(s) | | | | | | | | | | | 91 | 11 | 82 | Hedge | |
| | | | 1 | Hedged,
I for
In me | | | Date of | | | | | | Indicate
Exercise,
Expiration, | - | Gain (Loss)
Recognized | Gain (Loss)
Used to
Adjust Basis | | Effectiveness
at Inception/
and at | |
| Ticker
Symbol | Number of
Contracts | Notional | De iption | Ger ation
iption or P scate | Chibit | Risk(s) (a) | Maturity or
Expiration | Exchange | Trade Date | Transaction
Price | Termination
Date | Termination
Price | Maturity or
Sale | Margin at
Termination | in Current
Year | of Hedged
Item | Deferred | Termination
(b) | of One (1)
Point |
| | | | | | | | | - | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | | |
| 399999999 | 139999999999 Subtotal - Hedging Effective | ging Effective | | | | | | | | | | | | | | | | XXX | XXX |
| 409999999 | 1409999999 Subtotal - Hedging Other | ging Other | | | | • | | | | | | | | | | | | XXX | XXX |
| 4199999999 | 1419999999 Subtotal - Replication | scation | | | | | | | | | | | 2 30 | | | | | XXX | XXX |
| 429999999 | 14299999999 Subtotal - Income Generation | me Generation | | | | | * | | | • | | | | | | | | XXX | XXX |
| 4399999999 | 14399999999 Subtotal - Other | ų. | | | | | | | 1 | | | | | | | | | XXX | XXX |
| 1449999999 Totals | Totals | | | | | | | | | (| | | | | | | | XXX | XXX |
| | | | | | | | | | | | 1 | | | | | | | | |
| 3 | Code | | | | | | | | Descrip | northe d'Risk(s) | K(S) | | | | | | | | |
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| (P) | Code | | | | | | Finan | icial or Econom | nic Impact of the | Financial or Economic Impact of the Hedge at the End of the Reporting | End of the Rep | sorting Pc. | | 4 | | | | | |
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| | | | *************************************** | Speciment of comments | *************************************** | | | *************************************** | | *************************************** | Variation (11) | *************************************** | P | | | 000000000000000000000000000000000000000 | 911 | | |
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SCHEDULE DB – PART D – SECTION 1
Counterparty Exposure for Derivative Instruments Open December 31 of Current Year

| Description of Exchange, Counted parts of Counted parts of Counted parts of Counted Support Credit (Counted Support) Fair Value of Administry (Value of Administry (Value of Administry of Administry (Value of Administry of Administry (Value of Administry of Administry (Value of Administry of Administry of Administry of Administry (Value of Administry | 1 | 1 72 | 3 | 4 | Boo | Book/Adjusted Carrying Value | alue | | Fair Value | | 3H5 | 1.2 |
|---|---|---|--|---|--|--|---|---|---|-------------------------------------|---|-------------------------------|
| | Description of Exchange,
Counterparty or
Central Clearingbouse | M
emen
Y or N) | Credit
Support
Annex
(Y or N) | Fair Value of
Acceptable
Collateral | S
Contracts With
Book/Adjusted
Carrying Value
>0 | 6
Contracts With
Book/Adjusted
Carrying Value | 7
Exposure Net of
Collateral | 8
Contracts With
Fair Value >0 | 9
Contracts With
Fair Value <0 | 10
Exposure Net of
Collateral | Potential
Exposure | Off-Balance
Sheet Exposure |
| | | | 36 | | | | | | | | | |
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| | | - | | \$ | | | | | | | | |
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| 5 | On property department on the property of the | *************************************** | | | (1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | *************************************** | *************************************** | *************************************** | | *************************************** | |
| | 99999999 Gross Totals | | | | 4 | | | | | | | |
| | Offset per SSAP No. 64 | | | | | | | | | | | |
| | Net after right of offset per SSAP No | 2,64 | | | | 4 | | | | | | |

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SCHEDULE DB – PART D – SECTION 2 Collateral for Derivative Instruments Open December 31 of Current Year

Collateral Pledged by Rep

| Exchange,
ounterparty or
Central | Type of Asset | 3
CUSIP
Identific. | 4
Description | 5
Fair Value | 6
Par Value | 7
Book/Adjusted
Carrying Value | 8
Maturity Date | 9
Type of Margin
(I, V or IV) |
|---|---------------|--------------------------|------------------|-----------------|---|---|--------------------|---|
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Collateral Pledged to Reporting Entity

| l
Exchange, | 2 | т | 4 | \$ | 9 | 7 | 8 | 6 |
|---|--------------------------|---|---|---------------------------------------|-----------|---------------------------------|---|---|
| Counterparty or
Central
Clearinghouse | Type of Asset
Pledged | CUSIP | Description | F Val | Par Value | Book/Adjusted
Carrying Value | Maturity Date | Type of Margin (I, V or IV) |
| | | | *************************************** | | | XXX | | |
| | | *************************************** | *************************************** | | | XXX | *************************************** | *************************************** |
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| | | | | | | XXX | | |
| 299999999 Totals | | | | | | XXX | XXX | XXX |

SCHEDULE DL - PART 1

SECURITIES LENDING COLLATERAL ASSETS
Reinvested Collateral Assets Owned December 31 Current Year
(Securities lending collateral assets reported in aggregate on Line 10 of the Assets page and not included on Schedules A, B, BA, D DB and E)

| CUSIP Identification | 2 Description | 3
Code | A NAIC Designation and Administrative Symbol/Market | 5
Fair Value | 6 Book/Adjusted Carrying Val | Maturity Date |
|--|--|---|--|---|--|---|
| resources a contract to the production of | Commission of the Commission o | Commissions | Indicator | | A | |
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| 9999999 Totals | | • | | | | XXX |
| Gen I Interrogato 1. I lactivity 2. Aver balan | ries: for the year cue for the year curities lending collateral assets ; NAIC 2 S ; N | | Value \$ | Book/Adj | usted Carrying Value
usted Carrying Value
IC designation:
; NAIC 6 \$ | s |

SCHEDULE DL - PART 2

SECURITIES LENDING COLLATERAL ASSETS
Reinvested Collateral Assets Owned December 31 Current Year
(Securities lending collateral assets included on Schedules A, B, BA, D, DB and E and not reported in aggregate on Line 10 of the Assets page)

| 1
CUSIP | 2 | 3 | 4
NAIC
Designation and
Administrative
Symbol/Market | 5 | 6 Book/Adjusted | 0 |
|----------------|---|---|---|---|---|---|
| Identification | Description | Code | Indicator | Fair Value | Carrying Val | Maturity Date |
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| 999999 Totals | . = - | | | | | XXX |

| Ge | Interrogatories: | | | |
|----|---------------------------|------------|------------------------------------|----|
| 1. | I lactivity for the year | Fair Value | \$
Book/Adjusted Carrying Value | \$ |
| 2. | Avel balance for the year | Fair Value | \$
Book/Adjusted Carrying Value | S |

SCHEDULE E - PART 1 - CASH

| | I
Depository | 2
Code | Rate of Interest | 4
Amount of
Interest
Received
During Year | 5
Amount of
Interest Accrued
December 31
of Current Year | 6
Balanc | 7 |
|---|--|---|---|---|--|---|---|
| OBEN DE | | Code | Interest | During Feur | of Current Teat | Dumin | |
| OPEN DE | POSITORIES | | | | | A. | |
| | | | | | | | XXX |
| | | | *************************************** | | *************************************** | | XXX |
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| *************************************** | | 200000 | 1 | | | | XXX |
| *************************************** | *************************************** | A | | | | | XXX |
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| | | | | | *************************************** | | XXX |
| | | | | | *************************************** | *********** | XXX |
|)199998 I | Deposits indepositories that do not extend the allowable limit in any one depository instructions)-open depositories | xxx | XXX | *************************************** | | | XXX |
| | | | 2000 | | | | 12427240 |
| 1199999 | Γotals – Open Depositories | 100 | XXX | *************************************** | | | XXX |
| SUSPEND | ED DEPOSITORIES | | | | | | |
| | | | ************* | *************************************** | | ************* | |
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| | Deposits in | | | | | | |
| | See Instructions)-suspended depository | XXX | XXX | | | | XXX |
| 299999 | Fotals – Susper of Depositories | XXX | XXX | | | | XXX |
| | Total Cash on Depo. | XXX | XXX | | 201201100000000000000000000000000000000 | | XXX |
| | Cash in Same 's Oth | XXX | XXX | XXX | XXX | *************************************** | XXX |
| | Cush in Super Supe | 21.21.21 | 22.22 | AAA | AAA | | 2020 |

TO ALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

| -1 | 1. January | 4. April |
7. July |
10. October | | |
|-----|--|----------|---------------|------------------|-----|--|
| - 1 | 2 February | 5. May |
8. August |
11. November | | |
| - 1 | S. Contraction of the Contractio | 6. June | 9. September | 12. December | 1 1 | |

SCHEDULE E – PART 2 – CASH EQUIVALENTS Show Investments Owned December 31 of Current Year

| CUSIP | D. intion | Code | Date
Acquired | Rate of
Interest | Maturity
Date | Book/Adjusted
Carrying Value | Amount of Interest
Due & Accrued | Amount Received
During Year |
|---|---|---|---|---|---|---|---|---|
| *************************************** | | *************************************** | *************************************** | *************************************** | | *************************************** | | |
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SCHEDULE E - PART 3 - SPECIAL DEPOSITS

| | | 1 | 2 | | its For
All Policyholders | All Other Sp | ecial Deposits |
|----------|--|---|--|--|---|---|---|
| | States, etc. | Type of
Deposit | Purpose of
Deposit | 3
Book/Adjusted
Carrying Value | 4
Fair
Value | 5
Book/Adjusted
Carrying Value | 6
Fair |
| 2. | Alabama | | | | | | |
| 3. | Arizona | *************************************** | | | *************************************** | *************************************** | |
| 4. | ArkansasAR | | | | | | |
| 5. | CaliforniaCA | *************************************** | *************************************** | | | | |
| 6. | ColoradoCO | | | *************************************** | | | 1 |
| 7. | ConnecticutCT | | *************************************** | *************************************** | 100000000000000000000000000000000000000 | 4 | |
| 8. | Delaware DE | | | | | | |
| 9. | District of ColumbiaDC | | | | | | |
| 0. | FloridaFL | *************************************** | | | | | |
| 1. | GeorgiaGA | | | | | | |
| 2. | HawaiiHI | | | | | W 44 | |
| 3. | IdahoID | *************************************** | | Norman and a second a second and a second and a second and a second and a second an | | | |
| 4. | IllinoisIL | | | | | | |
| 5. | IndianaIN | *************************************** | | | | | |
| 6. | IowaIA | *************************************** | | 310400340000400040 | | | |
| 7. | KansasKS | | | | | | |
| 8. | KentuckyKY | | | | | | |
| 9. | Louisiana LA | *************************************** | | | | | |
| 0. | MaineME | | | | X | | |
| 1. | Maryland | | · | | | | |
| 2. | Massachusetts MA | | | | anning January | | |
| 3. | MichiganMI | | | | | | |
| 4. | Minnesota MN | | | | | | |
| 5. | MississippiMS | | | | | | |
| 6. | Missouri MO | | | | | | |
| 7. | MontanaMT | | | | * | | *************************************** |
| 8. | NebraskaNE | | *************************************** | | 100000000000000000000000000000000000000 | | |
|). | NevadaNV | | *************************************** | | | | |
|). | New HampshireNH | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | *************************************** |
| ١. | New JerseyNJ | | | | 20210301600111030110 | *************************************** | |
| 2. | New MexicoNM | | | | | *************************************** | |
| 3. | New YorkNY | | | | | | |
| 4. | North CarolinaNC | *************************************** | | | | | : |
| 5. | North DakotaND | *************************************** | A | | | | *************************************** |
| 6. | OhioOH | | A | | | | |
| 7. | OklahomaOK | | (| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| 8. | Oregon OR | | | | | | |
| 9. | PennsylvaniaPA | | inner mining | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| 0. | Rhode IslandRI | | | | | | |
| 1. | South CarolinaSC | | | | | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 2. | South DakotaSD | | | | | | |
| 3. | TennesseeTN | | | | | | |
| 4. | TexasTX | | < | | | | |
| 5. | UtahUT | | | | | | |
| 6. | VermontVT | | ************************************* | Account control of the last of | 700100000000000000000000000000000000000 | | |
| 7. | Virginia | | | | | *************************************** | |
| 8. | Washington | | *************************************** | 200000000000000000000000000000000000000 | | *************************************** | . 101001103101110031111 |
| 9. | West Virginia | | | | | | |
| 0. | WisconsinW | inning ton | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | *************************************** | 744444444444444444444444444444444444444 |
| 1. | WyomingWY | | | | | | |
| 2. | American SamoaAS | | | | *************************************** | | |
| 3.
4. | GuamGU | | | | | | |
| ş.
5. | Puerto RicoPR | | Sammen | 300000300000000000000000000000000000000 | 201100000000000000000000000000000000000 | *************************************** | |
| | US Virgin IslandsVI | 202010000000000000000000000000000000000 | | | uummennamentuu. | 500000000000000000000000000000000000000 | |
| 5. | Northern Mariana Islands | | | | , | | |
| 7. | Canada C. Aggregate Alier and Other OT | VVV | vvv | *************************************** | | *************************************** | *************************************** |
| 8. | | XXX | XXX | | | *************************************** | |
| _ | Total | XXX | XXX | | | | - |
| | TAILS WRITE INS | | | | | | |
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| 000 | from overflow page | XXX | XXX | | | | |
| 899 | 9. To (Lines 5801 – 5803 + 5898) | 2,555 | 22222 | | | | |
| | (Line bove) | XXX | XXX | 1 | I | 1 | 1 |

Affix Bar Code Above

SUPPLEMENTAL COMPENSATION EXHIBIT

For The Year Ended December 31, 2018 (To Be Filed by March 1)

PART 1 - INTERROGATORIES

- 1. The reporting insurer is a member of a group of insurers or other holding company system.

 If yes, do the amounts below represent 1) total gross compensation paid to each individual by or on behalf of all companies that are part of the group: Yes []; or 2) allocation to each insurer: Yes [].

 2. Did any person while an officer, director, or trustee of the reporting entity receive directly or indirectly, during the period covered by this statement any commission on the business transactions of the reporting entity?

 3. Except for retirement plans generally applicable to its staff employees, has the reporting entity any agreement with any person, other than contracts with its agents for the payment of commissions whereby it agrees that for any service rendered or to be rendered, that he/she shall receive directly or indirectly, any salary, compensation or emolument that will extend beyond a period of 12 months from the date of the agreement?

PART 2 – OFFICERS AND EMPLOYEES COMPENSATION

| Name and Principal Position | 2
Year | 3
Salary | 4
Bonus | 5
Stock
Awards | 6
Option
Awards | 7
Sign-on
Payments | Severane
yments | All Other ompensation | 10
Totals |
|---|----------------------|---|---|---|---|---|---|-----------------------|---|
| Current: 1. Principal Executive Officer | 2018
2017
2016 | 3 | *************************************** | *************************************** | | | | | |
| Current: 2. Principal Financial Officer | 2018
2017
2016 | (************************************** | *************************************** | | | | | | *************************************** |
| 3. | 2018
2017
2016 | | | | Z | | | | |
| 4. | 2018
2017
2016 | *************************************** | *************************************** | | | *************************************** | | | *************************************** |
| 5. | 2018
2017
2016 | | - | |) | ************** | | | |
| 6. | 2018
2017
2016 | | | | *************************************** | ************** | *************************************** | | |
| 7. | 2018
2017
2016 | | | / | j | | | | |
| 8. | 2018
2017
2016 | | | | *************************************** | 0.0000000000000000000000000000000000000 | | | |
| 9. | 2018
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20 | | *************************************** | | Harmon Harm | ************* | | | |
| 10, | 2017
2017 | | *************************************** | *************************************** | | | 1-440-46(140-641) | | |

PART 3 - DIRECTOR COMPENSATION

| - | N N | Paid or Deferred for | Services as Director | | .6 | 7 |
|--|---------------------|----------------------|-----------------------|------------|--|--------|
| Name a Principm wition of Occupation and ompany (it side Director) | Direct Compensation | 3
Stock
Awards | 4
Option
Awards | 5
Other | All Other
Compensation
Paid or
Deferred | Totals |
| 10 | | | | | | A |
| | | | | | | |
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PART 4 - NARRATIVE DESCRIPTION OF MATERIAL FACTORS

| Provide a narrative description of any material factors necessary to gain an understanding | ng of the information disclosed in the tables. |
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INSURANCE EXPENSE EXHIBIT
For The Year Ended December 31, 2018
(To Be Filed by April 1)

| OF THE (Name) | | | |
|----------------------|---------------|--|--|
| ADDRESS (City, State | and Zip Code) | | |
| | | Employer's Identification Number (FE' 1) | |
| Contact Person | Title | | |

INTERROGATORIES

| 1. | Cha | nge in reserve for deferred maternity and other similar benefits are reflected in: | | | | | |
|-----|--------|--|----------|-----|----------------|-----|---|
| | 1.1 | Premiums Earned | | | [] | | |
| | 1.2 | Losses Incurred | | 104 | | | |
| | 1.3 | Not Applicable | | 1 | | - | b |
| 2. | Indi | cate amounts received from securities subject to proration for federal tax purposes. Report amounts in whole dollars | only: | | And the second | | V |
| | 2.1 | Amount included on Exhibit of Net Investment Income, Line 1.1, Column 2 | | | | P. | |
| | 2.2 | Amount included on Exhibit of Net Investment Income, Line 2.1, Column 2 | 1 | | | | |
| | 2.3 | Amount included on Exhibit of Net Investment Income, Line 2.11, Column 2 | " | | | | |
| | 2.4 | Amount included on Exhibit of Net Investment Income, Line 2.2, Column 2 | | | | | |
| | 2.5 | Amount included on Exhibit of Net Investment Income, Line 2.21, Column 2 | | | | | |
| 3. | Indi | cate amounts shown in the Annual Statement for the following items. Report amounts in the downers only: | | | | | |
| | 3.1 | Net Investment Income, Page 4, Line 9, Column 1 | | | | | |
| | 3.2 | Net realized Capital Gain or (Loss), Page 4, Line 10, Column 1 \$ | | | | | |
| 4.1 | | information provided in the Insurance Expense Exhibit will be used a many prosons to estimate the allocation expenses and profit to the various lines of business. Are there and the sense reading special comment or explanation? | Yes | [] | No | [] | |
| 4.2 | | items allocated to lines of business in Parts II append using methods methods in the instructions? ement may be attached. | Yes | [] | No | [] | |
| 4.3 | | es, explain: | | | | | |
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PART I – ALLOCATION TO EXPENSE GROUPS (\$000 OMITTED)

| | | 1 | Other | Underwriting Ex | penses | 5 | 6 |
|------------|---|---|--|---|---|---|---|
| | Operating Expense
Classifications | Loss
Adjustment
Expense | 2 Acquisition, Field Supervision and Collection Expenses | General
Expenses | Taxes, Licenses and Fees | Investme. | Total
Expenses |
| 1. | Claim adjustment services: | | | | | | 4 |
| | 1.1 Direct 1.2 Reinsurance assumed 1.3 Reinsurance ceded 1.4 Net claim adjustment services (Lines 1.1+1.2-1.3). | | | | | | |
| 2. | Commission and brokerage: 2.1 Direct excluding contingent | | | | 1 | | |
| | Reinsurance assumed excluding contingent Reinsurance ceded excluding contingent | *************************************** | | | / | F | |
| | 2.4 Contingent—direct | | *************************************** | | | | |
| | 2.5 Contingent—reinsurance assumed | | | | | | |
| | 2.6 Contingent—reinsurance ceded | | | | | | |
| | 2.7 Policy and membership fees 2.8 Net commission and brokerage (Line 2.1.2.2.2.2.2.4.2.5.2.6.2.7) | | • | | | *************************************** | |
| 3 | (Lines 2.1+2.2-2.3+2.4+2.5-2.6+2.7) | | | Ø | Ø | *************************************** | |
| | Advertising | | | | | | |
| 5. | Boards, bureaus and associations | | | | | | |
| | Surveys and underwriting reports | | | | | | *************************************** |
| | Audit of assureds' records | | | | | | |
| 0. | 8.1 Salaries | | | D | | | |
| | 8.2 Payroll taxes | | | | | | |
| 9. | Employee relations and welfare | | (| | | | |
| | Insurance | | | | *************************************** | *************************************** | |
| 11. | Directors' fees | | | | | | |
| | Travel and travel items | | | | | | |
| | Equipment | | | | | | |
| | Cost or depreciation of EDP equipment and software | | | | | | |
| 16. | Printing and stationery | | | | | | |
| 17.
18. | Postage, telephone and telegraph, exchange and express. | | | | *************************************** | | |
| 19. | Legal and auditing | | | | *************************************** | *************************************** | |
| 20. | Taxes, licenses and fees:
20.1 State and local insurance taxes deducting guaranty | *************************************** | | | | | |
| | association credits of \$ | *************************************** | *************************************** | : | | | |
| | | | | | | | |
| | 20.3 Gross guaranty association assess ents | | | | | | *************************************** |
| | 20.5 Total taxes, licenses and fees (100 es | | | | | COMMONSTRUCTOR OF A | |
| 21 | 20.1+20.2+20.3+20.4) | *************************************** | | *************************************** | | | |
| | Real estate expenses Real estate taxes | *************************************** | | | | | *************************************** |
| 23.
24. | Reimbursements by urins. d plans | XXX | XXX | XXX | XXX | XXX | XXX |
| 25. | TOTAL EXPI SES INC. RED | | | | | | |
| DET | AILS WRI INS | | | | | | |
| 2401 | | | *************************************** | | | *************************************** | |
| 2402 | | | *************************************** | | | (************************************** | 300000000000000000000000000000000000000 |
| 2498 | | *************************************** | | | | | |
| 2499 | TO: (Lines 2401 through 2403 plus 2498) (Line 24 above) | | | | | | |

PART II – ALLOCATION TO LINES OF BUSINESS NET OF REINSURANCE IMS, I SSES, EXPENSES, RESERVES AND PROFITS AND PERCENTAGES TO PREMIUMS EARNED FOR BUSINESS NET OF REINSURANCE (\$000 OMITTED)

| | | 100 | 1 | | | | (| L | | | oss Adjustn | Loss Adjustment Expense | - | | | To | s Adjustin | Loss Adjustment Expense | 8 | Uneurned Premium | conton | | |
|----------------------|--|--|---------|---|-------------------|--|--|--|---|--|--|--|---|---|--|--|---|---|---|---|--|---|--------|
| | | (Pg.) | e j.B | Premiums Earned | Earned
Col. 4) | Dividends to
Policyholders
(Pg. 4, Line 17 | olders
ine 17) | Incurred Loss
(Pg. 9, Pt. 2,
Col. 7) | dLoss
Pt. 2, | Defense and Cost
Containment
Expenses Incurred | Defense and Cost
Containment
Expenses Incurred | Adjusting and
Other Expenses
Incurred | ng and
spenses | Unpaid I
(Pg. 10, I
Col. | Unpaid Losses
(Pg. 10, Pt. 2A,
Col. 8) | Defense and Cost
Containment
Expenses Unnaid | nd Cost
ment
Unnaid | Adjusting and
Other Expenses
Unmaid | and
enses | Reserves
(Pg. 7, Pt. 1A,
Col. 5) | 1A, | Agents' Balances | lances |
| | | Amou | 2 % | - wwy | 78 | 5
Amount | 9% | 7
Amount | × % | 9
Amount | 10 | II | 12 | 13
Amount | 14 % | 15
Amount | 91 | 17
Amount | 8 % | 19
Amount | 20 | 21
Amount | 27% |
| 1. Fire | | | | | 100.0 | | | *************************************** | | *************************************** | - | *************************************** | | *************************************** | | - | | 1 | | | | | 1 |
| 2.1 Allied Lines | cs | į | XXX | | 100.0 | | - | | | | - | | - | - | | - | | | 1 | | - | | - |
| | eni Crop | | XXX | | 100.0 | | | | | | + | | - designation | | *************************************** | *************************************** | - | *************************************** | - C | Terrest Terrest | | | - |
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| | do | | XXX | , | | > | - | | | | | | | | | | 2000 | | | | | | |
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PART II—ALLOCATION TO LINES OF BUSINESS NET OF REINSURANCE (Continued) (MS, LOSSES, EXPENSES, RESERVES AND PROFITS AND PERCENTAGES TO PREMIUMS EARNED FOR BUSINESS NET OF REINSURANCE (8000 OMITTED)

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| 3.3. Reinstance Nonpropertional Assumed | 33. Reinstance Not proportional Assumed. Aggregate Write late for Other Lines of Business. II.S OF WRITE-INS Summary of termining write-ine for Line 34 above). | 30 | Warranty | | **** | | *************************************** | | | | | | | A | | | | - | | | ******* | | |
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NOTE: THE ALLOCATION OF INVESTMENT INCOME PROM CAPITAL AND SURPLUS BY LINE OF BUSINESS MAY NOT ACCURATELY REFLECT THE PROFITABILITY OF A PARTICULAR LINE FG. USE IN THE ATLANARING PROCESS.

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PART III – ALLOCATION TO LINES OF DIRECT BUSINESS WRITTEN
(1 HUMS, LOSSES, EXPENSES, RESERVES AND PROFITS AND PERCENTAGES TO PREMIUMS EARNED FOR DIRECT BUSINESS WRITTEN
(5000 OMITTED)

| | 1 | - | | _ | | - | | - | - Barber | S / Majuraters | TOSS Aujustineni Expense | | | | T-T-Y | MS Aujusus | Loss Adjustment Expense | 2 | | | | |
|---|--|--------------------|---|----------|---|---|--|---|--|---|---|---|---|---|--|---|---|---|--|---|---|---|
| | | ms Written
8. P | Premiums Earned
(Sch. T, Line 59,
Col. 3) | 59, | Dividends
to
Policyholders | nds | Incurred Loss
(Seh. T, Line 59
Col. 6) | Loss
re 59, | Defense and Cost
Containment
Expenses Incurred | d Cost | Adjusting and
Other Expenses
Incurred | g and
senses | Unpaid Losses
(Sch. T, Line 59,
Col. 7) | .osses
ine 59,
7) | Defense and Cost
Containment
Expenses Unpaid | nd Cost
ment
Unpaid | Adjusting and
Other Expenses
Unpaid | ng and
spenses
aid | Unearned | Unearned Premium
Reserves | Agents' Balances | alances |
| | Amor | 2 % | 3
Amyles | \vdash | 5
Amount | 9% | 7
Amount | s % | 9
Amount | 10 | 11
Amount | 12 | 13
Amount | 14 | 15
Amount | 98 | 17
Amount | 18 | 19
Amount | 20 | 21
Amount | 22 |
| 1. Fire. | | AXXX | K | 0.00 | | | | | | *************************************** | | *************************************** | | *************************************** | | *************************************** | | 310001110001 | *************************************** | *************************************** | | - |
| | - | | | 0.00 | | | | | | | | | | | | | | | | | | |
| 2.3 Federal Flood | | XXX | 1 | 0.00 | | *************************************** | | and a second | | and and | | 1 | | moderne | *************************************** | MODELL CO. | | *************************************** | | *************************************** | *************************************** | *************************************** |
| | | XXX | | 0.00 | | - | | - | | - | | | | | | - | | | | | | |
| 2.5 Private Flood | 1 | XXX | | 00.00 | • | ************************************** | | *************************************** | Commence | Janear com | *************************************** | accompany | *************************************** | necotament. | +00000000000000000000000000000000000000 | - accountant | *************************************** | *************************************** | The second second | , common | *************************************** | - |
| | - | XXX | - Standards | | (| | , married | 1 | - | | | | | | | - | - | *************************************** | - | | - | |
| 100 | | vvv | | 7 | | | | *************************************** | | - | | *************************************** | | *************************************** | | | | | | | | |
| | *************************************** | XXX | | 0.00 | | Simon | | more and a second | | Singarque | *************************************** | *********** | *************************************** | 20000000 | *************************************** | 200200000 | *************************************** | *************************************** | *************************************** | 340000000 | reconstance | *************************************** |
| 5.2 Commercial Multiple Peril (Liability | | - Anna | • | | - | Š | | | | | | | | | | | | | | | | |
| | | XXX | | 0000 | 1 | 1 | - | | | | | | | | | | | *************************************** | | | - | - |
| 6. Morgage Outranty | | XXX | | 0.00 | | 1 | P | | | | | - | | | | | | | | | | 1 |
| 9. Inland Marine. | | XXX | | 0.00 | | | | 4 | | 75,000 | | Total Control | | | | 7000000 | | | | | | |
| | | XXX | - | 0.00 | - | | | 1 | | | | | | | | | | | | | | |
| | | XXX | - | 0.00 | - | | - | | | *************************************** | - | *************************************** | | *************************************** | - | *************************************** | - | *************************************** | | *************************************** | - | - |
| | | XXX | | 0.00 | - Incomment | *************************************** | *************************************** | - Second | | statement. | *************************************** | *************************************** | | *************************************** | 100000000000000000000000000000000000000 | *************************************** | *************************************** | *************************************** | - | *************************************** | *************************************** | *************************************** |
| Group A&H (See Interrogatory 1) | | XXX | - | 0.00 | | *************************************** | 1 | | 1 | *************************************** | | *************************************** | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | *************************************** | - | *************************************** | | *************************************** | | *************************************** |
| | *************************************** | XXX | | 0.00 | *************************************** | - | - | | - | | | | *************************************** | | | | *************************************** | | | *************************************** | - | 1 |
| 15. CAncr A&H (See Interrogatory 1) | | XXX | | 0.00 | | 2000000000 | V | *************************************** | | | | *************************************** | | *************************************** | *************************************** | ************ | *************************************** | 1000000000 | *************************************** | Tommeron. | *************************************** | beautiful. |
| _ | | XXX | | 000 | | *************************************** | | - | 1 | *********** | | *************************************** | | *************************************** | | *************************************** | | *************************************** | | | | - |
| | | XXX | | 0000 | | | 1 | 1 | | | | | | | | | | | | | | |
| | | XXX | 1 | 0.00 | | | |) | | | | | | | | | | | - | - | | |
| 18. Products Linbility | | XXX | 1 | 0.00 | | | - | *************************************** | | | *************************************** | *************************************** | | *************************************** | | | | *************************************** | | | | *************************************** |
| 19.1, 19.2. Private Passenger Auto Liability | | XXX | | 0.00 | | 200000000 | - Orange dynamics | | 1 | | | , d | | 200000000 | *************************************** | , accountage | *************************************** | January Control | *************************************** | - Accessed | | ********** |
| 19.5, 19.4. Commercial Auto Liability | - Interest Control | XXX | - | 0.00 | *************************************** | | 1 | *************************************** | | | | *************************************** | | *************************************** | | *************************************** | *************************************** | ********** | | 40040404 | | *************************************** |
| | | XXX | 4 | 0.00 | | - Common | | | | | 6 | | | No. of Contract, | | | | | | 20000000 | | |
| - | | XXX | J | 0.00 | | | | | | | | 4 | | | - | | | | - | - | - | |
| | *************************************** | XXX | - | 0.00 | | ********** | | | | V | · | 9 | • | *************************************** | | *************************************** | *************************************** | *************************************** | *************************************** | | | *************************************** |
| | | XXX | | 000 | | *************************************** | | 310000000 | | | | | - Tonas | 200000000 | | 300000000 | - | 31003110011 | | | | ÷100000 |
| 26. Burelary and Theft | | XXX | | 0000 | | | | | | - | | - | | | | | | *************************************** | | *************************************** | | |
| 27. Boiler and Machinery | - Consessant August 1 | XXX | T. T. | 0.00 | - Contract of the Contract of | i | - | 1 | - Comments | 1 | > | - | | 1 | | | | 1 | de la constante de la constant | | | - |
| | - | XXX | - | 0.00 | | *************************************** | - | *************************************** | | *************************************** | | | | | de constitute de la con | *************************************** | *************************************** | ************ | *************************************** | *************************************** | | hammer |
| 29. International | | XXX | 1 | 0000 | | *************************************** | | *************************************** | | *************************************** | | 7 | | | | *************************************** | - | *************************************** | - | - | - | |
| | THE STREET, ST | vvv | | 000 | | | | month of the | | 20010000 | | 7 | | 4 | | 300000000 | | , | | | - | - |
| | | XXX | _ | 0.00 | | | | | | | | | - | | | | | | | | | |
| 35. TOTAL (Lines 1 through 34) | | XXX | - | 0.00 | | | | | | | | | | 100 | 4 | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | - | | | | | | | L |
| 3401. | | XXX | | 000 | | annimine. | | *************************************** | | 200000000000000000000000000000000000000 | | *************************************** | | | | | 4 | | *************************************** | Yesteroo | *************************************** | |
| 3402. | - | XXX | - | 000 | | | | | | | | | |) | | 2 | • | | | | | |
| | | | | | | | | | | | | | | • | | | | | | | | |
| Line 34 from overflow page | | XXX | 1 | 0.00 | - | | | - | | | - | - | | | | | | | | *************************************** | | |
| | | XXX | _ | 0.00 | | | | | | | | | | | | 4 | (| | | | | |

Supp7

D/C

PART III – ALLOCATION TO LINES OF DIRECT BUSINESS WRITTEN (Continued) IUMS, LOSSES, EXPENSES, RESERVES AND PROFITS AND PERCENTAGES TO PREMIUMS EARNED FOR DIRECT BUSINESS WRITTEN (S000 OMITTED)

| AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED | | | | | | | | | | | | | |
|---|--|--|---|---|---|--|---|---|---|--|---|---|---|
| | | Commission and
Brokerage Expenses
Incurred | n and
penses
d | Taxes, Licenses & Fees
Incurred | & Fees | Other Acquisitions, Field
Supervision, and
Collection Expenses
Incurred | s, Field
and
enses | General Expenses
Incurred | sasua | Other Income Less
Other Expenses | e Less
nses | Pre-Tax Profit or Loss
Excluding All
Investment | t or Loss
All |
| | × | 23
Amount | 2% | .25
Amount | 56
% | 27
Amount | 28 | 29
Amount | 30 | 31
Amount | 32 | 33
Amount | 34 |
| | and committee the state of the | | -0.000000000000000000000000000000000000 | | - Salestonett | | -00000000 | | *************************************** | | | | *************************************** |
| 2.1 Allied Lines | | | *************************************** | | | | - | | | | - | | |
| | to distance control to the control t | | *************************************** | *************************************** | 1 | * | - | | | | | | *************************************** |
| | and continuous and an analysis of the continuous and an analysis of the continuous and an arrangement of the continuous and an arrangement of the continuous and an arrangement of the continuous and arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangement of the continuous arrangem | | *************************************** | | *************************************** | *************************************** | *************************************** | | | | A | | |
| | | *************************************** | Section 1 | | ************ | *************************************** | - | | | *************************************** | - | | Science . |
| 2.5 Private Flood | | - | *************************************** | *************************************** | *************************************** | - | | | *************************************** | | *************************************** | - | *************************************** |
| Farmowners Multiple Peril | Common Co | *************************************** | *************************************** | | | | | | | | 331111111111111111111111111111111111111 | | 3000000000 |
| Homeowners Multiple Penl | minimum distribution design de | | - theresees the | | - | - management of the same | | saturation and a second | · · · · · · · · · · · · · · · · · · · | | ************************************** | | · Sentence . |
| | 30) | | - managements | | | And the Personal Property of the Party of th | | | | | | | - |
| Commercial Multiple Peril (Liability Portion). | The state of the s | *************************************** | *************************************** | *************************************** | | | | *************************************** | | | *************************************** | | |
| Mortgage Cunranty | minimum designation of the second sec | | - | *************************************** | 1 | | | | - | - | | | |
| Ocean Marine | men) de proprietation d | Shreetishteetisteetis | (Annual Control | | Obsessment | dimensional control of | | -1400 material 0001(14) | | THE STATE OF THE S | *************************************** | | |
| Inland Marine | months of the property of the | 4 | *************************************** | *************************************** | | *************************************** | - | | | | | | |
| Financial Guaranty | | | *************************************** | | | | 200000000000000000000000000000000000000 | | Section 1 | | *************************************** | | |
| Medical Professional Ltability | 100 (01110 (0111111 (0111) | | | | - | | | | | | *************************************** | | |
| Earthquake | | | | | | | | | | | *************************************** | | |
| Group A&H (See Interrogatory 1) | | | | | | | | | | - | | | |
| Credit A&H | | *************************************** | Jennouse | 0.000.000.000.000.000.000 | | | Occupanions. | *************************************** | *************************************** | STATE OF THE PARTY | 100000000 | | |
| Unici A&H (See Interrogatory 1) | | | | | | | | | | | - | | |
| workers Compensation | | A | | | *************************************** | - | | | - derrotes areas | | | | |
| 7.2 Other Liability, Chaine Made | | | 4 | | | | | - | - | | | | |
| | | | | | | | | | | | *************************************** | | - |
| | | | | | | *************************************** | | | | | | | |
| 10.1 for December Auto Linkility | | | | P | | | -0,000 | | | | processor | | 0000000 |
| 19.3 to 4 Commercial Auto Liskillar | | | | | | | | | | | - | | |
| 21.1 Percents December Auto Division Democra- | | | 4 | | | | | | | | | | |
| | | | | | | | | | - | | | | |
| | | | ó | | | | | | | | | | |
| Fidelity | | | | | 4 | | | - | | | | | |
| Surely | | | | | | 4 | | | | | | | |
| Burelary and Theft | | | | | (| > | | 1 | | | | | |
| Boiler and Machinery | | | Assessment | | | \
\ | - Constitution | | *************************************** | | - Total Control | | - |
| Credit | | | - | | | | | | | | | | |
| International | | *************************************** | *************************************** | > | | | *************************************** | | - | | *************************************** | | *************************************** |
| Warranty | | *************************************** | Ossessees | | | | | *************************************** | | | - | | |
| Aggregate Write-Ins for Other Lines of Business. | | | | | | | | | | | | | |
| TOTAL (Lines 1 through 34) | | | 100 | | 1 | | | | | | 200 | | |
| DETAILS OF WRITE-INS | | | | | - | | | | | | | | |
| 3401 | | *************************************** | - | | | | | PRODUCTION OF THE PARTY. | *************************************** | *************************************** | ************* | | |
| 3402, | | | *************************************** | - | *************************************** | | | 1 | Tonaman and | - | THE REAL PROPERTY. | - | - |
| 3403. | | *************************************** | *************************************** | *************************************** | | | · | | *************************************** | | | | |
| | In overflow page | | | the same of the same of the same of | | - | | | | | | | |

OVERFLOW PAGE FOR WRITE-INS



Affix Bar Code Above

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES For The Year Ended December 31, 2018 (To Be Filed by April 1)

| Of The | Com |
|--|--------------|
| Address (City, State, Zip Code) NAIC Group Code | |
| The Grap Code | |
| The Land Billian Control of the Land Control o | Control |
| The Investment Risks Interrogatories are to be filed by April 1. They are also to be included with the Financial Statements. | Statutory |
| rinanciai Statements. | , |
| Answer the following interrogatories by reporting the applicable U.S. dollar amounts and centag of the | reporting |
| entity's total admitted assets held in that category of investments. | reporting |
| charly stotal damated dissess field in that edicigory of investments. | |
| 1. Reporting entity's total admitted assets as reported on Page 2 of this annual statement \$ | |
| | |
| Ten largest exposures to a single issuer/borrower/investment. | |
| | |
| 1 2 4 | |
| Description of Percentage of | |
| Issuer Exposure Air ut Admitted As | sets |
| 2.01 | % |
| 2.02 | |
| 2.03 | |
| 2.04 | |
| 2.05 | |
| 2.06 | |
| | |
| 2.08 | |
| 2.10 | |
| | |
| 3. Amounts and percentages of the reporting entire that admitted assets held in bonds and preferred stocks | by NAIC |
| designation. | NO STONESSES |
| | |
| Bonds 1 2 Preferred Stocks 3 | 4 |
| 3.01 NAIC 1 \$ % 3.07 P/RP-1 \$ | % |
| 3.02 NAIC 2 \$% 3.08 P/RP-2 \$ | % |
| 3.03 NAIC 3 \$ % 3.09 P/RP-3 \$ | % |
| 3.04 NAIC 4 \$% 3.10 P/RP-4 \$ | % |
| 3.05 NAIC 5 \$ % 3.11 P/RP-5 \$ | % |
| | % |
| | |
| 4. Assets held in eight stments: | |
| | |
| are assembled in foreign investments less than 2.5% of the reporting entity's | |
| | 0[] |
| | |
| esponse to 4.01 above is yes, responses are not required for interrogatories $5-10$. | |
| | |
| | % |
| | % |
| 4.04 Insurance liabilities denominated in that same foreign currency \$ | % |

| | Aggicga | ate foreign investment exposure categori | | | |
|----|---|--|---|----------------------|----------------------|
| | 5.01 | C | 1 | | 2 |
| | 5.01 | Countries designated NAIC 1 | S | | % |
| | 5.02 | Countries designated NAIC 2 | S | | % |
| | 5.03 | Countries designated NAIC 3 or belo | ow \$ | | X |
|). | Largest | foreign investment exposures by country | y, categorized by the cou | intry's NAIC sovere | ign designation: |
| | | Constitution of NAIGA | 1 | | 2 |
| | 6.01 | Countries designated NAIC 1: | ér. | | * N |
| | 6.01 | Country 1: | \$ | | |
| | 6.02 | Country 2: | \$ | | 70 |
| | 6.00 | Countries designated NAIC 2: | | | W |
| | 6.03 | Country 1: | \$ | | % |
| | 6.04 | Country 2: | \$ | | % |
| | | Countries designated NAIC 3 or below | | | 10 |
| | 6.05 | Country 1: | \$ | | % |
| | 6.06 | Country 2: | \$ | | % |
| | | | 1 | | 2 |
| | Aggrega | ate unhedged foreign currency exposure | \$ | | % |
| 3. | Aggrega | ate unhedged foreign currency exposure | categorized by NAIC. | ereign designation: | |
| | | | Ī | | 2 |
| | 8.01 | Countries designated NAIC 1 | S | | % |
| | 8.02 | Countries designated NAIC 2 | S | | % |
| | 8.03 | Countries designated NAIC 3 or below | w \$ | | % |
|). | Largest | unhedged foreign currency exposure | cou. v, ca. orized by | the country's NAIG | Sovereign design |
| | | | 1 | | 2 |
| | | Countries designated NAIC 1: | | | |
| | 9.01 | Country 1: | 9 | | % |
| | 9.02 | Country 2: | V | | % |
| | | Countries designated NAIC 2: | | | |
| | 9.03 | Country 1: | \$ | | % |
| | 9.04 | Country 2: | \$ | | % |
| | | Countries designat INAIC or below | | | |
| | 9.05 | Country 1: | \$ | | % |
| | 9.06 | Country 2: | \$ | | % |
| 0. | Ten larg | gest non-sovereign (i.e. on-governmenta | al) foreign issues: | | |
| | | | | | 34 |
| | | 1 | 2 | 3 | 4 |
| | | Issuer | NAIC Designation | | |
| | | | | \$ | % |
| | 10.01 | | *************************************** | | |
| | 10.02 | | | \$ | % |
| | 10.02 | | | \$
\$ | % |
| | 10.02 | | | | % |
| | 10.02 | | | \$ | %
% |
| | 10.02
1. 23
10.0- | | | \$
\$ | |
| | 10.02
1 93
10.0-
10.05 | | | \$
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| | 10.02
10.0-
10.05 | | | \$
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\$ | 9%
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9% |
| | 10.02
1, 93
10.0-
10.05
10.06
9.07 | | | \$
\$
\$
\$ | |

| 11. | | and percentages of the reporting entity's total admitted currency exposure: | ed assets held in Canadian in | vestments and unhedged |
|-----|-----------|--|----------------------------------|--------------------------|
| | 11.01 | Are assets held in Canadian investments less than 2.5 total admitted assets? | % of the reporting entity's | Yes [] N |
| | | If response to 11.01 is yes, detail is not required for the | he remainder of Interrogatory | 11L |
| | | | 1 | 2 |
| | 11.02 | Total admitted assets held in Canadian investments | \$ | % |
| | 11.03 | Canadian-currency-denominated investments | \$ | % |
| | 11.04 | Canadian-denominated insurance liabilities | \$ | % |
| | 11.05 | Unhedged Canadian currency exposure | \$ | % |
| 12 | Report as | gregate amounts and percentages of the reporting er | ntity's total admitted ass | nela n investments with |
| 12. | | ll sales restrictions. | arry's total admitted asset | icia in investments with |
| | 12.01 | And accept held in investments with a set-set of sele- | a manufacture V |) · |
| | 12.01 | Are assets held in investments with contractual sales of the reporting entity's total admitted assets? | s restrictions of the 2. | Yes [] No [] |
| | | If response to 12.01 is yes, responses are not required | for the paino interroga | atory 12. |
| | | 1 | A 3 | <u>3</u> |
| | 12.02 | Aggregate statement value of investments with contractual sales restrictions | | % |
| | | Largest three investments with contractual sale restrictions: | 2 | |
| | 12.03 | | 3 | % |
| | 12.04 | | \$ | % |
| | 12.05 | | \$ | % |
| 13. | Amounts a | and percentages of admitted assets n. I in the n larges | t equity interests: | |
| | 13.01 | Are assets held in equity interest less man 2.5% of admitted assets? | f the reporting entity's total | Yes [] No [] |
| | | If response to 13.02 s, responses are not required | I for the remainder of Interroga | ntory 13. |
| | | | 2 | <u>3</u> |
| | 13.02 | | S | % |
| | 13.03 | | \$ | % |
| | 13.04 | | \$ | % |
| | 13.05 | | \$ | % |
| | 13.06 | | \$ | % |
| | 13.07 | | \$ | % |
| | 108 | <u> </u> | \$ | % |
| | 13. | | \$ | % |
| | 13.10 | | \$ | % |
| | | | \$ | % |
| | | | | |

| 14. Amounts | and percentages of the reporting entity's total admitted as | sets held in nonaffiliated, priv | rately placed equities: |
|-------------|--|----------------------------------|----------------------------|
| 14.01 | Are assets held in nonaffiliated, privately placed equireporting entity's total admitted assets? | ities less than 2.5% of the | Yes [] No [] |
| | If response to 14.01 above is yes, responses are not rec | quired for the remainder of Int | errogatory 1 |
| | ĩ | 2 | |
| 14.02 | Aggregate statement value of investments held in | = | |
| | nonaffiliated, privately placed equities | S | % |
| | Largest three investments held in nonaffiliated, | | |
| | privately placed equities: | 76 | |
| 14.03 | | S | % |
| 14.04 | | \$ | % |
| 14.05 | | \$ | > % |
| 15. Amounts | and percentages of the reporting entity's total admitted as | sets held in para shi | ip interests: |
| 15.01 | And accepts held in acceptal months whin interests loss t | that 50/ the new stime | |
| 15.01 | Are assets held in general partnership interests less t
entity's total admitted assets? | man 2.3% & the fet rung | Yes [] No [] |
| | chitry's total admitted assets: | | Yes [] No [] |
| | If response to 15.01 above is yes, responses are not rec | for the i mainder of Int | errogatory 15. |
| | | | 2 |
| 15.02 | Assessed statement value of investments before | 2 | <u>3</u> |
| 15.02 | Aggregate statement value of investments have in general partnership interests | | 9/ |
| | general partnership interests | | |
| | Largest three investments in general papersi | | |
| | interests: | | |
| 15.03 | meresis. | S | % |
| 15.04 | | \$ | % |
| 15.05 | | S | % |
| 10.00 | | 4 | |
| 16. Amounts | and percentages of the reporting entity's to al admitted as | ssets held in mortgage loans: | |
| 16.01 | Are mortgage loans repered in Schedule B less th | nan 2.5% of the reporting | |
| | entity's total admittages. | 7 | Yes [] No [] |
| | | | |
| | If response to 1 01 above is yes, responses are n | ot required for the remainde | er of Interrogatory 16 and |
| | Interrogato 17. | | |
| | | 2 | 2 |
| | $\frac{1}{(P-1)!}$ $\frac{1}{(P-1)!}$ $\frac{1}{(P-1)!}$ | 2 | <u>3</u> |
| 16.02 | pe (Residential, Commercial, Agricultural) | S | 9/ |
| 16.02 | | \$ | % |
| 16.03 | | S | % |
| 16.04 | | \$ | |
| | | \$ | % |
| 16.07 | | \$ | % |
| 10.07 | | \$ | % |
| 16.09 | | \$
\$ | |
| 0.09 | | \$ | % |
| 16.1 | | \$ | % |
| 10.13 | | Ψ | |
| | | | |

Amount and percentage of the reporting entity's total admitted assets held in the following categories of mortgage loans:

| | | | | | | | Loa | ans | |
|-----|----------|---|---------------------|--------------------|----------------|------------------|----------------|---|---------------|
| | 16.12 | Construction lo | ans | | \$. | | | | |
| | 16.13 | Mortgage loans | over 90 days pa | st due | \$. | | | ************* | ., |
| | 16.14 | Mortgage loans | in the process o | f foreclosure | \$ | | | | |
| | 16.15 | Mortgage loans | foreclosed | | \$ | | ************** | | |
| | 16.16 | Restructured m | ortgage loans | | S | | | | |
| 17. | | ite mortgage loan
al statement date: | | owing loan-to-va | alue ratios a | s determined t | from the mo | st cu rent ap | isal as of |
| | Lo | an-to-Value | Resid | dential | (| Commercial | | Agricu | ıltural |
| | | | 1 | 2 | 3 | | . 7 | 5 | 6 |
| | 17.01 | above 95% | \$ | = % | \$ | | % S | | |
| | 17.02 | 91% to 95% | \$ | % | \$ | | % | | |
| | 17.03 | 81% to 90% | S | % | \$ | | | | |
| | 17.03 | 71% to 80% | \$ | % | S | | | *************************************** | |
| | | | | | | | % S | | |
| | 17.05 | below 70% | \$ | % | \$ | | . 2 | | |
| 18. | Amount | s and percentages | of the reporting | entity's total ad | mitted assets | sneld in ch | of the five la | rgest investr | nents in real |
| 10. | estate: | s and percentages | of the reporting | chirty is total ad | initiod ussett | | C II C II | agest miresta | iemo in rear |
| | Cistate. | | | | | 6 1 1 | P | | |
| | 18.01 | Are assets he | eld in real estate | reported less tha | n 2.5% of | reporting er | ntity's total | | |
| | | admitted asse | | | | of errors or | 11012 | Yes [] | No[] |
| | | udilitied usse | | | 1 | | | res[] | 110[] |
| | | If response to | 18.01 above is | ves, responses ar | e requir | the rem | ainder of Int | errogatory 13 | 8. |
| | | | | | | | | | |
| | | Largest five i | nvestments in an | y one parcel or | of co | itiguous parcel | s of real esta | ate. | |
| | | | | | | 976 STE | | | |
| | | | Descript | ion | | | | | |
| | | | 1 | | | | 2 | | 3 |
| | 18.02 | | 4 | | | S | | | % |
| | 18.03 | 200000000000000000000000000000000000000 | | | | | | | % |
| | 18.04 | | ••••• | | | responsibilities | | | % |
| | 18.05 | | | 1000 | | | | | % |
| | 18.06 | | | | | | | | % |
| | 10.00 | | | | | D | | | |
| 19 | Report | aggregate amount | ts and percent | s of the report | ing entity's | total admitted | l assets held | in investme | ents held in |
| | | ne real estate loar | | or the report | ing chitty o | total dollitte | r dobeto nere | | onto neta m |
| | mezzam | ne rear estate ion | | | | | | | |
| | 19.01 | Are assets had | il estmer il | neld in mezzanir | e real estate | e loans less th | an 2.5% of | | |
| | | the reporting | v's todmit | ted assets? | ie rem commi | r round reportin | 2.0 / 0 01 | Yes [] | No[] |
| | | the reporting | 3 total admin | ited assets. | | | | res[] | 140[] |
| | | If religiouse to 1 | 9.01 is yes, respo | onses are not rea | uired for the | remainder of | Interrogator | v 19 | |
| | | mic of actor | 2.01 134y cs, 1espe | mises are not req | uned for the | remainder of | interrogator | <i>y</i> 10. | |
| | | | 1 | | | 2 | | | 3 |
| | 10.02 | | L 1 | e | COMP SO | 4 | | | 2 |
| | 19.02 | | ement value of | investments | | | | | |
| | | nezzanii real | estate toans: | | \$ | | | | % |
| | | | | | | | | | |
| | | Large in | vestments held in | n mezzanine rea | l estate loan | s: | | | |
| | | | | | 1.23 | | | | 2. |
| | 19.05 | | | | \$ | | | | % |
| 200 | 9.04 | | | | \$ | | | | % |
| | 19 5 | | | | S | | | | 9/6 |

20. Amounts and percentages of the reporting entity's total admitted assets subject to the following types of agreements:

| | | At Year-End | | At I | End of Each Qua | arter |
|-------|--|-------------|----------|---------------------------------------|---------------------------------------|---------------------|
| | | 1 | <u>2</u> | $\frac{1^{\text{st}} \text{ Qtr}}{3}$ | $\frac{2^{\text{nd}} \text{ Qtr}}{4}$ | 3 rd Qtr |
| 20.01 | Securities lending agreements (do not include assets held as collateral for such transactions) | \$ | 0/0 | S | \$ | |
| 20.02 | Repurchase agreements | S | % | \$ | \$ | 5 |
| 20.03 | Reverse repurchase agreements | \$ | % | \$ | S | 3 |
| 20.04 | Dollar repurchase agreements | \$ | % | \$ | 8 | 9 |
| 20.05 | Dollar reverse repurchase agreements | \$ | % | \$ | S | S |

21. Amounts and percentages of the reporting entity's total admitted assets for warrants not as shed to other financial instruments, options, caps, and floors:

| | | Ow | ned | Written | | |
|-------|-------------------|----|-----|---------------------------------------|---|--|
| | | 1 | 2 | 3 | 4 | |
| 21.01 | Hedging | \$ | | · · · · · · · · · · · · · · · · · · · | % | |
| 21.02 | Income generation | \$ | % | | % | |
| 21.03 | Other | S | | 8 | % | |

22. Amounts and percentages of the reporting entity's total admired asset of potential exposure for collars, swaps, and forwards:

| | | A Year-End | At End of Each Quarter | | | |
|-------|-------------------|------------|---------------------------|----|----------|--|
| | | + 6 | $1^{st} Qtr$ $2^{nd} Qtr$ | | 3rd Qtr | |
| | | 2 | <u>3</u> | 4 | <u>5</u> | |
| 22.01 | Hedging | % | \$ | \$ | \$ | |
| 22.02 | Income generation | S% | \$ | \$ | \$ | |
| 22.03 | Replications | S% | \$ | \$ | \$ | |
| 22.04 | Other | \$% | \$ | \$ | \$ | |

23. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for futures contracts:

| | | At Year-End | | At End of Each Quarter | | | | |
|-------|-------------------|-------------|---|------------------------|---------------------|----------|--|--|
| | | | | 1st Qtr | 2 nd Qtr | 3rd Qtr | | |
| | | 1 | 2 | 3 | 4 | <u>5</u> | | |
| 23.01 | Hedging | \$ | % | \$ | \$ | \$ | | |
| 23.02 | Income generation | \$ | % | \$ | \$ | \$ | | |
| 23.03 | Replications | \$ | % | \$ | \$ | \$ | | |
| 23.04 | Other | S | % | S | S | S | | |

NATIONAL ASSOCIATION OF INSURANCE COMMISSIO TERS

SCHEDULE SIS

STOCKHOLDER INFORMATION SUPPLEMENT

For The Year Ended December 31, 2018 (To Be Filed by March 1)

REQUIRED BY THE APPLICABLE QUESTION ON THE SUPPLEMENTAL EXHIL. SAND SC. FOULES INTERROGATORIES FOR THE PROPERTY/CASUALTY, LIFE ACCL. NT A. HEALT , TITLE AND HEALTH INSURANCE BLANKS

TO ANNUAL STATEMEN OF TI

FINANCIAL REPORTING TO STOCKHOLDERS

| 1. | Did the company distribute to its stockholders prior to the Annual Meeting during the year an Annual Fanswer | deport for t | he previo | us year? | |
|----|---|--------------|-----------|----------|------|
| | If answer is "Yes" attach copy. If answer is "No" explain in detail below. Attach separate sheet if nec | essary. | | | |
| 2. | Will the company distribute to its stockholders prior to the Annual Meeting during the following year a year? Answer | n Annual I | Report f | the . T | ent |
| | If answer is "Yes" a copy of the report shall be forwarded to the Insurance Commissioner of the cor
same time as it is distributed to stockholders. If answer is "No" explain in detail below. Attach separa | | | sa at | the |
| 3. | If an Annual Report to stockholders was distributed for the previous year; (1) was such distribution protection the solicitation of proxies in respect to the Annual Meeting? | ior to or ce | emno | ineous w | vith |
| | Answer | | | | |
| | If the answer is "No" explain in detail below. Attach separate sheet if necessary. | | | | |
| | (2) Did it contain the following financial statements (indicate answer in Column A) and were suc substantially on the basis (individual or consolidated) as required to be present in the Company Anin Column B)? | | | | |
| | | Column | ı A | Colum | ın B |
| | To be answered by Life and A & H Companies: | Yes | No | Yes | No |
| | a. Statement of Assets, Liabilities, Surplus and Other Funds | | | | 1 |
| | b. Summary of Operations | 8 | | | |
| | c. Surplus Account | | | | |
| | To be answered by Property and Casualty Companies: | | | | |
| | a. Statement of Assets, Liabilities, Surplus and Other Funds | | | | |
| | b. Statement of Income | | | | |
| | c. Capital and Surplus Account | 9 | - | | |
| | To be answered by Title Insurance Companies | | | | |
| | a. Statement of Assets, Liabilities, Surplus and Other | | | | |
| | b. Statement of Income Operations and Avestment Exhibit | Ç. | | | |
| | c. Capital and Surplus Account | 2 | | | |
| | To be answered by Health Insurance empories: | | | | |
| | a. Statement of Assets, jability Capital and Surplus | | | | |
| | b. Statement of Revenue Exp. 98 | | | - | |
| | c. Capital and Surplus Acco | | | _ | |
| | - Capital and Capital Level | | | | |

| 1 | 2 | 3 | 4 | Benefits
Set Aside | Accrued or
During Year | | ual Benefits
etirement |
|--|---|--|---|--|--|-----------------------------|---------------------------|
| me and Title | Principal Occupation
or Employment | Served as
Director From | Aggregate Direct
Remuneration | 5
Retirement
Plan | 6
Other Emp.
Benefits | Retirement
Plan | Other E
Benef |
| | | | | | \equiv | 0 | |
| | | | | | \equiv | 三 | |
| | | | | = | E | | = |
| | | | | 1 | 3 | | |
| | | | | | | | 2 |
| | | | -6 | 三 | | | - |
| A. Information | rate sheet the following information as to any material interest, direct obsidiaries, was or is to be a party. | | | such information is n
ny material transaction | not present):
or any material proposed t | transaction as to which th | ne Company, |
| Answer "yes" or '
any bonus, profit
retirement plan in | as to all options to purchase securi
"no" in each column as to whether
sharing or other remuneration pla
which any such person will parti-
holders, as such, on a pro rata basi | or not the information
in, contract or arrangement
cipate, or (iv) the granting or | n l above has h, or will be, t
thich any ctor, nominee
gsion my such person of | for election as a directe | s in any proxy statement ro
or, or officer of the Comp
, or rights to purchase any | any will participate, (iii) | any pension |
| Furnish the inform | nation specified in Item 1 for all dis | rectors and a Vicers of the | Company, as a group, without n | aming them. | | | - |
| Oid the stockhold | ers have an opportunit o vote fo | r against the ption of dire | ectors and also other matters to b | e presented at any stock | cholder's meeting? | | |
| Answer | If answer is "yo
nsurance Commissioner of the Cor | nd proxies are to be solicit
s domiciliary state at le | and will such solicitation(s) pre-
ted, copies of the proxy statemer
east 10 days prior to the date such
detail below. Attach separate s | t and form of proxy and
th material is first sent o | d other soliciting material t | | ers shall be |
| | 0 | | an ann an Aireann an Aireann an Aireann an Aireann an Aireann an Aireann an Aireann an Aireann an Aireann an A | secolomic nection. | | | |
| | | | | | | | |

ded \$100,000 during the year, has been or of shares owned at the end of the year (as shown in Column 8) by each Director and the three highest paid Officers wh tion concerning the number sment or otherwise. Note: Answer "yes" or "no" as to whether the information will be furnished to stockholders in a proxy state

... If answer is "no" explain in detail on separate sheet.

State the number of stockholders of record of the company at the end of the year. Answer

Has the state of domicile granted an exemption or disclaimer of controf? Answer Parswer is "yes" explain:

Supp19

Affix Bar Code Here

FINANCIAL GUARANTY INSURANCE EXHIBIT
For the Year Ended December 31, 2018
(To Be Filed by March 1)

Of The..... Foologe ID Number.....

PART 1
Showing Total Net Exposures (Principal & Interest) By Year Payable
On Municipal Bond Guaranties In Force As Of Year End

| | | 1, | 2 | Ind | lustrial Development Bo | onds | 6 |
|-----|--------------|---|---|---|---|---------------|---|
| | Year Payable | Municipal
Obligation
Bonds | Special
Revenue Bonds | 3
Type I | 4
Type II | 5
Type III | Vale |
| | 2010 | Donus | Revenue Donus | Type I | Type II | Type III | 413 |
| 1. | 2019 | :: | | | | | |
| 2. | 2020 | | | *************************************** | *************************************** | | |
| 3. | 2021 | | | | | | |
| 4. | 2022 | | 300000000000000000000000000000000000000 | | 300000000000000000000000000000000000000 | | |
| 5. | 2023 | *************************************** | | | | | |
| 6. | 2024 | *************************************** | 241111111111111111111111111111111111111 | | | | M |
| 7. | 2025 | | | | | | < |
| 8 | 2026 | | | | | | |
| 9. | 2022 | | | | | 10 m | |
| 0 | 2027 | 3344444444444444444 | : | : | | num manner mu | *************************************** |
| 10. | 2028 | | *************************************** | | | | |
| 11. | 2029 | *************************************** | | *************************************** | *************************************** | | |
| 12. | 2030 | | | | | | |
| 13. | 2031 | | | | | | |
| 14. | 2032 | :2000001101111111001111111111 | 30000000000000000000000000000000000000 | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| 15. | 2033 | *************************************** | *************************************** | *************************************** | | | -44444444444444444444444444444444444444 |
| 6. | 2034-38 | | | | | | |
| 7. | 2039-43 | | | | | | |
| 8. | 2044+ | | | | | | |
| 0. | Totals | | | | 4 10 10 | | |

PART

Showing Total Net Exposures (Print pal & Intrest) By Year Payable
On Non-Municipal Bod Guara lies of the Chilarian Collins of the Chilarian

| | | Corp | orate Obligat | ions | | 5 | 6 | 7 | 8 | 9 |
|-----|--------------|---|---------------|---|------------------|---|---|--|-------------------------|---|
| | Year Payable | 1
Type I | 2
Type II | 3
Ty, VI | De
Obliga ons | Pass-Thru
Securities | Ltd
Partnerships | Other Non-
Investment
Grade
Obligations | All Other
Guaranties | Totals |
| ١., | 2019 | | | | / / | | *************************************** | | | |
| 2. | 2020 | | | | | | | | | |
| 3. | 2021 | | | ************ | · | *************************************** | | | | |
| 4. | 2022 | ************ | | P | | ************** | | | | |
| 5. | 2023 | | | | | | *************************************** | | | *************************************** |
| 6. | 2024 | | | | | | | ************* | | *************************************** |
| 7. | 2025 | *************************************** | | | | | *************************************** | *************************************** | | |
| 3. | 2026 | | | | | | | | | |
|), | 2027 | | | | | | | | | |
| 0. | 2028 | | | <i>A</i> | | *************************************** | *************************************** | ************* | | ************ |
| 1. | 2029 | | | | | | | | | |
| 2. | 2030 | | | | | | | | | |
| 3. | 2031 | | | *************************************** | | | | | | |
| 4. | 2032 | | | | | *************************************** | | | | |
| 5. | 2033 | | | *************************************** | | | | | | *************************************** |
| 6. | 2034-38 | Yana | | | | | | | | |
| 7. | 2039-43 | | · | | | | | | | |
| 8. | 2044+ | | | | | | | | | |
| 19. | Totals | | | | | | | | | |

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS PART 3A MUNICIPAL OBLIGATION BONDS

| | | 1 | 2 | 3 | 4 | 5 | Curre | nt Year | 8 |
|-----|---------------|---|---|---|---|---|---|--|---|
| | Calendar | Net
Premiums | Net
Principal | Average
Premium | Current Year
Earned | Prior
Year | 6
Addition | 7
Withdra vals | Contingency
Reserve |
| | Year Written | Written | Guaranteed | (Cols. 1/2) | Premium | Reserve | to Reserve | from erve | (Ms. 5+6-7) |
| 1. | 2018 S.P | | | | *************************************** | | | | |
| 2. | 2018 L.P | | | | | | | | |
| 3. | 2017 S.P | | | | | | | M | |
| 4. | 2017 LP | | | | | | | | |
| 5. | 2016 S.P | | *************************************** | | | | | | |
| 6. | 2016 I.P | | | (************************************** | *************************************** | | | ************************************* | |
| 7. | 2015 S.P | | ************* | | *************************************** | *************************************** | | | *************************************** |
| 8. | 2015 LP | | | | | | | | |
| 9. | 2014 S.P | | | | | | | | |
| 10. | 2014 I.P | | | | | | Y | | |
| 11. | 2013 S.P | | | | | | | 200000000000000000000000000000000000000 | |
| 12. | 2013 l.P | | | | 4115.035003500500505050 | | | | |
| 13. | 2012 S.P | | | | | | | *************************************** | |
| 14. | 2012 I.P | | | | | | | | |
| 15. | 2011 S.P | | | | | | 1 | | |
| 16. | 2011 L.P | 500000000000000000000000000000000000000 | *************************************** | | A. C | | | | *************************************** |
| 17. | | | | | | | ······ | *************************************** | *************************************** |
| 18. | 2010 S.P | *************************************** | ·// | | | A | | | |
| | 2010 I.P | **************** | ************* | | | ····· | | *************************************** | *************************************** |
| 19. | 2009 S.P | | *********** | | | | | | |
| 20. | 2009 I.P | | ************ | | | | *************************************** | *************************************** | |
| 21. | 2008 S.P | | | | | *************************************** | | *************************************** | *************************************** |
| 22. | 2008 I.P | | | | | | | | |
| 23. | 2007 S.P | | | | | | *************************************** | | |
| 24. | 2007 I.P | | | | | | | *************************************** | |
| 25. | 2006 S.P | | | | *************************************** | | *************************************** | *************************************** | |
| 26. | 2006 I.P | | | | | | | | |
| 27. | 2005 S.P | | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| 28. | 2005 I.P | | | | | | | | |
| 29. | 2004 S.P | | | | | *************************************** | | | |
| 30. | 2004 LP | | 90 | | | | | | |
| 31. | 2003 S.P | <i>A</i> | | | | | | | |
| 32. | 2003 I.P | Con R | | | *************************************** | | *************************************** | | |
| 33. | 2002 S.P | | | | | | | | |
| 34. | 2002 I.P | | | | | | | | |
| 35. | 2001 S.P | | *************************************** | 010000000000000000000000000000000000000 | | 100000000000000000000000000000000000000 | | | |
| 36. | 2001 I.P | | | | | | | | |
| 37. | 2000 S.P | | ********** | | | | ::::::::::::::::::::::::::::::::::::::: | > | |
| 38. | 2000 I.P. | | | | | | | | |
| 39. | 1999 S.P | | | *************************************** | | | *************************************** | | |
| 40. | 1 LP | / | | | | | | | |
| 41. | Prior 1999 S | | | | | | | | |
| | Prior to L.P. | | | | , | | 7 | | |
| 1 | | | | | | | - | | |
| 44 | Totals | | | | | | | | 1 |

S.P. = Single remiums

I.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS PART 3B SPECIAL REVENUE BONDS

| | | 1 | 2 | 3 | 4 | 5 | Currer | nt Year | - 8 | |
|-----------|--------------------------|---|--|---|---|---|---|---|---|--|
| | Calendar
Year Written | Net
Premiums
Written | Net Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior
Year
Reserve | 6
Addition
to Reserve | Withdr vals
from rerve | Contingency
Reserve
(ls. 5+6-7 | |
| 1. | 2018 S.P | | | | | | | | | |
| 2. | 2018 I.P | | | | | *************************************** | | | · | |
| 3. | 2017 S.P | ****************** | *************************************** | | | | | | | |
| 4. | 2017 I.P | | | | | | | | | |
| 5. | 2016 S.P | | | *********** | *************************************** | | · | | | |
| 6. | 2016 I.P | | *************************************** | | | *************************************** | | | | |
| 7. | 2015 S.P | | | | | | | | | |
| 8. | 2015 LP | | | | | | | · | | |
| 9. | 2014 S.P | | | | *************************************** | 4 | | | | |
| 10. | 2014 LP | | | ************* | ::::::::::::::::::::::::::::::::::::::: | | | *************************************** | | |
| 11. | 2013 S.P | | | | | | | | | |
| 12. | 2013 I.P | | ************************* | | | | | | | |
| 13. | 2012 S.P | *************************************** | | | | | | | | |
| 4. | 2012 I.P | | | | | | 5 | | | |
| 15. | 2011 S.P | | | | Λ(| | | | | |
| 16. | 2011 I.P | | | | | | | | | |
| 17. | 2010 S.P | *************************************** | 577010000000000000000000000000000000000 | | | | | | | |
| 18. | 2010 I.P | | | | | | | | | |
| 19. | 2009 S.P | | | | | | | | | |
| 20. | 2009 I.P | | *************************************** | ♦ (| | | | | | |
| 21. | 2008 S.P | | | | | | | | | |
| 22. | 2008 I.P | | | | | | | | | |
| 23. | 2007 S.P | | | | | *************************************** | | *************************************** | | |
| 24. | 2007 I.P | | | | 1900000 September 190000 | | | | 2012/2017/2017/2017/2017 | |
| 25. | 2006 S.P | | manana | | | | | | *************************************** | |
| 26. | 2006 J.P | | | | | | | | | |
| 27. | | | | - | | 300000000 | | · | | |
| 28. | 2005 S.P | *************************************** | | | | *************************************** | 2,000,000,000,000 | | *************************************** | |
| | 2005 I.P | | | | | | | | | |
| 29. | 2004 S.P | | | | | | | *************************************** | | |
| 30. | 2004 I.P | | | ***************** | | *************************************** | | *************************************** | | |
| 31. | 2003 S.P | | | | | | *************************************** | *************************************** | | |
| 2. | 2003 I.P | | | | | *************************************** | | | | |
| 33. | 2002 S.P | | | *************************************** | *************************************** | ************ | *************************************** | | | |
| 34. | 2002 I.P | | | | | | | | | |
| 5. | 2001 S.P | Series | | | | *************************************** | | | | |
| 36. | 2001 I.P | | *************************************** | | | | | | | |
| 37. | 2000 S.P | | | *************************************** | *************************************** | *************************************** | *************************************** | | | |
| 88. | 2000 I.P. | | | | | | | | | |
| 39. | 1999 S.P | | | | | | | | | |
| 40. | 19. (P | / | | | | | | | | |
| 11. | Prior to 199 S.P | | | | | | | | | |
| | 10s P. | | | | | | | | | |
| OF STREET | Totals | | , the state of the | | | | 1 | | | |

S.P. = Sing Premiums
1.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS PART 3C INDUSTRIAL DEVELOPMENT BONDS – TYPE I

| 1. 2
2. 2
3. 2
4. 2
5. 2
6. 2
7. 2
8. 2
9. 2
10. 2
11. 2
13. 2
15. 2
16. 2
17. 2
18. 2
20. 2
21. 2
22. 2
24. 2
25. 2 | Calendar Year Written 2018 S.P | Net Premiums Written | Net Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior Year
Reserve | 6
Addition
to Reserve | Withdr vals from erve | Contingency
Reserve
Js. 5+6-7) |
|--|--|---|---|---|---|---|--|---|---|
| 2. 2
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| 4. | LP | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | |

S.P. = Si le Premiums I.P. = Instan ent Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS PART 3D INDUSTRIAL DEVELOPMENT BONDS – TYPE II

| | | 1 | 2 | 3 | 4 | 5 | Curre | nt Year | 8 |
|-----|--------------------------|---|---|---|---|-----------------------|---|--|---|
| | Calendar
Year Written | Net
Premiums
Written | Net Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior Year
Reserve | 6
Addition
to Reserve | Withdr vals from erve | Contingency
Reserve
Is. 5+6-7 |
| 1. | 2018 S.P | | | | | | | | *************************************** |
| 2. | 2018 I.P | | | | | | | | |
| 3. | 2017 S.P | | *************************************** | | | | | | |
| 4. | 2017 I.P | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | *************************************** | | | | | |
| 5. | 2016 S.P | | *************************************** | | *************************************** | | | | |
| 6. | 2016 I.P | | | | | | | | |
| 7. | 2015 S.P | *************************************** | *************************************** | | | | | | |
| 8. | 2015 I.P | | | | | | | | |
| 9. | 2014 S.P | | | | | | | | |
| 10. | 2014 I.P | | | | 9444820000000000 | | | | |
| 11. | 2013 S.P | *************************************** | *************************************** | | | | | | |
| 12. | 2013 I.P | | | | | | | | |
| 13. | 2012 S.P | | *************************************** | | - | 7 / 100 |) | | |
| 14. | 2012 I.P | | Complete and the control | | | | A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | Section of the Committee |
| 15. | 2011 S.P | | *************************************** | | | | | | *************************************** |
| 16. | | | *************************************** | | A | | 3 | | |
| | 2011 I.P | | *************************************** | | | | | *************************************** | |
| 17. | 2010 S.P | *************************************** | *************************************** | ************ | | | 344444433444444444444444444444444444444 | | |
| 18. | 2010 I.P | | *************************************** | | | ····· | : | | *************************************** |
| 19. | 2009 S.P | *************************************** | *************************************** | | | | *************************************** | | |
| 20. | 2009 I.P | | | | | | | | |
| 21. | 2008 S.P | | *************************************** | | | | *************************************** | | |
| 22. | 2008 I.P | | | | | | | | |
| 23. | 2007 S.P | | | | Y | | | *************************************** | |
| 24. | 2007 I.P | | | | | | | | |
| 25. | 2006 S.P | | | | | | *************************************** | | |
| 26. | 2006 I.P | | | | | | | | |
| 27. | 2005 S.P | | | | | | | | |
| 28. | 2005 I.P | | | | | | | | |
| 29. | 2004 S.P | | | | | | | | *************************************** |
| 30. | 2004 I.P | | | | | | | | |
| 31. | 2003 S.P | | | | *************************************** | | | | |
| 32. | 2003 I.P | | | | | | V | | |
| 33. | 2002 S.P | | | | | | | | |
| 34. | 2002 I.P | | | | | | | | |
| 35. | 2001 S.P | | × | | | | | | |
| 36. | 2001 I.P | | | | | | | | |
| 37. | 2000 S.P | | | | | | | | |
| 38. | 2000 I.P. | | | 800000000000000000000000000000000000000 | 200030000000000000000000000000000000000 | | | 112350040000000000000000000000000000000000 | |
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| 41. | Prior 1999 S | | *************************************** | | | | | | |
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| 3. | atals | | | | | | | | |

S.P. = Sn. Premiums

I.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS PART 3E INDUSTRIAL DEVELOPMENT BONDS – TYPE III

| | | 1 | 2 | 3 | 4 | 5 | Curre | nt Year | 8 | |
|-----|--------------------------|---|---|---|---|---|--|-------------------------|---|--|
| | Calendar
Year Written | Net
Premiums
Written | Net
Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior
Year
Reserve | 6
Addition
to Reserve | Withday als
from Re. | Contingency
Peserve
(Cors. 5+6-7) | |
| 1. | 2018 S.P | | | | | | | | | |
| 2. | 2018 I.P | | | | | | | | Y | |
| 3. | 2017 S.P | | | | | | | | | |
| 4. | 2017 I.P | | *********** | | **************** | *************************************** | | | ::0000000000000000000000000000000000000 | |
| 5. | 2016 S.P | | ************* | | | | | | *************************************** | |
| 6. | 2016 I.P | | ************ | S########## | | | | | | |
| 7. | 2015 S.P | | | | | | | | *************************************** | |
| 8. | 2015 I.P | | *************************************** | | | | | T | | |
| 9. | 2014 S.P | | | | | | | | | |
| 10. | 2014 LP | | | (41000000000000000000000000000000000000 | | | | | | |
| 11. | 2013 S.P | | | *************************************** | | | · | | *************************************** | |
| 12. | 2013 I.P | | | | | | | | | |
| 13. | 2012 S.P | | | | | 1 | | | | |
| 14. | 2012 I.P | | | | | | F | | | |
| 15. | 2011 S.P | | | | . 4 | | | | | |
| 16. | 2011 I.P | 2220096438487436452 | | | | | 28/22/10/10/20/20/20/20/20/20/20/20/20/20/20/20/20 | | | |
| 17. | 2010 S.P | | *************************************** | | | O | *************************************** | | | |
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| 18. | 2010 I.P | *************************************** | ************ | | | | | | *************************************** | |
| 19. | 2009 S.P | | | | | | | | | |
| 20. | 2009 I.P | | *************************************** | | | *************************************** | *************************************** | | : | |
| 21. | 2008 S.P | | | | | | | | | |
| 22. | 2008 I.P | | | | | | *************************************** | | | |
| 23. | 2007 S.P | ************ | | | | *************************************** | *************************************** | | *************************************** | |
| 24. | 2007 I.P | | | | | ************ | | | | |
| 25. | 2006 S.P | | | | *************************************** | | | | *************************************** | |
| 26. | 2006 I.P | | | | | | | | | |
| 27. | 2005 S.P | | | | | | | | | |
| 28. | 2005 I.P | | | | | | | | | |
| 29. | 2004 S.P | | | | | | | | | |
| 30. | 2004 I.P | | | | | | | | | |
| 31. | 2003 S.P | | | *************************************** | | | | | *************************************** | |
| 32. | 2003 I.P | | | *************************************** | | | | | | |
| 33. | 2002 S.P | | | | | ************ | | | *************************************** | |
| 34. | 2002 I.P | | | | | | | | | |
| 35. | 2001 S.P | | | | | | | | | |
| 36. | 2001 LP | | | *************************************** | *************************************** | *************************************** | | | | |
| 37. | 2000 S.P | | | | | *************************************** | *************************************** | | | |
| 38. | 2000 I.P. | | | | | *************************************** | | | | |
| 39. | 2000 I.P. | | | | | | | | | |
| 40. | 195 P. | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 31 | | *************************************** | 430000000000000000000000000000000000000 | | | |
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| 41. | Prior to 99 S.P | | | *************************************** | | | | | | |
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S.P. = Sing. Premiums
I.P. = Installment Premiums

CONTINGENCY RESERVE FOR MUNICIPAL OBLIGATIONS PART 3F TOTALS – ALL MUNICIPAL BONDS WRITTEN

| 38. 2000 I.P.
39. 1999 S.P | | 2 | 3 | 4 | 5 | Current Year | | 8 | |
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| 2. 2018 I.P | Net
Premiums
Written | Net
Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior Year
Reserve | 6
Addition
to Reserve | Withdra rals
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Reserve
(c. s. 5+6-7 | |
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| 4. 2017 I.P | | | | *************************************** | *************************************** | | | | |
| 4. 2017 I.P | | | | | | | | | |
| 5. 2016 S.P | | | | | | | | | |
| 6. 2016 I.P | | | | | *************************************** | | | | |
| 7. 2015 S.P | | | | | | | | | |
| 8. 2015 I.P. 9. 2014 S.P. 10. 2014 I.P. 11. 2013 S.P. 12. 2013 I.P. 13. 2012 S.P. 14. 2012 I.P. 15. 2011 S.P. 16. 2011 I.P. 17. 2010 S.P. 18. 2010 I.P. 19. 2009 S.P. 2009 I.P. | CONTRACTOR OF THE PROPERTY OF THE PERSON OF | | | | | | | | |
| 9. 2014 S.P | | | | | | | | | |
| 10. 2014 I.P | Market and the second s | | | | | | | | |
| 11. 2013 S.P | | | | | | | | | |
| 12. 2013 I.P | reserve and the second section of the second section of the second section sec | | | 4 | | | | | |
| 13. 2012 S.P | | | | | | N | | | |
| 14. 2012 I.P | Street control of the street o | | | | |) | | | |
| 15. 2011 S.P | | | | | | / | *************************************** | | |
| 16. 2011 I.P | With the second to the second | | | | | *************************************** | | | |
| 17. 2010 S.P | | | [************************************** | | | *************************************** | | | |
| 18. 2010 I.P | 100 to 10 | | | | | f************************************* | *************************************** | | |
| 19. 2009 S.P | | | | | *************************************** | *************************************** | | | |
| 20. 2009 I.P. 21. 2008 S.P. 22. 2008 I.P. 23. 2007 S.P. 24. 2007 I.P. 25. 2006 S.P. 26. 2006 I.P. 27. 2005 S.P. 28. 2005 I.P. 29. 2004 S.P. 2003 S.P. 2003 I.P. 2003 S.P. 2003 I.P. 2003 S.P. 2004 I.P. 2005 S.P. 2005 I.P. 2005 S.P. 2005 I.P. 2005 S.P. 2005 I.P. 2005 S.P. 2005 I.P. 2005 S.P. 2005 I.P. 2005 S | | | | | P | | | | |
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| 22. 2008 I.P | I | | | | *************************************** | *************************************** | | | |
| 23. 2007 S.P | | | | | | | | | |
| 24. 2007 I.P | | | | | | | | | |
| 25. 2006 S.P | | | | | | | | | |
| 26. 2006 I.P | | | | | | *************************************** | | | |
| 27. 2005 S.P. 28. 2005 I.P. 29. 2004 S.P. 30. 2004 I.P. 31. 2003 S.P. 32. 2003 I.P. 33. 2002 S.P. 34. 2002 I.P. 35. 2001 S.P. 36. 2001 I.P. 37. 2000 S.P. 38. 2000 I.P. 39. 1999 S.P. | | | | | | | | | |
| 28. 2005 I.P. 29. 2004 S.P. 30. 2004 I.P. 31. 2003 S.P. 32. 2003 I.P. 33. 2002 S.P. 34. 2002 I.P. 35. 2001 S.P. 37. 2000 S.P. 38. 2000 I.P. 39. 1999 S.P. 39. 1999 S.P. 30. | | | | | *************************************** | *************************************** | | | |
| 29. 2004 S.P | | | | | *************************************** | *************** | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| 30. 2004 I.P. 31. 2003 S.P. 32. 2003 I.P. 33. 2002 S.P. 34. 2002 I.P. 35. 2001 S.P. 36. 2001 I.P. 37. 2000 S.P. 38. 2000 I.P. 39. 1999 S.P. 39. | | A | | *************************************** | | | | | |
| 30. 2004 I.P | | | | *************************************** | | | | | |
| 31. 2003 S.P | | | | *************************************** | | | | | |
| 32. 2003 I.P | | | | | | | | | |
| 33. 2002 S.P | | | | | | | | | |
| 34. 2002 I.P | | | | | | | | | |
| 35. 2001 S.P
36. 2001 I.P
37. 2000 S.P
38. 2000 I.P
39. 1999 S.P | | | | | | | | | |
| 36. 2001 I.P | The second secon | | | | | | | | |
| 37. 2000 S.P
38. 2000 I.P.
39. 1999 S.P | The state of the s | | | | *************************************** | | | | |
| 38. 2000 LP.
39. 1999 S.P | | | | | *************************************** | | | | |
| 39. 1999 S.P | | | | *************************************** | | | (40000000000000000000000000000000000000 | | |
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| 40. I. J.P | | | | | | | | | |
| 41. Prior t. 999 S.r. | 200-000 000 000 000 000 000 000 000 000 | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |

S.P. = Sr. & Premiums
I.P. = Instalm ent Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS PART 4A CORPORATE OBLIGATIONS TYPE I

| | | 1 | 2 | 3 | 4 | 5 | Currer | nt Year | . 8 |
|-----|---|----------------------------|---|---|---|-----------------------|---|---|---|
| | Calendar
Year Written | Net
Premiums
Written | Net
Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior Year
Reserve | 6
Addition
to Reserve | Withdra als
from Re ve | Contingency
Peserve
(Co.s. 5+6-7) |
| 1. | 2018 S.P | | | | | | | | |
| 2. | 2018 LP | | | | | | | January 1997 | |
| 3. | 2017 S.P | | | *************************************** | | | | · | * |
| 4. | 2017 I.P | | ***************** | | | | | | *************************************** |
| 5. | 2016 S.P | | ************* | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | *************************************** |
| 6. | 2016 I.P | | | | | | | | |
| 7. | 2015 S.P | | | | | | | | *************************************** |
| 8. | 2015 I.P | | | | , | | | | |
| 9. | 2014 S.P | | | | *************************************** | | | | |
| 10. | 2014 I.P | | | | | | | | |
| 11. | 2013 S.P | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| 12. | 2013 L.P | | | | | | | | |
| 13. | 2012 S.P | | | | | | | | *************************************** |
| 14. | 2012 L.P | | | | | | | | *************************************** |
| 15. | 2011 S.P | ***************** | | | | | | 311111111111111111111111111111111111111 | *************************************** |
| 6. | 2011 LP | | | | | | M | 300000000000000000000000000000000000000 | |
| 17. | 2010 S.P | | | | | | Ø | | *************************************** |
| 18. | 2010 I.P | | | | | | | | |
| 19. | 2009 S.P | | | | | | | | *************************************** |
| 20. | 2009 LP | | *************************************** | | | | *************************************** | 30000000000000000000000000000000000000 | *************************************** |
| 21. | Prior to 2009 S.P
Prior to 2009 I.P. | | | | - , - | | *************************************** | | *************************************** |

CONTINGENCY RESERVE FO NON-MY AICIPAL OBLIGATIONS PAR 1B CO FORATE LIGA ONS TYPE II

| | | 1 | 2 | 3 | 4 | 5 | Current | The state of the s | 8 |
|----|--------------------------|----------------------------|---|----------------------------|-----------------------------------|---|-----------------------------|--|---|
| | Calendar
Year Written | Net
Premiums
Written | Net
Principal
Guaranteed | Average
em n
(C 1/2) | Current Year
Earned
Premium | Prior
Year
Reserve | 6
Addition
to Reserve | 7
Withdrawals
from Reserve | Contingency
Reserve
(Cols. 5+6-7 |
| 1. | 2018 S.P | | | | | *************************************** | | *************************************** | *************************************** |
| 2. | 2018 LP | | • | | | | | | |
| 3. | 2017 S.P | | | | | | | ····· | *************************************** |
| 4. | 2017 I.P | | · · · · · · · · · · · · · · · · · · · | | | | | >************************************** | |
| 5. | 2016 S.P | .,, | | | | | | | |
| 6. | 2016 I.P | <i>M</i> | | | | | | | |
| 7. | 2015 S.P | J | , | | | | | | |
| 8. | 2015 LP | | | | | | | | |
| 9. | 2014 S.P | | | | | | | *************************************** | |
| 0. | 2014 LP | | | | | | | | |
| 1. | 2013 S.P | | ************* | | | *************************************** | | | |
| 2. | 2013 I.P | | ************ | | | | | *************************************** | *************************************** |
| 3. | 2012 S.P | | | | | | | | |
| 4. | 2012 I.P | · | | | | | | | |
| 5. | 2011 S.P | | | | | | | | |
| 6. | 2011 L.P | | *************************************** | | | | | | |
| 7. | 20. S.P | | | | | | | | |
| 8. | 2010 | | | | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| 9. | 2009 S.P. | | | | | | | | |
| | *000 I D | | | | | | | | *************************************** |
| | Prior to 2007 | | | | | *********** | | 200000000000000000000000000000000000000 | *************************************** |
| 2. | or to 2009 I.P. | | | | | | | | |

S.P. = Single remiums
I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS PART 4C CORPORATE OBLIGATIONS TYPE III

| | | 1 | 2 | 3 | 4 | 5 | Curren | t Year | 8 |
|-----|--------------------------|---|---|---|-----------------------------------|---|-----------------------------|---|---|
| | Calendar
Year Written | Net Premiums
Written | Net
Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior
Year
Reserve | 6
Addition
to Reserve | Withdra als
from Re e | Contingency
Peserve
(Cors. 5+6-7) |
| 1. | 2018 S.P | | | | | | | | |
| 2. | 2018 I.P | , | | | | | | | > |
| 3. | 2017 S.P | *************************************** | | | | | | | ., |
| 4. | 2017 I.P | | | | | | | ····· | |
| 5. | 2016 S.P | | | | | | | | |
| 6. | 2016 LP | *************************************** | | | | | | | |
| 7. | 2015 S.P | | | | | *************************************** | | | |
| 8. | 2015 I.P | | | | | | | | |
| 9. | 2014 S.P | | | | | | | <u> </u> | |
| 10. | 2014 LP | | | | | | | | |
| 11. | 2013 S.P | , | | | | | A | | |
| 12. | 2013 I.P | | | | | | | | |
| 13. | 2012 S.P | | | | | | | | |
| 14. | 2012 L.P | | | | | Auto Con | | | *************************************** |
| 15. | 2011 S.P | *************************************** | *************************************** | *************************************** | | | | | |
| 16. | 2011 I.P | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| 17. | 2010 S.P | | | | | · | / | | 200000000000000000000000000000000000000 |
| 18. | 2010 LP | | | | | | P | *************************************** | |
| 19. | 2009 S.P | *************************************** | | | | | | *************************************** | |
| 20. | 2009 I.P | | | | | | | | |
| 21. | Prior to 2009 S.P | | | | | | | | |
| 22. | Prior to 2009 I.P. | | | | 4 | - | | | |
| 23. | Totals | | | | | | | T T | |

CONTINGENCY RESERVE FO NON-MY AICIPAL OBLIGATIONS PAR 1D C NSUMER BT O LIGATIONS

| | ſ | 1 | 2 | 3 | 4 | 5 | Currer | nt Year | 8 |
|----|--------------------------|---|-----------------------------|-------------------|---|---|-----------------------------|---|---|
| | Calendar
Year Written | Net Premiums
Written | Net Principal
Guaranteed | Average
Premit | Current Year
Earned
Premium | Prior Year
Reserve | 6
Addition
to Reserve | 7
Withdrawals
from Reserve | Contingency
Reserve
(Cols. 5+6-7) |
| 1. | 2018 S.P | | | | | | | | |
| 2. | 2018 I.P | *************************************** | A | | *************************************** | *************************************** | | | *************************************** |
| 3. | 2017 S.P | | | | | *************************************** | | | |
| 4. | 2017 I.P | | | | | *************************************** | | | |
| 5. | 2016 S.P | | | | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| 6. | 2016 I.P | A | | | | | | | |
| 7. | 2015 S.P | | | | | | | | |
| 8. | 2015 L.P | | M | | | | | | |
| 9. | 2014 S.P | | | | | | | | |
| 0. | 2014 I.P | | | | | | | | |
| 1. | 2013 S.P | | | | | | | | |
| 2. | 2013 LP | | | | *************************************** | | | | |
| 3. | 2012 S.P | | | | | | | | |
| 4. | 2012 I.P | | | | | ************* | | | *************************************** |
| 5. | 2011 S.P | | | | | | | | |
| 6. | 2011 L.P | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | *************************************** | | | | |
| 7. | 20 S.P | | | | | *************************************** | | *************************************** | |
| 8. | 2016 2 | | 3444444444444 | | *************************************** | | | | |
| 9. | 2009 S.1 | | | | | | | | |
| 0 | 2009 I.P | *************************************** | | | | | | | ************** |
| 2. | ior to 2009 I.P. | *************************************** | ************ | | | *************************************** | | | |
| 3. | Total | | | | | | | | |

S.P. = Single remiums I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS PART 4E PASS – THROUGH SECURITIES

| | | 1 | 2 | 3 | 4 | 5 | Curre | nt Year | 8 |
|-----|--------------------------|---|--|---|-----------------------------------|--------------------------|---|---|---|
| | Calendar
Year Written | Net
Premiums
Written | Net
Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior
Year
Reserve | 6
Addition
to Reserve | Withd als | Sontingency
serve
(Cols. 5+6-7) |
| 1. | 2018 S.P | | | ******* | | | | | |
| 2. | 2018 I.P | *************************************** | | *************************************** | | | *************************************** | | P |
| 3. | 2017 S.P | | | | | | | | |
| 4. | 2017 I.P | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| 5, | 2016 S.P | | | | | | | | |
| 6. | 2016 I.P | | | | | | | | |
| 7. | 2015 S.P | | | | | | | | |
| 8. | 2015 I.P | | | | | ************** | | | |
| 9. | 2014 S.P | | | | | | | 7 | |
| 10. | 2014 L.P | | *************************************** | ****************** | | | | | *************************************** |
| 11. | 2013 S.P | | | | | | | | |
| 12. | 2013 I.P | | | | | **************** | | | *************************************** |
| 13. | 2012 S.P | *************************************** | | *************************************** | | | | | *************************************** |
| 14. | 2012 I.P | | | | | | | | |
| 15. | 2011 S.P | | | | | | 3 | | |
| 16. | 2011 I.P | | | | | | A | | |
| 17. | 2010 S.P | | | *************************************** | | | | | |
| 18. | 2010 L.P | *************************************** | | | | | | *************************************** | |
| 19. | 2009 S.P | | | | · | | *************************************** | | |
| 20. | 2009 I.P | | 201111111111111111111111111111111111111 | | | | *************************************** | | |
| 21. | Prior to 2009 S.P | *************************************** | 2011111111111111111 | | | | *************************************** | | *************************************** |
| 22. | Prior to 2009 I.P. | C2000C00000000000000000000000000000000 | A STATE OF THE STA | | - | - | N. A.C. E. C. C. C. C. C. C. C. C. C. C. C. C. C. | COMMITTED SERVICE OF STANCE | 000000000000000000000000000000000000000 |
| 23. | Totals | | | | | 7 | | | |

CONTINGENCY RESERVE FG NON-MV AICIPAL OBLIGATIONS PAR 4F LIMITE, ARTA RSHIPS

| | | 1 | 2 | 3 | 4 | 5 | Curre | nt Year | 8 |
|----------|-------------------------------|---|---|-------------|---|---|---|---|---|
| | Calendar
Year Written | Net
Premiums | Net
Principal | Ay .ge | Current
Year
Earned | Prior
Year | 6
Addition | 7
Withdrawals | Contingency
Reserve |
| | | Written | aranteed | (Cols. 1/2) | Premium | Reserve | to Reserve | from Reserve | (Cols. 5+6-7) |
| 1. | 2018 S.P | | | | | | | | |
| 2. | 2018 LP | | | | | | | ******************** | |
| 3. | 2017 S.P | | ,,,,,, | | | | | *************************************** | |
| 4. | 2017 I.P | A | | | | | | *************************************** | |
| 5. | 2016 S.P | · · · · · · · · · · · · · · · · · · · | | | | | | ******************* | |
| 6. | 2016 I.P | | | | | *************************************** | | | |
| 7. | 2015 S.P | | | | | | | *************************************** | *************************************** |
| 8. | 2015 LP | Y | | | | *************************************** | | *************************************** | |
| 9. | 2014 S.P | | | | *************************************** | ************* | | | |
| 0. | 2014 I.P | | | | | ****************** | | | |
| 1. | 2013 S.P | | | | | | | | |
| 2. | 2013 I.P | | > | | | | | | |
| 3. | 2012 S.P | · | | | | | | | |
| 4. | 2012 I.P | | | | | | | | |
| 5. | 2011 S.P | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| 6. | 20. P | | | | | | | | *************************************** |
| 7. | 2010 | | | | | | | *************************************** | |
| 8. | 2010 LP. | *************************************** | | | | ************* | | | |
| | 2000 C D | | | | | | | | |
| 00 | 2009 1.1 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | 300000000000000000000000000000000000000 | | | |
| 1.
2. | Pri 2009 S.P
Pri 2009 I.P. | | > | | | ************* | *************************************** | *************************************** | >10100000000000000000000000000000000000 |

S.P. = Single Premiums I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON - MUNICIPAL OBLIGATIONS PART 4G OTHER NON-INVESTMENT GRADE OBLIGATIONS

| | | 1 | 2 | 3 | 4 | 5 | Curren | t Year | 8 |
|----|---|---|---|---|-----------------------------------|---|---|-------------------------|---|
| | Calendar
Year Written | Net
Premiums
Written | Net
Principal
Guaranteed | Average
Premium
(Cols. 1/2) | Current Year
Earned
Premium | Prior
Year
Reserve | 6
Addition
to Reserve | Withdowals
from Reve | Contingency
Reserve
(Cols. 5+6-7 |
| 1. | 2018 S.P | : | | | | | | | |
| 2. | 2018 LP | | | | | | | | |
| 3. | 2017 S.P | | *************************************** | *************************************** | | *************************************** | | | |
| 4. | 2017 I.P | | | | | | | | |
| 5. | 2016 S.P | | | | | | | | |
| 6. | 2016 LP | | | | | | | | |
| 7. | 2015 S.P | | | *************************************** | | | | | |
| 8. | 2015 I.P | | | *************************************** | | | | | *************** |
| 9. | 2014 S.P | | | | | | | 9 | |
| 0. | 2014 l.P | | | | | | | | |
| 1. | 2013 S.P | | | | | 4 | A | | |
| 2. | 2013 I.P | *************************************** | | | | | · · · · · · · · · · · · · · · · · · · | | |
| 3. | 2012 S.P | | | | | | | | |
| 4. | 2012 I.P | : | | .00000000000000000000000000000000000000 | | | | | |
| 5. | 2011 S.P | | | | | | | | |
| 6. | 2011 I.P | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| 7. | 2010 S.P | | | **************** | | A | | | |
| 8. | 2010 LP | | | | | | | | *************************************** |
| 9. | 2009 S.P | | | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 0. | 2009 I.P | | | | | | | | |
| 1. | Prior to 2009 S.P
Prior to 2009 I.P. | | | | | \ | | | *************************************** |

CONTINGENCY RESERVE FOL NON - M' NICIPAL OBLIGATIONS PAR 1H ALL OIL 2 GU. ANTIES

| | | 1 | 2 | 3 | 4 | 5 | Curren | it Year | 8 |
|----|--------------------------|---|---|---|---|---|---|---|---|
| | Calendar
Year Written | Net
Premiums
Written | Net
Principal
Guaranteed | Avera Prep m (. 1/2) | Current Year
Earned
Premium | Prior
Year
Reserve | 6
Addition
to Reserve | 7
Withdrawals
from Reserve | Contingency
Reserve
(Cols. 5+6-7 |
| 1. | 2018 S.P | | · P | | | | | | |
| 2. | 2018 I.P | | | | | | | | |
| 3. | 2017 S.P | | | *************************************** | | | | | *************************************** |
| 4. | 2017 I.P | | Jun 1997 | | | ************* | | | |
| 5. | 2016 S.P | A | | | | ,,,,,,,,,,,,,,,,, | | | |
| 6. | 2016 LP | · | | | | | | | |
| 7. | 2015 S.P | - A | | | | | | | |
| 3. | 2015 I.P | | 3 | | | | | *************************************** | *************************************** |
|). | 2014 S.P | | | | | | | | |
| 0. | 2014 I.P | | | | | | | | |
| 1. | 2013 S.P | | ************ | | | | | | *************************************** |
| 2. | 2013 I.P | *************************************** | ********** | | | | /************************************* | | |
| 3. | 2012 S.P | | | | | | | *************************************** | |
| 4. | 2012 I.P | <u></u> | | | *************************************** | | *************************************** | | |
| 5. | 2011 S.P | ~ | | | | | | | |
| 6. | 2011 LP | | | | | | | | |
| 7. | 201 S.P | | ************* | | | *************************************** | | | |
| 8. | 2010 | | | | | | | | |
| 9. | 2009 S.P. | | *************************************** | | | | | | |
| | 2000 I D | | | | | | | | |
| 2. | Prior to 2002 S | | *************************************** | | | | | | |

S.P. = Single remiums
I.P. = Installment Premiums

CONTINGENCY RESERVE FOR NON-MUNICIPAL OBLIGATIONS PART 4I

TOTALS - ALL NON-MUNICIPAL OBLIGATIONS WRITTEN

| | | 1 | 2 | 3 | 4 | 5 | Curre | nt Year | 8 |
|-----|--------------------------|---|---|---|-----------------------------------|---|-----------------------------|---|---|
| | Calendar
Year Written | Net Premiums
Written | Net Principal
Guaranteed | Average
Premium
(Cols, 1/2) | Current Year
Earned
Premium | Prior
Year
Reserve | 6
Addition
to Reserve | Withdra als
from Re erve | Contingency
Reserve |
| 1. | 2018 S.P | | | | | | | mmmmm mmm | |
| 2. | 2018 LP | | | *************************************** | | | | | *************************************** |
| 3. | 2017 S.P | | | | | | | | |
| 4. | 2017 I.P | | | | | | | V | |
| 5. | 2016 S.P | monomonom | | | | | | | *************************************** |
| 6. | 2016 l.P | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | *************************************** | | | |
| 7. | 2015 S.P | | | | | | | | |
| 8. | 2015 LP | | | | | | | | |
| 9. | 2014 S.P | | | | | | | · | |
| 10. | 2014 LP | | | | | | | | |
| 11. | 2013 S.P | | | minuminuminum: | < | 200000000000000000000000000000000000000 | | | |
| 12. | 2013 I.P | | *************************************** | | | | | 7 | |
| 13. | 2012 S.P | | | | | 100111111111111111111111111111111111111 | | | |
| 14. | 2012 LP | M10410100000000000000000000000000000000 | | 31100001011011011011011 | | | | 31011011011011011011010 | (4404040)4400004440 |
| 15. | 2011 S.P | | | | | | | | |
| 16. | 2011 LP | | *************************************** | | 1001001011001010101 | | | | |
| 17. | 2010 S.P | | | | | | | | |
| 18. | 2010 I.P | | | | | | 3 | | |
| 19. | 2009 S.P | | 101001110111111111 | | | À | | | 100000000000000000000000000000000000000 |
| 20. | 2009 LP | | | | | | All | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| 21. | Prior to 2009 S.P | | | | | | | | ***************** |
| 22. | Prior to 2009 I.P. | | | | | 10 1 | | | |
| 23. | Totals | | | | A | | | | |

MUNICIPAL BOND EXPOSUR.

PART A GROSS EXPOSURES WILLIAM

| | | Direct Exposure | Ass and Exposure Written | 3
Ceded Exposure Written | 4
Net Exposure Written
(Cols. 1 + 2 - 3) |
|----|------------------------|-----------------|--------------------------|---|--|
| 1. | MUNIC OBLIGATION BONDS | | | | |
| 2. | SPECIAL REVENUE BONDS | | | | (************************************** |
| 3. | IDB'S-TYPE I | | | | |
| 4. | IDB'S-TYPE II | | A | | |
| 5. | IDB'S-TYPE III | | | | *************************************** |
| 6. | TOTAL MUNICIPAL BONDS | | | 100000000000000000000000000000000000000 | WASHINGTON TO STREET WASHINGTON TO STREET |

MULICIPAL BOND EXPOSURES WRITTEN

PART 5B NET OUTSTANDING EXPOSURE

| | 8 | Net Out Inding Exacure (A. Col. 4) | 2
Less Collateral
Held | 3 Exposures Net of Collateral | 4
Net Exposure Prior
Year | 5
Net Exposure
Expired During
Year | 6
Net Outstanding
Exposure |
|----|------------------------|---|--|---|---|---|---|
| 1 | MUNIC OBLIGATION BONDS | (Past-DZ, COL 4) | | Connectu | | Teur | Contract Contract Contract |
| 2 | SPECIAL REVENUE BONDS | | | | - 1001011100111100111101111 | | 10000000000000000000000000000000000000 |
| 2 | IDDIC TYPE I | | *************************************** | | | | |
| 3. | | *************************************** | | *************************************** | *************************************** | *************************************** | *************************************** |
| 4. | IDB'S-TYPE II | | | *************************************** | *************************************** | 310000000000000000000000000000000000000 | |
| 5. | IDB'S-TYPE III | | | | *************************************** | | |
| 6. | TOTAL MUNICIPAL BOND | 000000000000000000000000000000000000000 | COLUMN CO | 1 2000120000000000000000000000000000000 | CANADA CITETION AND RESERVED AND A | | 3 (A.C.) 30322200000000000000000000000000000000 |

MUNICIPAL BOND EXPOSURES WRITTEN

PART 5C
BREAKDOWN OF NET OUTSTANDING EXPOSURES AT YEAR-END

| 4 | | 1 | 2 | Ceded Exp | osure | .5 |
|----|-----------------------|---|---|--|--|--|
| | | Direct Exposure | Assumed Exposure | 3
Authorized | 4
Unauthorized | Net Outstanding Exposure
(Part 5B, Col. 6)
(Cols. 1 + 2 - 3 - 4) |
| 1. | MUNIC BLIGATION BONDS | | | | | |
| 2. | SPECIAL REVENUE BONDS | *************************************** | | | | |
| 3. | IDB'S-TYPE I | | | | | |
| 4. | IDB'S-TYPE II | *************************************** | *************************************** | *************************************** | | |
| 5. | IDB'S-TYPE III | | | *************************************** | | |
| 6. | TOTAL MUNICIPAL BONDS | -ANDORONE COMPANIES OF COMPANIES | | A TOTAL OF THE PARTY OF THE PAR | Province and the contract of t | Division of the Control of the Contr |

S.P. = Single Premiums I.P. = Installment Premiums

NON - MUNICIPAL BOND EXPOSURES WRITTEN PART 6A GROSS EXPOSURES WRITTEN DURING YEAR

| | | l
Direct Exposure
Written | 2
Assumed Exposure
Written | 3
Ceded Exposure
Written | 4 posure Written 1+2-3) |
|----|--|---|---|--------------------------------|---|
| 1. | CORP OBLIG BDS—TYPE I | | | | |
| 2. | CORP OBLIG BDS—TYPE II | | | | |
| 3. | CORP OBLIG BDS—TYPE III | | | | <u></u> |
| 4. | CONSUMER DEBT OBLIGATIONS | | | | |
| 5. | PASS THROUGH SECURITIES | | | | / // |
| 6. | LIMITED PARTNERSHIPS | | | | T |
| 7. | OTHER NON-INVESTMENT GRADE OBLIGATIONS | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 8. | ALL OTHER GUARANTEES | | | | |
| 9. | TOTAL NON-MUNICIPAL BONDS | | | | |

NON - MUNICIPAL BOND EXPOSURES WP PART 6B NET OUTSTANDING EXPOSU

| | l
Net
Outstanding
Exposure
(Part 6A,
Col. 4) | ess
lateral | Exposures Net of Collateral | Net Exposure Prior Year | 5
Net
Exposure
Expired
During Year | 6
Net
Outstanding
Exposure |
|--|---|----------------|-----------------------------|-------------------------|--|---|
| CORP OBLIG BDS—TYPE I | | 2 | | | | |
| 2. CORP OBLIG BDS—TYPE II | | - | | | | |
| 3. CORP OBLIG BDS—TYPE III | | | | | | |
| 4. CONSUMER DEBT OBLIGATIONS | | | | | | |
| 5. PASS THROUGH SECURITIES | - | · | 30111110111100111110 | | :10100000000000000000000000000000000000 | |
| 6. LIMITED PARTNERSHIPS | | · | | | | |
| 7. OTHER NON-INVESTMENT GRADE OBLIGATIONS | | | | | | |
| ALL OTHER GUARANTEES TOTAL NON-MUNICIPAL BONDS | | | | | | *************************************** |

NON - M. NICIPAL BOND EXPOSURES WRITTEN PART 6C

OF NET OUTSTANDING EXPOSURES AT YEAR-END

| | | 1 | 2 | Ceded E | xposure | 5 |
|----|----------------------------------|---|---|-----------------|-------------------|---|
| | | Direct
Exposure | Assumed
Exposure | 3
Authorized | 4
Unauthorized | Net Outstanding
Exposure
(Part 6B, Col. 6)
(Cols. 1+2-3-4) |
| 1. | CORP OBLIG BDS—TYP | *************************************** | | | | |
| 2. | CORP OBLIG P PE II. | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| 3. | CORP OBLIG 3DS—TYA III | | | | | |
| 4. | CO UMER OBLICATIONS | | | | | |
| 5. | PASS TO OUGH ATTES | | | | | |
| 1 | LIMITED PA. NERSHIPS | | | | | |
| | OTHER NOSTMENT GRADE OBLIGATIONS | *************************************** | | | | |
| 8. | OTHER GUARANTEES | *************************************** | | | | 020101111111111111111111111111111111111 |
| 9. | TOTA VON-MUNICIPAL BONDS | | | | | |

PART 7 - LOSS DEVELOPMENT (\$000 OMITTED)

| | Losse 3d
Reinstr 6 R | ad During the Year Less
Received During the Ye | od During the Year Less
of Received During the Year | - | Salvage and Subrogation Received
in the Current Year | on Received | | »c | Losses Unpu | Losses Unpuid December 31 of Current Year | 31 of Currer | at Year | Development | ment | Estimated Liability
on Unpaid Losses | Estimated Liability
on Unpaid Losses | Change in s
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|-----------------------------|---|--|--|--|---|---|---|---|---|---|---|--|---|--|---|--|---|--|
| | 2 2 2 | C passes in read | 2 3 ssee On losses red in red or to | 4
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On losses
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On losses
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Col. 5,
Parr 3A | On losses incurred prior to 2018 (Cols. | 14
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prior to
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(Cols. | 15
Dec 31 | 16
Dec 31 | 17
Dec. 31, 2017
(Col. 13 less | 18
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(Col. 14 Jess |
| | 918 | 3 | ē | 2018 | 2017 | 2017 | 4-5-6) | to 2017 | 2018 | 2017 | | | 2+3+10+11) | 3+8+11) | 2017 | 2016 | Col. 15) | - |
| Municipal Obligation Bonds | | 1 | | - | (Assessment) | | | | | 1 | | | *************************************** | *************************************** | | | *************************************** | |
| Special Revenue Bonds | *************************************** | | *************************************** | No. | | - companion | *************************************** | Ortobarolismonto | *************************************** | - | *************************************** | * Sheendand | | | Contention | | Salestoneconten | *************************************** |
| IDB's—Class I | | 3 | | 1 | | | | | | - | | - Control of the Cont | | - | | | | |
| IDB's-Class II | | | | | | | - | - | | | | *************************************** | - | | | *************************************** | | |
| IDB's-Class III | | | - | 1 | | *************************************** | | | | | | | 010000000000000000000000000000000000000 | - | | | *************************************** | |
| Total Municipal Bonds | - | 1 | | - | - | *************************************** | *************************************** | Constitution and an artist of the contract of | decination and an arrange | 1 | | Histories | discounting or all the same | *************************************** | 1 | | *************************************** | The state of the s |
| Corporate Obligation Bonds- | | | > | | | | | | | | | | | | | | | |
| Class I | | | | N. Committee | - | | | 000000000000000000000000000000000000000 | | *************************************** | | *************************************** | - | | | *************************************** | | |
| Corporate Obligation Bonds- | | | | | 1 | 8 | | | | | | | | | | | | |
| Class II | | | | 1 | | 1 | | | | | | | *************************************** | - | | | *************************************** | *************************************** |
| Corporate Obligation Bonds- | | | | | | | | | | | | | | | | | | |
| Class III | *************************************** | *************************************** | | *************************************** |) | | | | | specialism | | ************************************** | | | · · · · · · · · · · · · · · · · · · · | | | *************************************** |
| Consumer Debt Obligations | | | | | | *************************************** | | | | - | | | - | | | | | |
| Pass Through Securities | | | ************ | - | *************************************** | | | | | 1 | | 1 | | | *************************************** | | | |
| Limited Partnerships | | Annual Contract of the Contrac | *************************************** | The same of the sa | | J. | | 1 | | - | | *************************************** | | | *************************************** | *************************************** | | |
| Other Non-Investment Grade | | | | | | 1 | | | | | | | | | | | | |
| Obligations | - | *************************************** | | *************************************** | *************************************** | | | | | - | *************************************** | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | - | | | |
| All Other Non-Municipal | | the contract of | All collected . | the country of | | design contrast | | - | | hadron shad | *************************************** | ************************* | - | | | to the same of the | | - |
| Total Non-Municipal Bonds | | (440)(499) | Commission | (40044009)) | *************************************** | *************************************** | | | | 40000000000000000000000000000000000000 | | panetoniene . | | | Contractores | (consumeration) | | |
| Totals | | | | | | | | 700 | 1 | | | | | | | | | |

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MEDICARE SUPPLEMENT INSURANCE EXPERIENCE EXHIBIT For The Year Ended December 31, 2018 (To Be Filed By March 1)

Affix Bar Code Above

| Address | NAIC
Address (City, State and Zip Code) | NAIC Group de
Zip Code) | | X | | | FOR THE STATE OF | AIEOF | | | ř. | | NAIC Company Code | Code | | | Í |
|--|--|--|---|--|---|--|---|---|--|---|--|--|--|--|---|--|---|
| Person (| Person Completing This Exhibit | Exhibit | | | K | | | | Telephone Number | Number | | | | | | | Ĺ |
| - | 2 | 3 | 47 | 8 | | 7 | 80 | 6 | 10 | | Policies Issued Through 2015 | Through 2015 | | ď | Policies Issued in 2016, 201 | 2016, 2017, 2018 | |
| | | 10 10 | | | | | | į | 1 | 11 | Incurred Claims | Claims | 14 | 15 | Incurred | Incurred Claims | 81 |
| Compliance
with OBRA | Policy
Form
Number | Standardized
Medicare
Supplement
Benefit Plan | Medicare
Select | Plan
Characteristics | Oute | Date
Appy
Wig wn | Date
Last
Amended | Date | Policy
Marketing
Trade
Name | Premiums
Earned | 12
Amount | 13
Percent of
Premiums
Earned | Number of
Covered
Lives | Premiums
Earned | 16
Amount | 17
Percent of
Premiums
Earned | Number of
Covered
Lives |
| | | - minimum management | | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | | | | | Section of the last of the las | - production of the same |
| | | | | | | | | | | | | | 9.11.11.11.11.11.11.11.11.11.11.11.11.11 | | | *************************************** | |
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| | | | | | directions | | | | | | | | | | | | |
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| *************************************** | | *************************************** | | | | | | | J | - | X | | *************************************** | | | | 1 |
| | | | distributed dissess | | | | | | | | | Attended | | | | | ALEXANDER STREET |
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| CONTRACTOR OF THE PERSON OF TH | | | | | | | | | | *************************************** | | | | | | | |
| 0299999 TO | TAL EXPERIES | 0299999 TOTAL EXPERIENCE ON GROUP POLICIES | OULCIES | | | | | | | Contraction (News | A TOTAL DATA SANDON BAN | • | | CONTROL VIOLENCE AND AND AND AND AND AND AND AND AND AND | Manufactures of the second | 100000000000000000000000000000000000000 | COMPONITOR OF THE |

GENERAL INTERROGATORIES

If response in Column 1 is no, give full and complete details.

2. Claims address and contact reverse provided to the Secretary of Health and Human Services as required by 42 U.S.C. 1395ssic) (3) (B) for this state.

2.1 Address:

2.2 Contact Person and Phone Number:

3. Billing address and contact person for loser fees established under 41 U.S.C. 1395u(t) (3) (B).

3. Contact Person and Phone Number:

4. Explaim any policies identified above us policy type "O".

P/C

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Designate the type of health care providers reported on this page.

| Af | fix | Bar | r Code | A | bove |
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SUPPLEMENT "A" TO SCHEDULE T EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN ALLOCATED BY STATES AND TERRITORIES

| | | I | 2 | Direct Lo | osses Paid | 5 | Direct Loss | es U | 8 |
|----------------|---|---|---|---|---|---|--|---|---|
| | | ~ | 550 | 3 | 4 | 1995 | 6 | 7 | Direct |
| | | | | | | | | | Losses |
| | | Direct | Direct | | Number | Direct | | Ner | But |
| | States Fra | Premiums | Premiums | | of | Losses | Amo | 07 | Not |
| 1. | States, Etc. AlabamaAL | Written | Earned | Amount | Claims | Incurred | Rep (ed | laims | Reported |
| 2. | AlaskaAK | | *************************************** | | | | | | |
| 3. | ArizonaAZ | *************************************** | *************************************** | *************************************** | | | | | |
| 4. | ArkansasAR | *************************************** | | *************************************** | | | | | |
| 5. | CaliforniaCA | | | | | | | *************************************** | |
| 6.
7. | ColoradoCO
ConnecticutCT | *************************************** | | | | | | | |
| 8. | DelawareDE | *************************************** | *************************************** | | | | | | |
| 9. | District of ColumbiaDC | *************************************** | *************************************** | | | | | *************************************** | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 10. | FloridaFL | | | | | | | | |
| 11. | GeorgiaGA | *************************************** | | | | | 3 | | |
| 12.
13. | HawaiiHI | *************************************** | | *************************************** | | | | ***************** | |
| 14. | IdahoID | | | | | | - : 100000000000000000000000000000000000 | | |
| 15. | IndianaIN | | | | | | | | |
| 16. | IowaIA | | *************************************** | | | | | | |
| 17. | KansasKS | | | | - | <u></u> | | | |
| 18. | Kentucky KY | *************************************** | *************************************** | | | | | | *************************************** |
| 19.
20. | Louisiana LA Maine ME | 201101100000000000000000000000000000000 | | | | | | | |
| 21. | MarylandMD | | *************************************** | | | | *************************************** | | |
| 22. | MassachusettsMA | | *************************************** | - | | | | | |
| 23. | Michigan MI | *************************************** | | | | | | | |
| 24. | MinnesotaMN | | | | | | *************************************** | | .0101101111011111 |
| 25. | Mississippi MS | | | 300 (000000 | | *************************************** | | *************************************** | |
| 26.
27. | MissouriMO
MontanaMT | | | | 1 | | | | |
| 28. | NebraskaNE | | | | , | | : 10000000000000000 | | |
| 29. | NevadaNV | | | | | *************************************** | *************************************** | ************** | |
| 30. | New Hampshire NH | *************************************** | | | | | *************************************** | | |
| 31. | New JerseyNJ | *************************************** | /// | | | | | | |
| 32.
33. | New MexicoNM | | | · · · · · · · · · · · · · · · · · · · | | | | | *************************************** |
| 34. | New York | | my formanin | | *************************************** | *************************************** | | | |
| 35. | North DakotaND | | | A | | | | | |
| 36. | OhioOH | | | | | *************************************** | *************************************** | | |
| 37. | OklahomaOK | | | | | | | | |
| 38. | OregonOR | | | | | | | *************************************** | |
| 39.
40. | PennsylvaniaPA | | | | | | | | |
| 41. | Rhode IslandRI South CarolinaSC | | | *************************************** | | | | | |
| 42. | South DakotaSD | | | | | | | *************************************** | |
| 43. | Tennessee | | | | | | | | |
| 44. | Texas | A | | | | | | | |
| 45. | UtahU | | | *************************************** | | | | *************************************** | |
| 46.
47. | Vermont | | | | | | | | |
| 48. | WashingtonWA | | | *************************************** | | | : 1000000000000000000000000000000000000 | 0410111011101 | |
| 49. | West VirginiaWV | | *************************************** | | | *************************************** | *************************************** | *********** | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 50. | WisconsinWI | | | | | *************************************** | *************************************** | | |
| 51. | WyomingWY | | | | | | *************************************** | | *************************************** |
| 52. | American Samoa. | ····· | | | | ***************** | *************************************** | | |
| 53.
54. | Guam | | | | | | *************************************** | | *************************************** |
| 55. | U.S. Virgin Isl Is | | | | | | | | |
| 56. | North Marian slands MP | | *************************************** | | | | ***************** | | |
| 57. | Canada | | | 300000000000000000000000000000000000000 | | | | *************************************** | |
| 58. | Aggregate of alienOT | | *************************************** | | | | | *************************************** | |
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58001. | OF WRITE-END | MORANGA MARKATAN | S. A. A. A. S. A. A. A. A. A. A. A. A. A. A. A. A. A. | | MAGNATURE STORY | VIII. W. L. L. L. L. L. L. L. L. L. L. L. L. L. | 20141020401000 | 550000000000000000000000000000000000000 | 100000000000000000000000000000000000000 |
| 58002. | | *************************************** | | *************************************** | *************************************** | | *************************************** | | |
| 58003. | | | | | | *************************************** | . 201101003101011110000 | | interession contrarent |
| 58998. | Sum. of rem and write-ins for
Line 58 from overflow page | | | | | | | | - 1 |
| 58999. | Totals (Lines 58001 through 58003 plus | | | | | | | | |
| | 58998) (Line 58 above) | t | | | | | | | |

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| Affin | Bart | ode | Above | |

TRUSTEED SURPLUS STATEMENT

AFFIDAVIT OF U.S. MANAGERS, GENERAL AGENTS OR ATTORNEYS

| beir | ng duly sworn, say | s that he/she is the | | of the | |
|---|---|---|---|--|---|
| a corporation organized under the laws of
surplus statement together with its related scl
enumerated, are the absolute property of said
mentioned assets are held in the United State
assets, liabilities and deductions therefrom re | nedules appended
d corporation, fre
s by Insurance De | hereto is a true statement
e and clear from any lie
epartments and Officers | nt of the trusteed surplus of
ens or claims thereon, excep
of the various States of the I | ot as hereinafter stated, and t
United States and Trustees as | reral items of assets hereinafte
hat each and all of the cinafte |
| Subscribed and sworn to before me this | day of | A.D., 20 | | X | |
| - | | AFFIDAVIT OF TR | RUSTEE - SCHEDULE B | | • |
| being sworn, say that it is the Trustee of the | | | | | 0 |
| a corporation organized under the laws of _
located at | | | B of the following stemes | he nited Star through the | stee within the United States, and |
| that the said assets are subject to no other cla | | | | | sice within the Officer States, an |
| Subscribed and sworn to before me this | day of | A.D., 20 | 14 | | |
| - | | AFFIDAVITA E TI | RUS RE AND VILEC | Y | |
| hains guess can that it is the Tenster of the | | | | | |
| being sworn, say that it is the Trustee of the
a corporation organized under the laws of | | er | ntere o transact business in | the United States through th | e State of |
| located at | | ssets lis in Scheo
police olders and credi | | | stee within the United States, an |
| Subscribed and sworn to before me this | day of | A.D., | | | |
| | 4 | EID AVIT OF TH | RUSTEE - SCHEDULE D | - | |
| being sworn, say that it is the Trustee the | | | | | |
| a corporation organized under the law located at | | | | the United States through the | stee within the United States, an |
| that the said assets are subject to no other cla | | | tors within the United States | | see main are control suites, an |
| Subscribed and sworn to belt the this | day of | A.D., 20 | | - | |
| .0 | 5 | | | | |

TRUSTEED SURPLUS STATEMENT ASSETS

SCHEDULE A – DEPOSITS WITH STATE OFFICERS (EXCLUDING SPECIAL DEPOSITS)

| 1
Line Number | 2
Description | 3
Admitted Asset Value | 4
Par Value | 5
Fair Value |
|------------------|---------------------------|---|---|-----------------|
| Line (dilloc) | Description | Tummied Tester Time | 1 m 7 mmc | Tun Tung |
| | | *************************************** | | |
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| | | | | |
| | | | *************************************** | |
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| | | | | |
| | | | | |
| | | | | |
| 1.98 | Accrued Investment Income | | X X | XXX |
| 1.99 | Totals | | 470 | |

SCHEDULE B – DEPOSITS WITH UNITED STATES TRUSTEE

| 1
Line Number | 2 | 3
Admitted Asset Value | 4 | 5
Fair Value |
|------------------|--|---------------------------|---|---|
| | Description | Admitted Asset Value | v Valu | rair value |
| 2.01 | Cash | | | *************************************** |
| 2.02 | Bonds | | | |
| 2.03 | Preferred stock | | | |
| 2.04 | Common stock | | | |
| 2.05 | Mortgage loans on real estate | | | |
| 2.06 | Real estate | | | |
| 2.07 | Short-term investments | | · | *************************************** |
| 2.08 | Other invested assets | | | |
| 2.09 | Miscellaneous assets not included in any of the above categories | | 300000000000000000000000000000000000000 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 2.98 | Accrued investment income | | XXX | XXX |
| 2.99 | Totals | 10 D | 5000000 | 2000000 |

SCHEDULE C - DEPOSITS WIT UNITED STATES TRUSTEE

| 1 | 2 | 3 | 4 | 5 |
|-------------|--|---|---|---|
| Line Number | Description | nitted Asset Value | Par Value | Fair Value |
| 3.01 | Cash | | | *************************************** |
| 3.02 | Bonds | | | |
| 3.03 | Preferred stock | | 710041111111111111111111111111111111111 | |
| 3.04 | Common stock | | | |
| 3.05 | Mortgage loans on real estate | *************************************** | | |
| 3.06 | Real estate | | | |
| 3.07 | Short-term investments | | | |
| 3.08 | Other invested assets | | | 300000000000000000000000000000000000000 |
| 3.09 | Miscellaneous assets not included my of the above categories | | | |
| 3.98 | Accrued investment income | | XXX | XXX |

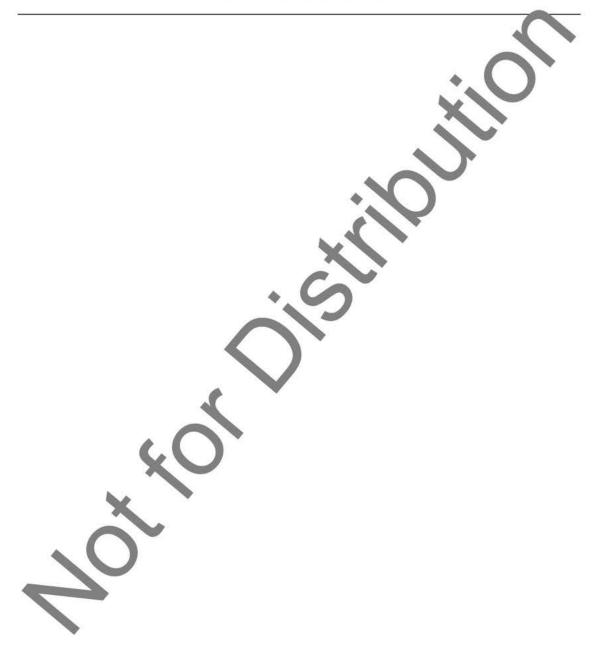
.... ULE DEPOSITS WITH UNITED STATES TRUSTEE

| I
Line Number | 2
Description | 3
Admitted Asset Value | 4
Par Value | 5
Fair Value |
|------------------|---|---|---|---|
| 4.01 | Cash | | | |
| .02 | Bonds | | | |
| .03 | Preferred stock | | | |
| .04 | Ommon stock | 301101000000000000000000000000000000000 | Crosomosimosomosous | *************************************** |
| .05 | Mr. ge loans on real estate | | | |
| 06 | Reference | *************************************** | | |
| .07 | Short-ten vestments | 341111110001111111111111111111111111111 | 300000000000000000000000000000000000000 | |
| 08 | investe ets | *************************************** | | |
| 09 | Misce eous assets not included in any of the above categories | | | |
| 98 | Accrued vestment income | | XXX | XXX |

TRUSTEED SURPLUS STATEMENT LIABILITIES AND TRUSTEED SURPLUS

| | | 1 |
|-------|--|--------------|
| | | Current Year |
| 1. | Total liabilities | |
| ADDIT | ONS TO LIABILITIES: | |
| 2. | Ceded reinsurance balances payable | |
| 3. | Agents' credit balances | |
| 4. | Aggregate write-ins for other additions to liabilities | |
| 5. | Total additions (Lines 2 + 3 + 4). | |
| 6. | Total (Lines 1 + 5) | |
| DEDUC | TIONS FROM LIABILITIES: | |
| 7. | Reinsurance recoverable on paid losses and loss adjustment expenses: | |
| | 7.1 Authorized companies. | |
| | 7.2 Unauthorized companies | |
| | 7.3 Certified companies | |
| 8. | Special state deposits, not exceeding net liabilities carried in this statement on | |
| 1196 | business in each respective state: | |
| | 8.1 Special state deposits (submit schedule) | W . V |
| | 8.2 Accrued interest on special state deposits | |
| 9. | Agents' balances or uncollected premiums not more than ninety days past due, not | |
| | exceeding unearned premium reserves carried thereon | |
| 10. | Unpaid reinsurance premiums receivable, not exceeding losses and loss adjustment | |
| | expenses due to reinsured: | |
| | 10.1 Authorized companies | |
| 2.2 | 10.2 Unauthorized companies | |
| 11. | Aggregate write-ins for other deductions from liabilities | |
| 12. | Total deductions (Lines 7 thru 11) | |
| 13. | Total adjusted liabilities (Line 6 minus Line 12) | |
| 14. | Trusteed surplus | |
| 15. | Total | |
| DETAI | LS OF WRITE-INS | |
| 0401. | | |
| 0402. | | |
| 0403. | | |
| 0498. | Summary of remaining write-ins for Line 4 from overflow page | |
| 0499. | Totals (Lines 0401 thru 0403 plus 0498) (Line 4 above) | |
| 1101. | | |
| 1102. | | |
| 1103. | | |
| 1198. | Summary of remaining write-ins for Line 11 from series age | |
| 1199. | Totals (Lines 1101 thru 1103 plus 1198) (Line above) | |

OVERFLOW PAGE FOR WRITE-INS



Affix Bar Code Above

PREMIUMS ATTRIBUTED TO PROTECTED CELLS EXHIBIT For The Year Ended December 31, 2018 (To Be Filed by March 1)

..Insurance Company . Employer's ID Number. NAIC Company Code. Of the NAIC Group Code ..

| Fig. | | | Consult. | Premiums | ums | | | | Losses | | | | Loss Adjustment Expenses | nt Expenses | |
|--|------------|--|---|---|---|--|--|--|---|---|---|---|---|---|---|
| control billions Anaboded Araboded Araboded Araboded Fried Prior Control Fried Prior < | | | - | 2 | m | च | 2 | 'n | npaid December 31 | | 6 | 10 | Unpaid Do | cember 31 | 13 |
| Comparison | | | Š | Tou | Current | Earned | | 6
Adjusted or in | 7
Incurred But | Prior Year | | | 11
Current | 12
Prior | |
| The post | -1 | | Attributed | Car | Year | Premium | Paid | Process | Not Keported | Total | Incurred | Paid | Year | Year | Incurred |
| Indicate part | | Total Commence and | | | | | | | | | | | - | | |
| A contact A co | ie | militia la recei | | | | | 270000000000000000000000000000000000000 | | | | | | | | |
| inje peril and health and health and health by - courtered claims and claim and claim and health courtered claims and claim and health courtered claims and claim and claim and health courtered claims and claim and claim and claim and health claims and claim and cl | 11 | Homeowners multiple neril | | | | | | | | | | | | | |
| ing a liship oceanise | f wi | Commercial multiple peril | | | | | | | | | | | | 000000000000000000000000000000000000000 | |
| International control library controls International control library controls International controls Internationa | 9 | Mortgage guaranty | | | 4 | | | | | | | | | | |
| State Stat | i 00 | Ocean marine | | | | | | | | | | | | | |
| ional labelity occurrence | 6 | Inland marine | | | | | | | | | | | | - | - |
| ional bilaity occurrence | 10 | Financial guaranty. | 4 | | | | 1 | The state of the s | *************************************** | | | | *************************************** | | - |
| A | | Medical professional liability occurrence | 4(0) 010000000000000000000000000000000000 | - | | | - The second | | | *************************************** | | *************************************** | | *************************************** | |
| and health | 11.2 | Medical professional liability claims-made | | - | | | | manufacture contra | *************************************** | *************************************** | *************************************** | *************************************** | *************************************** | *************************************** | |
| and health and he | 12. | Earthquake | *************************************** | *************************************** | | | - | | *************************************** | *************************************** | *************************************** | *************************************** | | *************************************** | |
| and beath | 13. | Group accident and health | | *************************************** | | | | | | | | | | | - |
| du belith | 14 | Credit accident and health | | | | | | 1000 | | | | | | | |
| A | 2000 | (group and individual) | *************************************** | -11000000000000000000000000000000000000 | | | - Annual | • | 011111111111111111111111111111111111111 | antitudente constant | *************************************** | *************************************** | 911111111111111111111111111111111111111 | | |
| Controlled | 15. | Other accident and health | | | *************************************** | | - | | *************************************** | - | | *************************************** | *************************************** | | |
| Contractive | 16. | Workers' compensation | | | | - | 1 | | | | | | | | |
| Contract stude | 17.1 | Other liability—occurrence | | *************************************** | *************************************** | - Comments | 1 | | *************************************** | Section designation | *************************************** | | | *************************************** | |
| - Contraction———————————————————————————————————— | 17.2 | Other liability—claims-made | | | | | A | | *************************************** | | | | | | |
| A | 17.3 | Excess workers* compensation | | (44000000000000000000000000000000000000 | *************************************** | *************************************** | - | | *************************************** | | *************************************** | | | | |
| The state of the first of the f | 18.1 | Products liability—occurrence | (00000000000000000000000000000000000000 | (teroperoration) | *************************************** | - dominate and a few sections of | 6 | | | Treatment of the Parket | | | | - decrees tradeous | |
| State Description Control of bidding Contro | 18.2 | Products liability—claims-made | | *************************************** | | | | The second second | | | *************************************** | *************************************** | *************************************** | interesessation | *************************************** |
| 10 | 19.1, 19.2 | Private passenger auto liability | | | | *************************************** | | | | | | *************************************** | | *************************************** | |
| Color Colo | 19.3, 19.4 | Commercial auto liability | | *************************************** | *************************************** | *************************************** | |) | | *************************************** | *************************************** | | *************************************** | *************************************** | |
| | 21. | Auto physical damage | | *************************************** | | | | | - No. | *************************************** | | *************************************** | *************************************** | | |
| If | 22. | Aircraft (all perils) | *************************************** | *************************************** | | | | | | · | *************************************** | *************************************** | | - | |
| | 23. | Fidelity | | | | | and the same of th | 1 | J | | | | | | |
| properioral proper | 24. | Surety annual and a sure a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure a sure and a sure and a sure and a sure and a sure and a sure a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure and a sure a sure and a sure and a sure and a sure and a sure a sure and a sure a sure | | | | | | > | · | | | | *************************************** | | |
| Properties Pro | 26. | Burglary and theft | - | - Annual annual | Assessment Section 1 | Arthurstaneous and a second | | Landonsoniani | - | - | - | - | - | - | - |
| proportional propo | 27. | Boiler and machinery | | | | | | | - | | | *************************************** | | | |
| proportional propo | 9 o | Creditation | | | *************************************** | | *************************************** | | | | *************************************** | *************************************** | *************************************** | | |
| Proportional Y | . 67 | Incrnabonal | (0.000000000000000000000000000000000000 | *************************************** | | *************************************** | 311000000000000000000000000000000000000 | Account the control of the control o | - | | | | *************************************** | *************************************** | |
| proportional propo | 3.5 | Waltality Deingmanical accommodational | *************************************** | *************************************** | | 0.0000000000000000000000000000000000000 | *************************************** | | \$ | , | | *************************************** | | | |
| proportional diffusion of business and the state of business and the s | | assumed protectiv | | | Contraction of | Commonweal Common Commo | | | | | | | | | S. Thomas and S. C. |
| Variation Vari | 32. | Reinsurance-nonproportional | | | | | | | | | 4 | | | | |
| its for other lines of business | - | assumed liability | | | | | | | | 9 | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| in the first of business and the first of business and the first of the first of business and the first of th | 3.5, | Reinsurance-nonproportional | | | | | | | | | | 4 | | | |
| with the first control of the | 35 | Aggregate write-ins for other lines of business | | | | | | | | 1 | | | - interestation | - Constitution | |
| ### Company of the co | 35, | Totals | | | | | | | | | | | | | |
| Sun of remaining write-its for the state of | DETAILS | F WRITE-INS | | | | | | | | | | | | | |
| Sign of retaining websits for Sign of retaining websits for Trad (Lines 24 blows) and Sign of retaining websits for Trad (Lines 24 blows) and Sign of retaining websits and Sign of Si | 3401. | | | - | | *************************************** | 31-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | | *************************************** | | 7 | | | *************************************** | |
| Sum. of remaining write-ties for Line 34 from overlow page | 3403 | | | | | | | | | | - | | | | |
| Line 34 from overhow page | | n. of remaining write-ins for | | | | | | | | | | | 4 | | |
| Control of the State of the Sta | 3400 Tos | e 34 from overflow page | | *************************************** | | | *************************************** | | | - | *************************************** | | | | |
| | plc. | s 3498) (Line 34 above) | | | | | | | | | | | | | |

OVERFLOW PAGE FOR WRITE-INS



Affix Bar Code Above

REINSURANCE SUMMARY SUPPLEMENTAL FILING FOR GENERAL INTERROGATORY 9 (PART 2) For The Year Ended December 31, 2018

| | NAIC Group Code | To Be Filed by March | | NA | IC Company Code |
|----|--|------------------------------------|------------------------|---------------|---------------------------------|
| | Teste of the second sec | | | - 500 | - Company code |
| | | (A) Financial Impa | 2 | | A i |
| | | 1 | Interroga | tory 9 | |
| | | As Reported | Reinsuranc | e Effect | Restated With Interroga |
| 1. | Assets | | | | |
| 2. | Liabilities | | 8 | _ | |
| _ | Surplus as regards to policyholders | | | - | |
| 1 | Income before taxes | | | - | |
| | | | 4. | - 3 | |
| | (B) Summary of Reinsurance | e Contract Terms | | (C) Mana | ment's objectives |
| | | | | | <u> </u> |
| _ | | | | A 1 | |
| | | | | | 9 |
| | | | | | |
| _ | | | 1 | | |
| | | | A 1 | | |
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| | The state of the s | | | | |
| | | | | | |
| - | he response to General Interrogatory 9.4 (Par | t 2 Property & Casualty Interrogat | ories) is yes, explain | below why the | contracts are treated different |
| fc | | t 2 Property & Casualty Interrogat | ories) is yes, explain | below why the | contracts are treated different |

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Affix Bar Code Above

MEDICARE PART D COVERAGE SUPPLEMENT (Net of Reinsurance) (To Be Filed By March 1) NAIC Group Code....

NAIC Company Code.....

| | | Individual | Coverage | Group C | overage | 5 |
|-------------------|--|---|---|---|---|---|
| | | 1 | 2 | 3 | 4 | Total |
| | | Insured | Uninsured | Insured | Uninsu ed | Cash |
| 1. | Premiums Collected | | | | | |
| 1.1 | Standard Coverage | | 200204 V | | | |
| | 1.11 With Reinsurance Coverage | | XXX | | | > |
| | 1.12 Without Reinsurance Coverage | *************************************** | XXX | | XXX | *************************************** |
| | 1.13 Risk-Corridor Payment Adjustments | | XXX | | XXX | |
| 1.2 | Supplemental Benefits | | XXX | | AAA | *************************************** |
| 2. | Premiums Due and Uncollected-change | | | - W 1 | | |
| 2.1 | Standard Coverage | | 204020 | | | 920000 |
| | 2.11 With Reinsurance Coverage | | XXX | | XXX | XXX |
| 2.2 | 2.12 Without Reinsurance Coverage | *************************************** | XXX | | xxx | XXX |
| 2.2 | Supplemental Benefits | | XXX 🍨 | | XXX | XXX |
| 3.1 | Unearned Premium and Advance Premium-change | | | | | |
| 3.1 | Standard Coverage 3.11 With Reinsurance Coverage | WO T TO DAY I DODGET FROM | | | VVV | VVV |
| | 3.12 Without Reinsurance Coverage | | X | | XXX | XXX |
| 3.2 | Supplemental Benefits | | A X |) | XXX | XXX |
| 4. | Risk-Corridor Payment Adjustments-change | | 1 | | 222 | AAA |
| 4.1 | Receivable | | 1 1 | | xxx | xxx |
| 4.2 | Payable | | XXX | | xxx | XXX |
| 5. | Earned Premiums | | AAAT | | , aaa | AAA |
| 5.1 | Standard Coverage | - | | | | |
| | 5.11 With Reinsurance Coverage | | XXX | | xxx | xxx |
| | 5.12 Without Reinsurance Coverage | | xxx | | xxx | XXX |
| | 5.13 Risk-Corridor Payment Adjustments | | XXX | | xxx | XXX |
| 5.2 | Supplemental Benefits | | xxx | 100000000000000000000000000000000000000 | xxx | xxx |
| 6. | Total Premiums | | xxx | | xxx | |
| 7. | Claims Paid | - | 353.55 | - | 7037 | |
| 7.1 | Standard Coverage | - | | | | |
| 1.1 | 7.11 With Reinsurance Coverage | | xxx | | xxx | |
| | 7.12 Without Reinsurance Coverage | | XXX | | XXX | *************************************** |
| 7.2 | Supplemental Benefits | | XXX | | xxx | *************************************** |
| 8. | Claim Reserves and Liabilities-change | | 70.00 | | 3333 | |
| 8.1 | Standard Coverage | | | | | |
| | 8.11 With Reinsurance Coverage | | xxx | | xxx | xxx |
| | 8.12 Without Reinsurance Covered | *************************************** | XXX | | xxx | XXX |
| 8.2 | Supplemental Benefits | *************************************** | xxx | | xxx | xxx |
| 9. | Health Care Receivable-change | 0.2000000000000000000000000000000000000 | 20000 | \$200630000000000000000000000000000000000 | 80000 | 557,000 |
| 9.1 | Standard Coverage | | | | | |
| | 9.11 With Reinsurance overage | | xxx | | xxx | xxx |
| | 9.12 Without Reinsurance verage | | xxx | | xxx | xxx |
| 9.2 | Supplemental Benefits | | xxx | | xxx | xxx |
| 0. | Claims Incurre | | | | | |
| 0.1 | Standard Coverage | | | | | |
| | 10.11 With Poinsur. overage | | xxx | | xxx | XXX |
| | 10.12 W nout insurance Coverage | | xxx | | xxx | xxx |
| 0.2 | Supplen ntal Benc ts | | xxx | | XXX | XXX |
| 1. | 1 Cla s | | XXX | | XXX | 10 |
| 2. | Reins ance coverage and Low Income Cost Sharing | | | | | |
| 1772 | 12.1 c ims Paid - Net of Reimbursements Applied | xxx | | xxx | | |
| 1 | 12.2 bursements Received but Not Applied-change | xxx | *************************************** | xxx | | *************************************** |
| | 12.3 Reimbursements Receivable-change | xxx | | xxx | | XXX |
| | Health Care Receivables-change | xxx | *************************************** | xxx | | XXX |
| 3. | Agg. egate Policy Reserves-change | | *************************************** | | *************************************** | XXX |
| | Expenses Paid | | xxx | | xxx | |
| | | | 2.11.75.1 | -10110 | 200,000 | |
| 4. | | *************************************** | XXX | *************************************** | XXX | XXX |
| 14.
15.
16. | Expenses Incurred Underwriting Gain/Loss | | XXX
XXX | | XXX | XXX |

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NAIC Group Code....

BAIL BOND SUPPLEMENT For The Year Ended December 31, 20 (To Be Filed by March 1)

Affix Bar Code Above

NAIC Company Code...

| if the 1. | If the reporting entity writes a vibail. Ind Excess, please provide the following: 1. Is the bail bond premium reported in a gross basis? 2. If the answer to #1 was no, was permitted practing to the reporting entity? 3. If the answer to #2 was no, please explain | | Yes Yes | No [] |
|-----------------|---|--------------|----------|----------------|
| 4.0.0 | What bond life is used to calculate unearry preprint in a sys? Are any amounts charged to the consumer exclict from loss premiums? If the answer to #5 was Yes, obese explain. | | Yes | [] No [] |
| 7. | ations on the sond after execution? | | | Yes [] No [] |
| 9. 0. 1 | Cu nt Yry % of GPW S | Prior Year % | | |
| 12. | erage expenses \$ | | % | DUN 3° 70 |
| 13. | S | | % of OPE | 70 OI INFE |
| 15. | S. S. S. S. S. S. S. S. S. S. S. S. S. S | | % | % |
| . 18. | Direct losses untaired. | | % | % |
| 20.
21. | S | | %% | % |
| Build | Build-up Fund Information: | | | |
| 23. 25. 25. 26. | Build-up fund account balances as of beginning of period | | 0 | |

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Affix Bar Code Above

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT For The Year Ended December 31, 20_ (To Be Filed by March 1)

| | | irect
miums | | Direct
Losses | | Direct
Cost Containment | Pe. | ntage olicies |
|--------------------|--|--|-----------------------------------|---|-----------------|----------------------------|--------------|-----------------|
| | 1
Written | 2
Earned | 3
Paid | 4
Incurred | 5
Paid | 6
Incurred | Chims Ma | 8
Occurrence |
| S | | S | S | S | S | S | O Uns Ma | % |
| Comm
2.1
2.2 | Does the rep
Can the dir | ect premium ear | ide D&O liabilit | y coverage as part | | | go policy be | Yes [] No |
| 2.1 | Does the rep
Can the dir
quantified or
If the answe | orting entity provect premium ear estimated? | ide D&O liabilit
ned for D&O l | y coverage as part | provided as par | | | Yes [] No |
| 2.1 | Does the rep
Can the dir
quantified or
If the answe | orting entity provect premium ear estimated? | ide D&O liabilit
ned for D&O l | y coverage as part
liability coverage
the quantified or | provided as par | p hiun arned | | |

| | Direct
Losses | D-6 and | Community | Percentage of
In Force Policies | |
|------------|-----------------------|---------|-----------------------|------------------------------------|------------|
| 1 | 2
Paid + Change in | 3 | 4
Pare + Change in | 5 | 6 |
| Paid | Case Reserves | Paid | Case Reserves | Claims Made | Occurrence |
| -,4777.111 | S | | 9 | 9/0 | |

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PPLEMENTAL SCHEDULE FOR REINSURANCE COUNTERPARTY REPORTING EXCEPTION— ASBESTOS AND POLLUTION CONTRACTS For The Year Ended December 31, 20 (\$000 Omitted) (To Be Filed by March 1)

| 24 | Percentage | More Than
90 Days
e Overdue
Col.
(19+20)/
Col. 22 | |
|---|------------|--|--|
| 23 | | Percentage
Overdue
Col. 21/
Col. 22 | |
| | 22 | Total
Due
Cols.
16+21 | |
| ses | | 21
Total
Overdue
Cols.
17+18+
19+20 | |
| Reinsurance Recoverable on Paid Losses
and Paid Loss Adjustment Expenses | | 18 19 20
30 to 90 91 to 120 Over 120
Days Days Days | |
| coverable s
s Adjustme | Overdue | 19
91 to 120
Days | |
| surance Re
id Paid Los | | 18
30 to 90
Days | |
| Rein | | 17
1 to 29
Days | |
| | 91 | Current | |
| vo. | | Amounts
Approved
as Other
Offset
Items | |
| Collateral | 11 | Trust Funds and Other Allowed Offset frems | |
| Original Reinsurer Collateral | 13 | Letters
Of
Credit | |
| Original | 12 | Funds | |
| | 11 | Cols 7+8
+9+10
Totals | |
| erables On | 01 | IBNR
Losses &
LAE | |
| Reinsurance Recoverables On | 6 | Unpaid
Case
Losses &
LAE | |
| Reinst | 90 | Paid | |
| | 7 | 7 - 1 | |
| Rein | ъ. | N of Reinsurer
Reported
Schedule F. Part 3 | |
| Retrong | | ID Number | |
| | 4 | Domiciliary
Jurisdiction | |
| Original Reinsurer | 3 | Name of
Reinsurer | |
| Origina | 51 | NAIC
Company
Code | |
| | - | ID G | |

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CREDIT INSURANCE EXPERIENCE EXHIBIT
For the Year Ended December 31, 2018
(To Be Filed by April 1)

| Of The | | Ins e Company |
|------------------------------------|-------------------|----------------------|
| Address (City, State and Zip Code) | | |
| NAIC Group Code | NAIC Company Code | Employer's n. Number |
| Direct Business in the S | tate of | |

Does the company have credit insurance in this

OF THE

PART 1A - CREDIT LIFE INSURANCE Monthly Outstanding Balance (MOB)

PART 1B - CREDIT LIFE INSURANCE Single Premium (SP) and Total

| | _ | | | | | 0 | |
|--|--|---|---|---|---|---|---|
| | Open | Open-End | Close | Closed-End | 4 | ā | 277 |
| | 1 | 2 | 3 | 4 | - iS | 2 | 3
Total |
| | Single | Joint | Single | Joint | SP | SP | SP + MOB |
| Earned Premiums: | | | | | | | |
| 1.1 Gross written premiun | (Address (Ad | | | *************************************** | *************************************** | *************************************** | *************************************** |
| | *************************************** | *************************************** | *************************************** | | *************************************** | | *************************************** |
| | | | | *************************************** | *************************************** | | |
| 1.4 Premium reserves, start of period | | | | | | | |
| 2,000 | | | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | | |
| | | | | | | | *************************************** |
| Incurred Claims: | | | | | | | |
| 2.1 Claims paid | 4 | | | | | | |
| 2.2 Unreported claim reserve, start of period | | | | | | | |
| 2.3 Unreported claim reserve, end of period | | | | | | | |
| 2.4 Claim reserves, start of period | | 1 | | | | | |
| _ | · | | *************************************** | ***************** | *************************************** | | |
| 2.6 Incurred claims (Lines 2.1-2.2+2.3-2.4+2.5) | |) (| | | *************************************** | | *************************************** |
| Incurred Compensation: | | | | | | | |
| 3.1 Commissions and service fees incurred | | | | *************************************** | *************************************** | *************************************** | *************************************** |
| 0.7 | | | | 1 | | | |
| | % | | % | % | % | 9% | % |
| 3.5 Other incurred compensation percentage (Lines 3.2/1.6) | % | % | | % | 9/6 | % | % |
| Loss Percentage: | | , | | | | | |
| 4.1 Actual loss percentage (Lines 2.6/1.6) | % | % | | % | % | % | % |
| 4.2 Loss percentage at prima facie rates (Lines 2.6/1.7) | % | % | % | % | % | 9/0 | % |
| Mean insurance in force | | | | | | | |
| 1 | | | | | | | |
| Losses per \$1,000 mean insurance in force [(1,000 x Line 2.6)/Line 5] | | *************************************** | | | * X | | |
| | | | | | 4 | | |

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PART 2A - CREDIT ACCIDENT AND HEALTH INSURANCE Single Premium—Closed-End

| | 1 | 2 | 3 | 4 | 5 | 9 | 7 |
|--|---|---|---|---------------------|---|---|-------|
| | 7 Day | 14 Day | 14 Day | 30 Day | 30 Day | Other | |
| Donney Decominant | Retro | Retro | Non-Retro | Retro | Non-Retro | (a) | Total |
| 1. Earned Fremiums: | | | | | | | |
| 1.1 Gross written premiu s | | *************************************** | *************************************** | Ottofficoppingment, | *************************************** | *************************************** | |
| 1.2 Refunds on terminatio | *************************************** | | | | | | |
| | | | | | | | |
| 1.4 Premium reserves, start of period | | | | | | | |
| 1.5 Premium reserves, end of period | | | | | | | |
| 1.0 Actual carned premiums (Lines 1.3+1.4-1.5) | | | | | | | |
| | | | | | | | |
| 2. Incurred Claims: | | | | | | | |
| 2.1 Claims paid | | | | | | | |
| 2.2 Unrenorted claim reserve start of neriod | 4 | | | | | | |
| Unreported claim reserve, and of period | | | | | | | |
| Claim reserves start of neriod | | | | | | | |
| Claim recenter and of nariod | | | | | | | |
| Incurred claims (Lines 2.1.2.24.2.3.) | | | *************************************** | | | | |
| The meaning of the section of the se | | • | | | | | |
| 3. Incurred Compensation: | | | | | | | |
| 2.1 Commissions and contina face incurred | | | | | | | |
| 2.1 Other incurred companies for | | | *************************************** | | | | |
| | | | | | | | |
| | % | | % | % | % | % | % |
| 3.5 Other incurred compensation percentage (Lines 3.2/1.6) | % | | % | % | % | % | 9/0 |
| | | | | | | | |
| 4. Loss Percentage: | | | | | | | |
| 4.1 Actual loss percentage (Lines 2.6/1.6) | % | % | | % | % | % | % |
| 4.2 Loss percentage at prima facie rates (Lines 2.6/1.7) | % | % | 0 | % | % | % | 9% |
| | | | | - | | | |

⁽a) Provide a description of "other" coverages (including their percent of Line 1.6, Column 6):

OF THE

PART 2B - CREDIT ACCIDENT AND HEALTH INSURANCE Monthly Outstanding Balance—Closed-End

| | 7 Day | 14 Day | 14 Day | 30 Day | 30 Day | Other | |
|---|---|--------|---|--------|---|---|---|
| | Retro | Retro | Non-Retro | Retro | Non-Retro | (a) | Total |
| Earned Premiums: | | | | | | | |
| Grace unition areanii | | | | | | | |
| 1.2 Refunds on terminatio | | | | | *************************************** | | |
| 1.3 Net written premiums (Lines-1.1-1) | *************************************** | | | | *************************************** | *************************************** | *************************************** |
| | *************************************** | | *************************************** | | | *************************************** | |
| | | | | | | | |
| 1.6 Actual earned premiums (Lines 1.3+1.4-1.5) | | | | | | | |
| Tailled pellitation at plant label tables are supplied to the | | | | | | | |
| Incurred Claims: | | | | | | | |
| | | | | | | | |
| _ | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| _ | | | | | | *************************************** | |
| | | | | | | | |
| 2.6 Incurred claims (Lines 2.1-2.2+2.3-2.4+2.5) | f | | | | | | |
| Incurred Compensation: | | • | | | | | |
| | | | | | | | |
| - | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | | | |
| | > | | | | | | |
| | | | | | | | * |
| 3.4 Commissions/service fee percentage (Lines 3.1/1.3) | % | | % | % | % | 0/0 | % |
| 3.5 Other incurred compensation percentage (Lines 3.2/1.6) | % | 0 | | % | % | % | % |
| Loss Percentage: | | | | | | | |
| | | | | | | | |
| | % | 8 | | % | % | % | % |
| 4.2 Loss percentage at prima facie rates (Lines 2.0/1./) | 0/ | 0/ | 07. | 0/ | 0/ | 0/ | 0.7 |

⁽a) Provide a description of "other" coverages (including their percent of Line 1.6, Column 6);

PART 2C - CREDIT ACCIDENT AND HEALTH INSURANCE Monthly Outstanding Balance - Open-End

PART 2D - CREDIT ACCIDENT AND HEALTH INSURANCE

| <i>*</i> C | 1
7 Day
Retro | 2
14 Day
Retro | 3
14 Day
Non-Retro | 4
30 Day
Retro | 5
30 Day
Non-Retro | 6
Other
(a) | 7
Total | 1
All Other
(b) | 2
Total -Parts 2A,
2B, 2C and 2D | |
|--|---|---|---|---|--------------------------|---|---|--|---|--|
| Earned Premiums: | | | | | | | | | | |
| 1.1 Gross written premiums | | | | | | | *************************************** | *************************************** | | |
| 1.2 Refunds on terminations | *************************************** | *************************************** | | *************************************** | | | *************************************** | *************************************** | *************************************** | |
| 1.3 Net written premiums (Lines 1.1-1.2) | | *************************************** | | *************************************** | | | | *************************************** | | |
| 1.4 Premium reserves, start of period | | | | | - | | | | | |
| 1.5 Premium reserves, end of period | | | | | | | | | *************************************** | |
| 1.6 Actual earned premiums (Lines 1.3+1.4-1.5) | | *************************************** | | | | | | *************************************** | | |
| 1./ Earned premiums at prima facie rates | | | | | | | | | | |
| Incurred Claims: | | 4 | | | | | | | | |
| | | | | | | | | | | |
| 2.1 Claims paid | *************************************** | | | *************************************** | | *************************************** | | *************************************** | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | | | | *************************************** | |
| 2.3 Unreported claim reserve, end of period | · · · · · · · · · · · · · · · · · · · | | | | | *************************************** | *************************************** | *************************************** | *************************************** | |
| 2.4 Claim reserves, start of period | | | | | | | | | | |
| 2.5 Claim reserves, end of period | | | | | | | | | | |
| 2.6 Incurred claims (Lines 2.1-2.2+2.5-2.4+2.5) | | | (| | | | | | | |
| Incurred Compensation: | | | | - | | | | | | |
| | | | | 4 | | | | | | |
| 5.1 Commissions and service lees incurred | | *************************************** | | | - | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| 5.2 Office Incurred compensation | *************************************** | ************** | *************************************** | | | *************************************** | *************************************** | THE PARTY OF THE P | Assessment the second seconds. | |
| 2.4 Commissions/commiss for accompany (Lines 5.11.5.2) | 70 | 70 | 70 | 70 | | 70 | 7/0 | 70 | 70 | |
| | 70 | 0/ | 0/ | 0,70 | 0/0 | %0 | 7/0 | 70 | 0/70 | |
| 5.5 Other incurred compensation percentage (Lines 5.2/1.0) | 0./ | 0/ | 0./ | 0/ | | 0 / | 0/ | 0./ | 0./ | |
| Loss Percentage: | | | | • | | | | | | |
| 4.1 Actual loss percentage (Lines 2.6/1.6) | % | % | % | % | | % | % | % | % | |
| 4.2 Loss perculage at pinna lacre tance (Lines Lot 1.1) | | W | | | 1 | | 4 | | 0/ | |

7

(b) Provide a description of "other" coverages (including their percent of Line 1.6, Column 1):

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Provide a description of "other" coverages (including their percent of Line 1.6, Column 6): (a)

PART 3A - CREDIT UNEMPLOYMENT INSURANCE

PART 3B - CREDIT UNEMPLOYMENT INSURANCE

| | Earned Premiums: 1.1 Gross written peniu 1.2 Refunds on terminati s | Incurred Claims: 2.1 Claims paid | sation: ss and service fees incurred | Loss Percentage: 4.1 Actual loss percentage (Lines 2.6/1.6) |
|------------------------------|---|-----------------------------------|---------------------------------------|---|
| 1
30 Day
Retro-SP | | | 96 | % |
| 2
30 Day
Non-Retro-SP | | | | % |
| 3
30 Day
Retro-MOB | | | 96 | |
| 1
30 Day
Non-Retro-MOB | | | 96 | % |
| 2
Other
(a) | | | 96 | % |
| 3
Total | | | 96 | % |

⁽a) Provide a description of "other" coverages (including their percent of Line 1.6, Column 2):

PART 4 - CREDIT PROPERTY INSURANCE

| | I
Creditor Placed
Home-Single
Interest | 2
Creditor Placed
Home-Dual
Interest | 5
Creditor Placed
Auto-Single
Interest | Creditor Placed Auto- Dual Interest | Personal
Property-Single
Interest | o
Personal
Property-Dual
Interest | Other (a) |
|--|---|---|---|---|---|--|-----------|
| Earned Premiums: | | | | | | | |
| 1.1 Gross written premiu s | *************************************** | | | *************************************** | | | |
| Net written premiums (L. | | | | | | | |
| 1.4 Premium reserves, start of period | | | | | *************************************** | *************************************** | |
| 1000 | | | | | | | |
| 1.7 Earned premiums at prima facie rates | | | | | | | |
| Incurred Claims: | | | | | | | |
| 2.1 Claims paid | • | | | | | | |
| | | *************************************** | *************************************** | *************************************** | *************************************** | *************************************** | |
| | | | | | | | |
| 2.4 Incurred claims (Lines 2.1-2.2+2.3) | | | | | | *************************************** | |
| Incurred Compensation: | | | | | | | |
| | | | | | | *************************************** | |
| | | | | | | | |
| 3.3 Total incurred compensation (Lines 3.1+3.2) | % | | % | % | % | % | % |
| | % | | % | % | % | % | % |
| Loss Percentage: | |) | | | | | |
| 4.1 Actual loss percentage (Lines 2.4/1.6) | %6 | | ** | % | % | 0/6 | |
| 4.2 Loss percentage at prima facie rates (Lines 2.4/1./) | | W | | | 02, | | 0/2 |
| Incurred Loss Adjustment Expense: | | | 1 | | | | |
| | | | * | | | | |
| 5.2 Adjusting and other expenses incurred | | *************************************** | | | | *************************************** | |

⁽a) Provide a description of "other" coverages (including their percent of Line 1.6, Column 7):

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OF THE

PART 5 - OTHER CREDIT INSURANCE

| | | Credit Family Leave | Personal GAP | All Other (a) |
|---|--|---|---|---|
| 2 | Earned Fremiums: | | | |
| | 1.1 Gross writt emitte and an armonic control of the control of th | | *************************************** | |
| | Net written premit s (Lines I.) 1.2 | | | |
| | 14 Premium reserves, 10f per | *************************************** | *************************************** | *************************************** |
| | | | | |
| | 1.7 Earned premiums at prima factor es | | | |
| 5 | Incurred Claims: | | | |
| | 2.1 Claims paid | | | |
| | | *************************************** | *************************************** | *************************************** |
| | | | *************************************** | |
| | 2.4 Incurred claims (Lines 2.1 – 2.2 + 2.3) | | *************************************** | *************************************** |
| 3 | Incurred Compensation: | | | |
| | 3.1 Commissions and service fees incurred | | | |
| | -519.0 | | *************************************** | |
| | | | | |
| | 3.4 Commissions/service fee percentage (Lines 3.1/1.3) | 96 | % | % |
| | Consequence of the second seco | | | |
| 4 | Loss Percentage: | | | |
| | 4.1 Actual loss percentage (Lines 2.4/1.6) | % | % | % |
| | | | | |

(a) Provide a description of "other" coverages (including their percent of Line 1.6, Column 3):

PART 6 - NATIONWIDE CREDIT PROPERTY PREMIUMS AND UNDERWRITING EXPENSES

| | ,,, | l
Creditor Placed
Home | 2
Creditor Placed
Auto | 3
Personal
Property | 4
Other
(a) |
|-------------------------------|-----|------------------------------|---|---------------------------|-------------------|
| Premiums: | | | | | |
| Direct writ | | | *************************************** | | |
| 2 Direct came premi s | - | | | | |
| Underwriting expenses in red: | | | | | |
| - | _ | | | | |
| | | | | | |
| | - | | | | |
| 2.4 General expenses incurred | | | *************************************** | | |

(a) Provide a description of "other" coverages (including the perce of Line 1. Column 4);

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LONG-TERM CARE EXPERIENCE REPORTING FORM I ACTUAL VS. EXPECTED CLAIMS AND PERSISTENCY REPORTING YEAR 20. (To Be Filed By April 1)

NAIC Group Code

NAIC Company Code

Affix Bar Code Above

| | Premit Luims | Valuation Expected
Incurred Claims | Actual to Expected
Incurred Claims | Open Claim
Count | New Claim
Count | Lives in Force
End of Year | 8
Expected Lives
In Force End of Year | Actual to Expected
Lives In Force |
|-----------------------------|--|--|---------------------------------------|--|--|--|--|--|
| Individual | | | | | | 3 | | |
| Comprehensive: | | | | | | | | |
| 2. Prior. |) | 2 | | | | | | |
| 3. 2nd Prior | | | | | | | | |
| 4. Std Prior | | | | | | | The state of the s | |
| A Sibbios | | | | | | | | |
| 7. Form Incertion-to-Date | | | | | | | | |
| 8. Total Inception-to-Date | | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| Institutional Only: | | | | | | | | |
| 9, Current | | | | | | | | |
| O. Prior | | | | | | | | |
| L. Znd Phot | | The second secon | | | | | | |
| 2. 37d F10f | | | - | THE RESERVE THE PERSON NAMED IN COLUMN 2 I | | | | |
| 3. 4IB COOF. | | | | | | | | |
| 4. 200 LT0T. | | | | | | | | |
| 5. Form Inception-to-Late | | 223 | | 255 | 25.2 | 333 | 200 | 200 |
| b, total inception-to-take | | YYY | | AAA | YYY | AAA | YYY | AAA |
| ristitutional Only: | | | | | | | | |
| | | 7 | | | | | | |
| 8. Prior | | | | | | The second secon | | |
| 9. 200 Prior | | | | | | | - | |
| 0, 3nd Prior | | | - | | | | | |
| 1. 46 Pales | | | | | | | | |
| 3 Form Incession-to-Date | | | | | | | | |
| 24. Total Inception-to-Date | | XXX | XXX | XXXX | XXX | XXX | XXX | XXX |
| Group | | | | | | | | |
| Comprehensive: | | | | 1 | | | | |
| I. Current | | | | | | | | |
| 2. Prior | | | | | | | | |
| S. 48d PROF | | | | | | | | |
| 4. Marring | | | | | | | | |
| 2. 4th PTKF | | | | | | | | |
| D. Nh Prior | | | | | | | | |
| 7. Porm inception-to-Date | | 222 | 222 | AAA. | The same of the sa | 222 | 222 | 222 |
| o. tour inception potate | | VVV | VVV | 227 | | vvv | vvv | 777 |
| nona Only. | | | | > | | | | |
| S. Current | | | | | | | | |
| 1 Seel Prices | | | | | | | | |
| 2 ded Prior | | | | | | | | |
| Ath Peice | | | | | | | | |
| 4 Sch Prior | | | | | | | | |
| 5. Form Inception-to-Date | | | | | | | | |
| 6. Total Incention-to-Date | | XXX | XXX | XXX | | A XXX | XXX | XXX |
| Non-Institutional Only: | | | | | | | | |
| 7. Current | | | | | 4 | | | |
| | | | | | | | | |
| | | | | | | | | |
| 50. 3rd Prior | | | | |) | | | |
| | | | | | | | | |
| | | | | | | | | |
| 23. Form Inception-to-Date | | The state of the s | - International Control | the second secon | - International Control of the Contr | | | |
| 24. Total Inception-to-Date | | XXX | XXX | XXX | XXX | N N | XXX | XXX |
| Summary | | | | | | | All I | |
| 1. Form Inception-to-Date | | | | | | | | and the first of the second of |
| 2. Total Inception-to-Date | HEROTE HELVIN MARKET PARTIES AND THE PARTY OF THE PARTY O | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| | | | | | | | The second second | |

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SUPPLEMENT FOR THE YEAR

OF THE

LONG-TERM CARE EXPERIENCE REPORTING FORM 2 EXPERIENCE RESERVE VS. REPORTING YEAR 20 (To Be Filed By April 1)

Affix Bar Code Above

NAIC Group Code

NAIC Company Code

| | - | | m | 4 | s | 9 | , | × | 6 | 10 | = | 12 | 13 | 14 | 15 |
|-------------------------------|---|---|---|---|---|---|---------------------------------------|--|---|---|---|--|---|---|---|
| Reporting | Policy | d Year | Last Year | Eamed | Incurred | Loss | Annual Net/
Annual
Gross | Current
Year Net | In Force
Count
Beginning | New Issues
Current | In Force
Count
End of | Persistency | Experience
Policy
Recorder | Reported
Policy
Reserves | Experience/
Reported
Retion |
| A. Individual | | | 6 | | | 0 | | | | | | | | 200 | 2000 |
| 1. Current | | *************************************** | | | *************************************** | *************************************** | | territorium to the total to the | *************************************** | *************************************** | *************************************** | *************************************** | *************************************** | *CONTRACTOR OF THE PERSON | *************************************** |
| 2. Prior | | | | | | | | | | | | | | | |
| Current | | | | | | | | | | | | | | | |
| 2 Prior | | | 7 | | | | | | | | | | | | |
| 3. 2nd Prior | *************************************** | | / | | | 1 | | *************************************** | | | *************************************** | | | | |
| I, Current | | | | • | | | | | | | | | | | |
| 2. Prior | *************************************** | *************************************** | | | \(\) | | | | (************************************** | | | | | | |
| 111 | | | | | | | | | | | | | | | |
| b. Group | | | | Ì | | | | | | | | | | | |
| I, Current | *************************************** | *************************************** | *************************************** | *************************************** | - | | | + | *************************************** | *************************************** | | *************************************** | *************************************** | *************************************** | *************************************** |
| 2. Prior | | | | | | | | | | | | | | | |
| 3. 2nd Prior | *************************************** | *************************************** | *************************************** |) | | | · · · · · · · · · · · · · · · · · · · | restreet extension. | *************************************** | *************************************** | *************************************** | *************************************** | *************************************** | 44.07.40.40.40.40.40.40 | *************************************** |
| | | | | | | | | 4 | | | | | | | |
| l. Current | *************************************** | *************************************** | | | | | | | (00000000000000000000000000000000000000 | | | *************************************** | | *************************************** | |
| Z. P'flor | | | | | | | | | | | | | | | |
| 3. 2nd Prior | *************************************** | | | | | - | | 1 | | | *************************************** | *************************************** | | | |
| 1 Current | VGCCARRIAGED | ATTERNOOF ATTERNATOR | March March Cabrilla | CONTRACTOR MANAGEMENT | 10000000000000000000000000000000000000 | SOMEWON THE | | | 4 | MANAGEMENT OF STREET | | Charles and the Charles and th | Consequential Contraction | ANGEL CONTROLL OF THE PARTY OF | ACCUPANT SURVEY |
| 2. Prior | | | | | | | | | | | | | - | | |
| 3. 2nd Prior | | | | | | | | | 1 | 4 | | | | | |
| SUMMARY | | | | | | | | 1 | | No. | | | | | |
| 1. Total Current-Individual | I | | | | | XXX | xxx | × | / / / / / / / / / / / / / / / / / / / | | *************************************** | XXX | *************************************** | *************************************** | XXX |
| 2. Total Prior-Individual | 0.0000000000000000000000000000000000000 | (0))((0))((0))((0)) | | | | XXX | XXX | | | | *************************************** | XXX | | | XXX |
| 3. Total 2nd Prior-Individual | lai | | | | | XXX | XXX | Y | | | *************************************** | XXX | - | | XXX |
| 4. Total Current-Group | *************************************** | | | *************************************** | and desired desired to | XXX | XXX | differential to the same | , | | | XXX | | | XXX |
| 5. Total Prior-Group | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | *************************************** | THE PERSON NAMED IN COLUMN 1 | | | XXX | XXX | *************************************** | 5 | | | XXX | *************************************** | *************************************** | XXX |
| 6. Total 2nd Prior-Group | | | | | | XXX | XXX | | | | | XXX | | - | XXX |
| | | | | | | | | | , | 1 | 4 | | | | |

LONG-TERM CARE EXPERIENCE REPORTING FORM 3 LTC EXPERIENCE DEVELOPMENT (\$000 OMITTED) REPORTING YEAR 20 (To Be Filed By April 1)

| XXX |
|-----------------|
| XXX |
| XXX XXX XXX XXX |
| |
| |
| 222 |

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LONG-TERM CARE EXPERIENCE REPORTING FORM 3 (continued) LTC EXPERIENCE DEVELOPMENT (\$000 OMITTED)

| Group 1. Prior | 111 | 2012 | STATISTICS. | 1000 | No. of Concession, Name of Street, or other Persons, Name of Street, or ot | Notice and a second | | |
|-----------------|---|--|---|--|--|---|---|---|
| | | | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 |
| or | | | | | | | | |
| | | PAR PAR | T 1 - Total (Direct a | PART 1 - Total (Direct and Transferred) Amount Paid Policyholders | ant Paid Policyhold | 3rs | | |
| | ······································ | | | *************************************** | | *************************************** | | |
| 2011 | | \$ | *************************************** | *************************************** | | | *************************************** | |
| 2012 | xxx | | | *************************************** | *************************************** | *************************************** | *************************************** | |
| 2013 | XXX | XXX | | | | | *************************************** | |
| 2014 | XXX | XXX | XXX | *************************************** | | | | |
| 2015 | XXX | XXX | xxx | XXX | | *************************************** | *************************************** | |
| 2016 | XXX | XXX | XXX | XXX | XXX | | | |
| 2017 | XXX | × | XXX | XXX | XXX | XXX | | |
| 810 | XXX | XXX | xxx | XXX | XXX | XXX | XXX | |
| | PAR | PART 2 - Sum of Toll An | 3 | cyholders and Claim Liability and Reserve Outstanding at End of Year | ity and Reserve Ou | standing at End of Y | ear | |
| Prior | | 7 | | | | | | |
| _ | | | | 4 | | | | |
| 2012 | XXX | | \ | | | | | |
| 2013 | XXX | XXX | *************************************** | | *************************************** | | | *************************************** |
| 2014 | XXX | xxx | XXX | | | | | |
| 2015 | XXX | XXX | XXX | XXX | | | | |
| 2016 | XXX | XXX | XXX | N. A. | XXX | | | |
| 2017 | XXX | XXX | XXX | | XXX | XXX | | |
| 2018 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| | | | 1 | ed R | grve | | | |
| Prior | | | | 1 | | *************************************** | *************************************** | |
| _ | *************************************** | | *************************************** | *************************************** | | | *************************************** | |
| 2012 | XXX | *************************************** | *************************************** | | ····· | | *************************************** | *************************************** |
| 2013 | XXX | XXX | | | | ······• | *************************************** | |
| 2014 | XXX | XXX | XXX | | | > | *************************************** | |
| 2015 | XXX | XXX | XXX | XXX | | ····· | *************************************** | |
| 2016 | XXX | XXX | XXX | XXX | × × | ······ | | |
| 2017 | XXX | XXX | XXX | XXX | XXX | | | |
| 810 | XXX | XXX | XXX | XXX | xxx | xx | XXX | |
| | | Control Contro | PART 4 - P | PART 4 - Present Value of Incurred Claims | ed Claims | 4 | | |
| Prior | | | | | | | *************************************** | |
| 2011 | | | | | | | | |
| 2012 | XXX | | *************************************** | | | | | |
| 2013 | XXX | XXX | | | | | | |
| 014 | XXX | XXX | XXX | | | | 2 | |
| 2015 | XXX | XXX | XXX | XXX | | > | | |
| 2016 | XXX | XXX | XXX | XXX | XXX | | | |
| 2017 | XXX | XXX | XXX | XXX | XXX | XXX | | |
| 0.10 | | | | 100000 | | | | |

OF THE

LONG-TERM CARE EXPERIENCE REPORTING FORM 3 (continued) LTC EXPERIENCE DEVELOPMENT (\$000 OMITTED)

| 8
2018 | | | | | | | | *************************************** | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | *************************************** | | | | | | | | | | | *************************************** | | | | | | *************************************** | *************************************** | | | | |
|---------------|---|---|------------------|---|-----|---------|-----|---|-----|---|---|---|---|------|-----|-----|-----|-----|-----------------------|---|---|-----|--|---|-----|---------|---|-------|------|---|---|---|--|-----|--------------------|
| 2017 | | | | *************************************** | | | | *************************************** | XXX | ear | *************************************** | | *************************************** | | | | | XXX | | *************************************** | | | *************************************** | | | 222 | VVV | | | | , | | ······································ | | |
| 6
2016 | | ers | | | | | | XXX | XXX | itstanding at End of Y | *************************************** | *************************************** | | | | | XXX | XXX | | | | | ************************************* | | | XXX. | | | | | , | | | | XXX |
| 5 2015 | *************************************** | ount Paid Policyhold | | | | | XXX | XXX | XXX | ility and Reserve Ou | | *************************************** | *************************************** | | | XXX | XXX | XXX | | | | | | | | XXX | red Claims | | | *************************************** | | | | XXX | XXX |
| 2014 | | PART 1 - Total (Direct and Transferred) Amount Paid Policyholders | | *************************************** | | XXX | XXX | XXX | XXX | Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year | | | | | XXX | XXX | | XX. | PART 3 - Transfe ed R | | | | | XXX | XXX | XXX | PART 4 - Present Value of Incurred Claims | | | | *************************************** | *************************************** | XXX | XXX | XXX |
| 3
2013 | | RT 1 - Total (Direct a | | | XXX | xxx | XXX | XXX | | d Amou Paid Policyho | | | - | XXX | XXX | xxx | XXX | XXX | PART | | *************************************** | | XXX | XXX | XXX | XXX | PART 4 - P | | | | *************************************** | XXX | XXX | XXX | XXX |
| 2012 | | PA | | *** | xxx | XXX | XXX | X | | PART 2 - Sum of Tent A | | | XXX | XXX | XXX | XXX | XXX | XXX | | | | XXX | XXX | XXX | XXX | XXX | VVV | | | | XXX | XXX | XXX | XXX | XXX |
| | | | | XXX | XXX | xxx | XXX | XXX | XXX | PAR | | | YYY | XXX | XXX | XXX | XXX | XXX | | | 222 | XXX | XXX | xxx | XXX | XXX | VVV | | | XXX | XXX | XXX | XXX | XXX | XXX |
| Incurred Year | C. Summary | 1 | 1. Prior 2. 2011 | 2012 | | 6. 2015 | | 8. 2017 | | | Prior | _ | | 2014 | | | | | | 1. Prior | 5106 | | | | | 8. 2017 | | Prior | 2011 | 2012 | | | 6. 2015 | | 8. 2017
9. 2018 |

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NAIC Group Code ___

Summary

1. Total Inception-to-Date

Affix Bar Code Above

NAIC Company Code _

LONG-TERM CARE EXPERIENCE REPORTING FORM 4 LIFE AND ANNUITY PRODUCTS WITH LTC ACCELERATED BENEFITS REPORTING YEAR 20_ (To Be Filed By April 1)

| | l
Number of | 2
Number of | 3 | LTC Accelerated | 3 |
|---------------|--|----------------|---|-----------------|-------------|
| Incurred Year | Policies In Force | Certificates | Death Claims | Claims | ıl Reserves |
| A. Individual | 2 | | | | |
| 1. Current | >************************************* | | | | |
| 2. Prior | | | *************************************** | | |
| 3. 2nd Prior | | | | | |
| B. Group | | | | 4 | |
| 1. Current | | | | A | |

Total Reserves are reserves for these particular life products with LTC accelerated benefit Incurred claims are only the policies that claims have been triggered due to accelerate



LONG-TERM CARE EXPERIENCE REPORTING FORM 5 EXPERIENCE IN THE STATE OF REPORTING YEAR 20 (To Be Filed By April 1)

NAIC Group Code_

NAIC Company Code

| | | I
Earned
Premiums | 2
Incurred | In Fo e Count | ives In Force
End of Year |
|----|---|-------------------------|-----------------------|---------------|------------------------------|
| 1. | Individual | | | | |
| 2. | Group | | | | |
| 3. | Total | | | | |
| 4. | Actual total reported experience through prior year | | | ХX | xxx |
| 5. | Actual total reported experience through statement year | | | XXX | xxx |

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ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR United States Policy Forms Direct Blastices Only For The Year Ended December 31, 2018 (To Be Filed By April 1)

Affix Bar Code Above

NAIC Company Code...

| | - 1 | 4 | n | ٠ | Number of Policies | Number of | 8 |
|--------------------------------------|---|---|---|---|---|---|---|
| | miums | Incurred
Claims Amount | Change in
Contract Reserves | Loss Ratio
(2+3)/1 | or Certificates
as of Dec. 31 | Covered Lives
as of Dec. 31 | Member
Months |
| A. INDIVIDUAL BUSINESS | | | | | | | |
| 1. Comprehensive Major Medical | × | | 9 | | | | |
| 1.1 With Contract Reserves | | | | | | | |
| 1.3 Subtotal | | | | | | | |
| 2. Short-Term Medical | | 4 | | | | | |
| 2.1 With Contract Reserves | | | | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | *************************************** | |
| 3. Other Medical (Non-Comprehensive) | | | | | | | |
| | | | | | | | |
| 3.2 Without Contract Reserves | | | | | | | |
| 3.3 Subtotal | | | | | | | |
| 4. Specified/Named Disease | | | | | | | |
| 4.1 With Contract Reserves | | | | | | | |
| 4.2 Without Contract Reserves | | | | X | | | |
| 4.3 Subtotal | | | | | | | |
| 5. Limited Benefit | | | | | | | |
| 5.1 With Contract Reserves | | | | | | | |
| 5.2 Without Contract Reserves | *************************************** | | *************************************** | ······ | | | *************************************** |
| 5.3 Subtotal | | | | | | | |
| 6. Student | | | | - | 4 | | |
| 6.1 With Contract Reserves | | | | | | | |
| 6.2 Without Contract Reserves | *************************************** | | *************************************** | | | | |
| 6.3 Subtotal | | | | | | 4 | |
| 7. Accident Only or AD&D | | | | | | • | ēr s |
| 7.1 With Contract Reserves | *************************************** | *************************************** | *************************************** | *************************************** | | | *************************************** |
| 7.2 Without Contract Reserves | | | | | | | |
| - 1 | | | | | > | | |
| 8. Disability Income - Short-Term | | | | | | | |
| 8.1 With Contract Reserves | | *************************************** | *************************************** | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | *************************************** | *************************************** | *************************************** | | *************************************** | | *************************************** |
| 8.3 Subtotal | | | | | | | |

OF THE

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

| | Premiums | Incurred | S
Change in | Loss Ratio | Number of Policies
or Certificates | Number of
Covered Lives | Member |
|---|---|--|---|--|---|---|--|
| П | Earned | Claims Amount | Contract Reserves | (2+3)/1 | as of Dec. 31 | as of Dec. 31 | Months |
| - 1 | | | | | | | |
| 9. Disability Income - Long. m | | | | | | | |
| | | | *************************************** | *************************************** | | | 0.000 |
| | - | | | | | | |
| 9.3 Subtotal | | | | | | | |
| 10. Long-Term Care | | | | | | | |
| 10.1 With Contract Reserves | 611111111111111111111111111111111111111 | | | *************************************** | *************************************** | *************************************** | *************************************** |
| 10.2 Without Contract Reserves | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | | | | | |
| 10.3 Subtotal | | (| | | | | |
| 11. Medicare Supplement (Medigap) | | | 72 | | | | J1 |
| 11.1 With Contract Reserves | | | | *************************************** | | | *************************************** |
| 11.2 Without Contract Reserves | | | | | | | |
| 11.3 Subtotal | | | 4 | | | | |
| 12, Dental | | | | | | | |
| 12.1 With Contract Reserves | 30000000000000000000000000000000000000 | | *************************************** | . Ojimiji Ur | 25003801100380110030003003003003003003003003003003003 | (-) (((((((((((((((((((((((((((((((((((| process of the state of the sta |
| 12.2 Without Contract Reserves | | | | | | | |
| 12.3 Subtotal | | | 4 | | | | |
| 13. State Children's Health Insurance Program | | | | | | | |
| 13.1 With Contract Reserves | *************************************** | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | *************************************** | *************************************** | | *************************************** |
| 13.2 Without Contract Reserves | *************************************** | *************************************** | | *************************************** | | *************************************** | *************************************** |
| 13.3 Subtotal | | | | - | | | |
| 14. Medicare | | | | | | | |
| 14.1 With Contract Reserves | *************************************** | | Summer Summer Summer | on American manuscript | | *************************************** | |
| 14.2 Without Contract Reserves | *************************************** | | | | 714001111111111111111111111111111111111 | | |
| 14.3 Subtotal | | | | | 4 | | |
| 15. Medicaid | | | | | | 8 | |
| 15.1 With Contract Reserves | | | | dimension of the same of the s | | | |
| 15.2 Without Contract Reserves | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | |
| 15.3 Subtotal | | AMERICAN TO A STREET OF THE ST | | | | | |
| 16. Medicare Part D - Stand-Alone | | | | 4 | | | |
| 16.1 With Contract Reserves | | | |) | mine mineral factories | | *************************************** |
| 16.2 Without Contract Reserves | *************************************** | *************************************** | direction of the contraction of | *************************************** | Manual January January | | *************************************** |
| | | | | | | 4 | |
| 17. Other Individual Business | | | | | | | 25 |
| 17.1 With Contract Reserves | | | | | | | |
| 17.2 Without Contract Reserves | | | | | | | |
| 17.3 Subtotal | | | | | | | |
| 18. Total Individual Business | | | | | | | |
| 18.1 With Contract Reserves | | | | | *************************************** | | |
| 18.2 Without Contract Reserves | | | | | | | |
| | | | | | | - Control | |

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

| B. GROUP BUSINESS Fairned Claims Amount Contract Reserves (2+3) 1. Single Employer 1.1 Small Employer 1.2 Other Employer 1.2 Other Employer 1.3 Single Employer Assns and Trusts 2. Multiple Employer Assns and Trusts 3. Other Associations and Descritoranty Trusts 3. Other Associations and Descritoranty Trusts 4. Comprehensive Major Medical Subtoral 4. Comprehensive Major Medical Subtoral 4. Comprehensive Major Medical Subtoral 4. Accident Only or AD&D. 4. Accident Comprehensive Major Medical Subtoral 4. Accident Comprehensive Major Medical Subtoral 4. Accident Comprehensive Major Medical Subtoral 4. Accident Comprehensive Major Medical Medic | (2+3)/1 as of Dec. 31 | 31 as of Dec. 31 | Months |
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| Single Employer 1.1 Shall Employer 1.2 Other Employer Subtotal 1.3 Single Employer Subtotal 1.4 Shall Employer Subtotal 1.5 Single Employer Subtotal 1.6 Multiple Employer Subtotal 1.7 Other Associations and Discretionary Trusts. 1.8 Other Comprehensive Major Medical 1.9 Specified Named Discuss 1.0 Other Comprehensive Major Medical 1.0 Other Comprehensive Major Medical 1.0 Other Medical Employer About 1.0 Subtility Income – Stort-term 1.1 Single Employers Health Benefits 1.2 Other Group Employees Health Benefits Plan 1.2 Other Group Employees Health Benefits 1.3 Single Employees Health Benefits 1.4 Subtility Income – Stand-Alone 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Lose Excess Lose Subty. 1.5 Single Lose Excess Lose Subty. 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Lose Excess Lose Subty. 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Lose Excess Lose Subty. 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.5 Single Employees Health Benefits 1.6 Single Employees Health Benefits 1.7 Single Employees Health Benefits 1.8 Single Employees Health Ben | | | |
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| comprehensive/Major Medical Subtotal Specified/Numed Disease Limited Benefit Student Accident Only or AD&D Student Disability Income – Long-Term Student Disability Income – Long-term Student Disability Income – Long-term Student Disability Income – Long-term Student Disability Income – Long-term Student Disability Income – Long-term Student Medicare Supplement (Medigap) Student Medicare Supplement (Medigap) Student Medicare Supplement (Medigap) Student Medicare Supplement (Medigap) Student Medicare Supplement (Medigap) Student Medicare Supplement (Medigap) Student Medicare Supplement (Medigap) Student Medicare Supplement (Medigap) Student Medicare Supplement (Medigap) Student Medicare Services Only. Student Medicare Services Contracts Student | | | |
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| Accident Only or AD&D. Disability Income – Short-term. ———————————————————————————————————— | | | |
| Disability Income – Short-term Disability Income – Long-term. Long-Term Care Long-term. Medicare Supplement (Medigap). | | | |
| Disability Income | | | |
| Long-Term Care | пиничний попичний А.С. | | |
| Redicare Supplement (Medigap) Federal Employees Health Benefits Plan. Tricate Dental Dental Medicare Part D - Stand-Alone. Other Group Care Grand Total Group Business OTHER BUSINESS Credit (Individual and Group). Stop Lose Excess Loss XXXX Administrative Services Confracts XXXX Administrative Services Confracts XXXX | | A TOTAL DESIGNATION OF THE PARTY OF THE PART | |
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| Grand Total Group Business OTHER BUSINESS Credit (Individual and Group) Stop Loss/Excess Loss Administrative Services Contracts XXX Administrative Services Contracts XXX | minimum (min) | | |
| OTHER BUSINESS Credit (Individual and Group) Credit (Individua | 4 | | |
| Credit (Individual and Group) Stop Loss/Excess Loss XXX XX | | | |
| Stop Loss/Excess Loss | | | *************************************** |
| Administrative Services Only | | | |
| Administrative Services Contracts | XXX | , , , , , , , , , , , , , , , , , , , | |
| | XXX | ······· | |
| 5. Grand Total Other Business | | | |
| D. TOTAL BUSINESS | | | |
| 1. Total Non U.S. Policy Forms | *************************************** | | *************************************** |
| 2. Grand Total Individual, Group and Other | | | |

OF THE

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR PART 1 - INDIVIDUAL POLICIES SUMMARY

4 Loss Ratio (2+3)/1 Change in Contract Reserves Incurred Claims Amount U.S. Forms Direct Business....
Other Forms Direct Business.....
Total Direct Business.......
Reinsurance Assumed
Less Reinsurance Ceded.......
Total

PART 2 – GROUP POLICIES SUMMARY



i ni ni 4 vi d

PART 3 - C. OLIC S (Individual and Group)

| | Description | 1
Premiums Earned | Incurred C. ms Ar. nt | 3
Change in Contract Reserves | 4
Loss Ratio
(2+3)/1 |
|-----|-----------------------------|--|--|--|----------------------------|
| | U.S. Forms Direct Business | | (Catalysiana) (Catalysia) (Cat | | |
| 2 | Other Forms Direct Business | Control control (control control control control (control cont | Constitution of the Consti | *** Comment of the Co | |
| m | Total Direct Business | | The same of the sa | The state of the s | |
| र्ग | Reinsurance Assumed | | | | |
| vi | Less Reinsurance Coded | TO CONTRACT AND AND AND AND AND AND AND AND AND AND | | The contract of the contract o | |
| 9 | Total | | 4 | | |

PART 4 – ALL INDIVIDUAL, GROUP AND CREDIT PO, CIES SUMMARY

| | | | 7 | | |
|----|-----------------------------|---|---|--|---|
| | Description | Premiums Earned | Incurred Claims Amount | Change in Comp. Reserve | Loss Ratio
(2+3)/1 |
| 7 | U.S. Forms Direct Business | *************************************** | *************************************** | And the same of th | |
| ci | Other Forms Direct Business | | | | |
| m | , Total Direct Business | | | (1400) (1111) (11111) (11111) (11111) (11111) (11111) (11111) | *************************************** |
| 4 | Reinsurance Assumed | *************************************** | *************************************** | | *************************************** |
| S | Less Reinsurance Ceded | | | | |
| 9 | . Total | | | | |

SUPPLEMENTAL HEALTH CARE EXHIBIT – PART 1

(To File By Apr – Not for Rebate Purposes – See Cautionary Statement at http://www.naic.org/documents/committees_e_app_blanks_related_shee_cautionary_statement.pdf)

| | (LOCATION) | NAIC Company Code |
|-----------------|------------|--------------------------|
| .2. | | DURING THE YEAR |
| PORATION | | BUS TESS IN THE STATE OF |
| REP CT FOR 1. C | | NAIC Group Code |

| ,- | | Parameter | The State of | | Buwine | Business Subject to MI.R. | × | Contractor | St. St. | 0 | 10 | = ; | Modern | 13 | 4 | 15 |
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| _ | | Compreh | Comprehensive Bealth Coverage | overage. | | Many-Med Pains | | Expairs | Expaining Plans | | | | Medicas | | | |
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Employer | 3
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(excluded by
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| D | Deductible Fraud and Abuse Detectury Recovery Expenses (for MLR use only) | | 100 | | No. | | | | | | | v/č | | | 4 1000 1 | |
| 40 40 40 40 40 40 40 40 40 40 40 40 40 4 | 5. Not be about the common of | | | | | | | | | | XXXX
XXXX | | | | XXXXXXXXX | |
| | 1 2 0 | | | | | | | UL | | | 0.00 | | | | | |
| 4 | Preliminary Medical Loss Ratio: MLR (Lines 4 + 5.0 + 6.6 - Foutnote 2.0) / Line 1.8 | | | | | * | 100 | 1 | 4 | | XXX | XXX | | XXX | XXX | XXX |
| ට ගේ ගේ ගේ
ගේ | Claim Adjustment Expenses not included in quality of care expenses in Line 6.6. 2. Cost constrainment expenses not included in quality of care expenses in Line 6.6. 3. Total claim adjustment expenses (Lines 8.1 + 8.2.) | | | | | | | | | | | 11111 | 1 | | | |
| 0 | 1.51 | | | | | | | | | | 4 | | | XXX | XXX | XXX |

SUPPLEMENTAL HEALTH CARE EXHIBIT – PART 1 (Continued) (To Be Filed By April 1 – Not for Rebate Purposes)

| Competition of the Communication of Competition o | | | | | | | Business St | Business Subject to MLR | | | | | 01 | 11 | 12 | 13 | 14 | 1.5 |
|---|---|---|-------|---------------|---------------|-----|-------------|-------------------------|---------------------------------|------------|---------------------|----------------------------|---|-----------------------------|--|---------------------------------|-----------|------------------|
| Factor F | _ | | | Comprehensive | Health Covers | 200 | Min | -Med Plans | | Expatriate | Plans | 6 | | | Medicare | | | |
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Group
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| | | General and Automission for (GAA Expense) 10. Agents and brokers are and commissions 10. Agents and brokers (see and commissions 10. Other casse) (croileding seaso of lasts) of strough 1,7 M, me 14 below) 10. Other goard and administrative expense. 10.4 Commany Particle Expending confinement only) 10.5 Test goard and administrative Libes (61 + 10.2 + 10.3 + 10.3) | | | | | | | | | | | 0.000 | | | | | |
| A | - | Underwriting Gain (Loss) (Lines 1.12 - 5.7 - 6.6 - 8.3 - 10.5) | | 100 | | 00 | | | | | | | | | | | XXX | |
| | - | Income from Fees of Uninsared Plans | × | | | CXX | XXX | XXX | T | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | |
| XXX | | Net Investment and Other Gain/(Loss) | X | | | CXX | XXX | XXX | Г | XXX | XXX | XXX | XXX | XXX | XXX | | XXX | |
| AND AND AND AND AND AND AND AND AND AND | _ | Foderal Income Taxes (excluding taxes on Line 1.5 above) | X | | | CXX | XXX | XXX | | XXX | XXX | XXX | XXX | XXX | XXX | 2 | XXX | |
| activities (Expense) (informational only); already included in Line 6.5) A TOBES A TOBES The state of the | | Net Gain or (Loss) (Lines 11 + 12 + 13 - 14) | X | - | | CXX | XXX | XXX | r | XXX | XXX | XXX | XXX | XXX | XXX | | XXX | |
| A NORSE
A NORSE Polices
and Lives | - | ICD-10 Implementation Expenses (informational only, already included in general expenses alto 160-10 Implementation Expenses (informational only; already included in Line 6.5). | | | | | | | | | | | | | | | | |
| Chicket Pulcies XXX | _ | OTHER INDICATORS. | | | 4 | | | | | | | | | | | | | |
| and Lives XXX | _ | Number of Certificates/Policies | | | | | | | | | | | | | | | | |
| TXX XXX | | Number of Covered Lives | | | | | | | | | | | | | | | | |
| Member Months: | | Number of Groups | X | XX | 1 | | XXX | | | | | | | | | | | |
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| | APPORDABLE CARE ACT (ACA) RECEIPTS, PAYMENTS, RECEIVABLES AND PAYABLES | EIVABLES AND PA | YABLES A | 1 | |
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| | | Curren | Current Year | | Year |
| | | Comprehensive Health Covers | Bealth Covers | Cole bessiv | galify Covog |
| | | - | 2 * | 700 407 | NA P |
| | | Individual Plans | Small Group
Fundover Plans | | dnou |
| AR | ACA Receivables and Payables | | | | 1 |
| | Permanent ACA Risk Adjustment Program
1.0 Premium adjustments receivable/gpayable) | | |) | |
| | Transitional ACA Reinsurance Program 2.0 Total amounts recoverable for claims (paid & impaid) | 01-0 | XXX | | 7 |
| | Temporary ACA Risk Corridors Program 3.1 Actual ettrospecitive profittium | | | | |
| AR | ACA Receipts and Payments | | | | |
| | Permanent ACA Risk Adjustment Program
4.0 Premium adjustments reacipts (payments) | | | | |
| ģ. | Transitional ACA Relinsurance Program
5.0 Amounts received for claims | | XXX | | XXX |
| 6 | Temporary ACA Risk Corridors Program A. R. Reteoporary to gramma recovery | | | | |

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SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2 (To Be Filed By April 1 - Not for Rebate Purposes)

(LOCATION) REPGATION .. CGATION ..

| Small Small Large Small Comprehensive Health Coverage Min-Mod Plans Large Small Comprehensive Health Coverage Small Comprehensive Health Coverage Coverage | 6 7 Large Small Employer Group | Expatriate Plans 7 8 8 Small Large Group Group | Student Health Plants |) | | Medicare | 13 |
|--|--|--|--|--|--|--|---|
| writen my professor writen my professor my p | | Large
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Health
Plans | | | | |
| weight m prior year. m prior year. credits current year. credits current year. credit service of the servi | | | | Government
Business
(excluded by
statute) | Other
Health
Business | Advantage Part C and Medicare Part D Stand- Alone Stand- It Alone Subject to ACA | Total (a) |
| worther man current year. mn current year. reeds promium (Lines 12 – 13) reeds promium (Lines 12 – 13) reeds proving (Lines 12 – 13) reeds proving the reeding (Lines 16 – 17) n changes so witten off n changes so witten off n changes so witten off n changes so witten off n changes so witten off n changes so witten off n changes so witten off n changes so witten off n changes so witten off n changes so witten off n changes so witten off ga be year. diffy charent year. diffy prior year. reeds prior year. recedis prior year. | | | | | | | |
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| Health care receivables current year. Health care receivables prior year. Health care receivables prior year. Convexion change. | | | - | | | | |
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| 2.4-2.5+2.6 | | | | *************************************** | *************************************** | *************************************** | |
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| 311 312+314+314V | | | | A STATE OF THE STA | The second secon | The state of the s | |
| Z.11 - Z.12 + Z.13 + Z.14 provession contraction contr | *************************************** | 1 | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| Assumed incurred claims from non-affiliates | | 1 | , manual | | | | - |
| Net assumed less ceded incurred claims from affiliates | | • | - | | AMERICA STREET | | *************************************** |
| Ceded incurred claims to non-affiliates, accommendation of the contract of the | *************************************** | 3344434444 | - | - Manager | Contrological | | 391100 |
| Other adjustments due to MLR calculation - Claims | | | 7 | 100 | | | October 1 |
| Net Incurred Claims (Lines 2.15 - 2.8 - 2.9 + 2.10 + 2.16 + 2.17 - 2.18 + 2.19) | | | | | 2 | | |

^{.....} for stand-alone vision policies, for stand-alone dental and S...... (a) Column 13, Line 1.1 includes direct written premium of S...

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SUPPLEMENTAL HEALTH CARE EXHIBIT – PART 3 (To Be Filed By April 1 – Not for Rebate Purposes)

NAIC Company Code

(LOCATION)

DURING THE YEAR

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| 4 | OF ORATION |
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BUSINESS IN THE STATE OF

NAIC Group Code

| | All Fases | | | Improving Health Care Quality Expenses | e Quality Exper | 0.8cs | | Claims Adjus | Claims Adjustment Expenses | 6 | 02 |
|---------------------|---|--|--|--|---|---|----------------|---------------------------------|--|---------------------------------------|-------------------------------|
| | | 1 | 2 | 3 | 4 | 5 | 9 | 7 | × | | |
| | 5 | Improve
Health | Activities to
Prevent
Hospital
Readmissions | Improve Patient
Safety and
Reduce Medical
Errors | Wellness
& Health
Promotion
Activities | HIT Expenses | Total (1 to 5) | Cost
Containment
Expenses | Other Claims
Adjustment
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(6 to 9) |
| P = 22 | pivi | | | | | | | | | | |
| 5597 | | | XXX | XXX | XXX | XXX | | | | | |
| 81
1.9
1.10 | Reinbusceneers by unissured plans and fiscal intermediaries. Taxes, licenses and fees (in total, for tying purposes). O Total (1.7 to 1.9) Total Fraud and abuse detection recovery expenses included in Column 7 (informational only). | and a constant of the constant | XX | XXX | XXX | XXX | XXX | XXX | XXX | | |
| Small
2.1
2.2 | half Group Comprehensive Coverage Expenses: Salaries (including \$ for affiliated services) | | | | | | | | | | |
| 222 | EDP equipment and software (incl \$\frac{1}{2}\$ for affiliated services) Other equipment (excl. EDP) (incl \$\frac{1}{2}\$ for affiliated services) Accreditation and certification (incl \$\frac{1}{2}\$ for affiliated services), then commune (incl \$\frac{1}{2}\$ for affiliated services). | | XXX | AXX | | XXX | | | | | |
| 2.3 | | XXX | XXX | XXX | | XXX | XXX | XXX | XXX | | |
| 2.10 | 0 Total (27 to 2.9). 1 Total frand and abuse detection/recovery expenses included in Column 7 (informational only) | *************************************** | *************************************** | - The state of the | 0 | X | | | | | |
| Lar
3.1
3.2 | Large Group Comprehensive Coverage Expenses: 3.1 Salarres (including \$ for affiliated services) | | | | | | * | | | | |
| 3.3 | EDP equipment and software (incl S
Other equipment (excl. EDP) (incl S | | *************************************** | | 1 | | | | | | |
| 3.6 | | | XXX | XXX | XXX | AAA | 100 January | | | | |
| 3.8 | × F | XXX | XXX | XXX | XXX | XXX | × | XX | XXX | | |
| 3.10 | 0 Total (3.7 to 3.9) | | | e en aboue personale de la companya | | dente de la constant | | harassan bear | | | |

SUPPLEMENTAL HEALTH CARE EXHIBIT – PART 3 (Continued) (To Be Filed By April 1 – Not for Rebate Purposes)

| | All Expenses | | 100 | Improving Health Care Quality Expenses | e Ouality Expen | 505 | | Claims Adjus | Claims Adjustment Expenses | 6 | 10 |
|---|---|---|--|--|--|--------------|--|--------------|----------------------------|---|----------|
| T | | | 2 | 3 | 4 | 3 | 9 | 7 | 00 | | |
| | | 8 | Activities to | Improve Patient | Wellness | | | | | | |
| | | Improve | Prevent | Safety and | & Health | | 4 | Cost | Other Claims | General | Total |
| | | Outcomes | Readmissions | Errors | Activities | HIT Expenses | (1 to 5) | Expenses | Expenses | Expenses | (6 to 9) |
| | | 111111111111111111111111111111111111111 | | | phenomenonical and a second se | | | | | *************************************** | |
| | | | XXX | XXX | XXX | XXX | | | | | |
| | 4.8 Rembusenemen by unimore plans and tascal intermediaries, 4.10 Taxes, licenses and feest intotal, for tying purposes) | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | *************************************** | |
| | Small Group Mari-Med Plans Expenses 5.1 Salaries (including \$\frac{1}{2}\$ for affiliated services) | 111111111111111111111111111111111111111 | Territorio de la constitución de | | | | 11 11 11 11 11 11 11 11 11 11 11 11 11 | | | | |
| | 5.4 Other equipment (exit, EDP) (int.) For affiliated services) 5.5 Accrediation and certification (and \$\infty\$ for affiliated services) 5.6 Other expenses (int.) \$\infty\$ for affiliated services) 5.7 Subtoal before remitmenent and taxes (5.1 to \$\infty\$) 5.8 Daintenance has unimaged after a fine and faced intermediation | 1 | XXX | XX | XXX | XXX | | | | | |
| | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | |
| | 20 | | XXX | XXX | | | | | | | |
| | 6.8 Reimbursensense by unmared plans and fiscal intermeduares | XXX | XXX | XXX | XXX | la la | | XXX | XXX | | |

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SUPPLEMENTAL HEALTH CARE EXHIBIT – PART 3 (Continued) (To Be Filed By April 1 – Not for Rebate Purposes)

| | The state of the s | | | | | | | | | | |
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| | | - | 2 | 3 | 4 | \$ | 9 | 7 | ∞ | | |
| | | Improve | Activities to
Prevent | Improve Putient
Safety and | Wellness
& Health | | | Cost | Other Claims | General | Total |
| | | Health | Hospital
Readmissions | Reduce Medical
Errors | Promotion
Activities | HIT Expenses | Total
(1 to 5) | Containment
Expenses | Adjustment
Expenses | Administrative
Expenses | Expenses
(6 to 9) |
| 7, | Small Group Expuriate Plans Ex. ses. 7.1 Salares (including S. uffiliated se. es). | | | | | | | | | | |
| | Outsourced services | | | | | | | | | | |
| | 7.3 EDP equipment and software yet of all for all field services). 7.4 Other continuent (evel EDP) (end Continuent). | | A CONTRACTOR OF THE PARTY OF TH | *************************************** | | | 310000000000000000000000000000000000000 | | *************************************** | (440)4444444444444444444444444444444444 | |
| 4000 | Accreditation and certification (incl S for thitated | | XXX | XXX | XXX | XXX | | | | | |
| | 7.6 Other expenses (incl 8 for affiliated sec. 33) | 3 | 1 | | | | | | | | |
| | × | | | | | | | | | | |
| | 7.9 Taxes, licenses and fees (in total, for tying purposes) | | xxx | XXX | XXX | XXX | XXX | XXX | XXX | | |
| | | | | | | | | | | | |
| | 90 | | | | | | | | | 000000000000000000000000000000000000000 | |
| 2000 | | *************************************** | | < | | | | *************************************** | | | |
| | 8.4 Other equipment (excl EDP) (incl S for affiliated services). 8.5 Accreditation and certification (incl S for affiliated services). | | XXX | N. A. A. A. A. A. A. A. A. A. A. A. A. A. | XXX | XXX | | | | | |
| | 8.6 Other expenses (incl \$_for affiliated services) | | | | | | | | | | |
| 154515 | 2 | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | 1 | | | | | | |
| 0.7055 | 8.9 Taxes, licenses and fees (in total, for tying purposes) | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | | |
| ostori | 8.11 Total fraud and abuse detection/recovery expenses included in
Column 7 (informational only) | | | | | | | | | | |
| 6 | dent Health Plans Expenses | | | | | d | | | | | |
| 19100 | 9.1 Salaries (including S for affiliated services) | - | | • | | - | | *************************************** | | | |
| 1000 | | | | | | | | | | | |
| 4500 | 9.4 Other equipment (excl EDP) (incl \$ for affiliated services) | | | | | 8 | | | | | |
| -attri | | *************************************** | XXX | XXX |) | X | | | | *************************************** | |
| 21/15 | 9.0 Other expenses (incl.) Tor attituated services) | and a supplemental and a supplem | | *************************************** | - | | | *************************************** | | | |
| 0.000 | S. | | | | | | | 4 | | | |
| 150 | 9.9 Taxes, licenses and fees (in total, for tying purposes) | XXX | XXX | XXX | XXX | | | XXX | XXX | | |
| 10 O.S. | | | | | | | 1 | 1 | | | |

SUPPLEMENTAL HEALTH CARE EXHIBIT'S EXPENSE ALLOCATION REPORT (To Be Filed by April 1)

| | | And the state of t |
|---|---|--|
| NAIC Group Code: | | NAIC Company Code: |
| Description of allocation m | ethodolog | gy: |
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| | | |
| Detailed Description of Qu | ality Impr | rovement Expenses: |
| Expense Type from Part 3 1. Improve Health Outcomes: | New | Detailed Description of Proceedings of Procedings of |
| 1. Improve Health Outcomes: | | |
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| A. A. A. A. A. A. A. A. A. A. A. A. A. A | #2000000 | The state of the s |
| Activities to Prevent Hospital Readmission: | | |
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| Improve Patient Safety and
Reduce Medical Errors: | | |
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| | Secretario | |
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| Wellness & Health Promotion Activities: | 3 | |
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| 5. HIT Expens for Hear. | | |
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CYBERSECURITY AND IDENTITY THEFT INSURANCE COVERAGE SUPPLEMENT For The Year Ended December 31, 20_ (To Be Filed by April 1)

| PART 1 – INTERROGATORIES Cybersecurity Insurance Coverage: 1. Does the reporting entity write any stand-alone cybersecurity insurance coverage? If yes, complete Column 1 for Part 2. 2. Does the reporting entity write any cybersecurity insurance coverage provided as part of a package policy? If yes, complete Column 1 for Part 3. 3. If the liability portion of a cybersecurity insurance policy is a claims-made policy, is an extended neorting endorsement (tail coverage) offered? Identity Theft Insurance Coverage: 4. Does the reporting entity write any stand-alone identity theft insurance coverage? | ·(O) |
|--|------------------------|
| Cybersecurity Insurance Coverage: 1. Does the reporting entity write any stand-alone eybersecurity insurance coverage? If yes, complete Column 1 for Part 2. 2. Does the reporting entity write any cybersecurity insurance coverage provided as part of a package policy? If yes, complete Column 1 for Part 3. 3. If the liability portion of a cybersecurity insurance policy is a claims-made policy, is an extended no orting endorsement (tail coverage) offered? Identity Theft Insurance Coverage: 4. Does the reporting entity write any stand-alone identity theft insurance coverage? | · (O) |
| Does the reporting entity write any stand-alone cybersecurity insurance coverage? If yes, complete Column 1 for Part 2. Does the reporting entity write any cybersecurity insurance coverage provided as part of a package policy? If yes, complete Column 1 for Part 3. If the liability portion of a cybersecurity insurance policy is a claims-made policy, is an extended reporting endorsement (tail coverage) offered? Identity Theft Insurance Coverage: Does the reporting entity write any stand-alone identity theft insurance coverage? | |
| If yes, complete Column 1 for Part 2. 2. Does the reporting entity write any cybersecurity insurance coverage provided as part of a package policy? If yes, complete Column 1 for Part 3. 3. If the liability portion of a cybersecurity insurance policy is a claims-made policy, is an extended reporting endorsement (tail coverage) offered? Identity Theft Insurance Coverage: 4. Does the reporting entity write any stand-alone identity theft insurance coverage? | |
| Does the reporting entity write any cybersecurity insurance coverage provided as part of a package policy? If yes, complete Column 1 for Part 3. If the liability portion of a cybersecurity insurance policy is a claims-made policy, is an extended no orting endorsement (tail coverage) offered? Identity Theft Insurance Coverage: Does the reporting entity write any stand-alone identity theft insurance coverage? | Yes [No [] |
| If yes, complete Column 1 for Part 3. 3. If the liability portion of a cybersecurity insurance policy is a claims-made policy, is an extended noorting endorsement (tail coverage) offered? Identity Theft Insurance Coverage: 4. Does the reporting entity write any stand-alone identity theft insurance coverage? | |
| 3. If the liability portion of a cybersecurity insurance policy is a claims-made policy, is an extended reporting endorsement (tail coverage) offered? Identity Theft Insurance Coverage: 4. Does the reporting entity write any stand-alone identity theft insurance coverage? | Yes [] No [] |
| endorsement (tail coverage) offered? Identity Theft Insurance Coverage: 4. Does the reporting entity write any stand-alone identity theft insurance coverage? | |
| Does the reporting entity write any stand-alone identity theft insurance coverage? | Yes [] No [] N/A [] |
| | |
| and the second community and the second seco | Yes [] No [] |
| If yes, complete Column 2 for Part 2. | |
| 5. Does the reporting entity write any identity theft insurance coverage provided as part a package policy? | Yes [] No [] |
| | |

CYBERSECURITY AND IDENTITY THEFT INSURANCE COVERAGE SUPPLEMENT

PART 2 – STAND-ALONE POLICIES POLICY AND CLAIMS DATA

| | | 1
Cybersecurity Insurance | Ide nty Theft surance |
|-------------------|--|---|---|
| Direct | Premiums | · · · · · · | |
| 1. | Written | | |
| Direct | | 4 | |
| 3.
4. | Paid | | |
| Direct | Defense and Cost Containment | | |
| 5.
6. | Paid | | <u></u> |
| Numbe | er of Policies in Force | | |
| 7.
8.
9. | Claims-Made Occurrence. | | XXX
XXX |
| Numbe | er of Claims Reported | | Takes Takes and the same of the same of the same of |
| 10.
11.
12. | First Party | | XXX
XXX |
| Numbe | er of Claims Open | | |
| 13.
14.
15. | First Party Third Party Total (13 + 14). |) | XXX
XXX |
| Numbe | er of Claims Closed with Payment | | |
| 16.
17.
18. | First Party | | XXX
XXX |
| 2000 | er of Claims Closed without Payment | | |
| 19.
20.
21. | First Party | *************************************** | XXX
XXX |

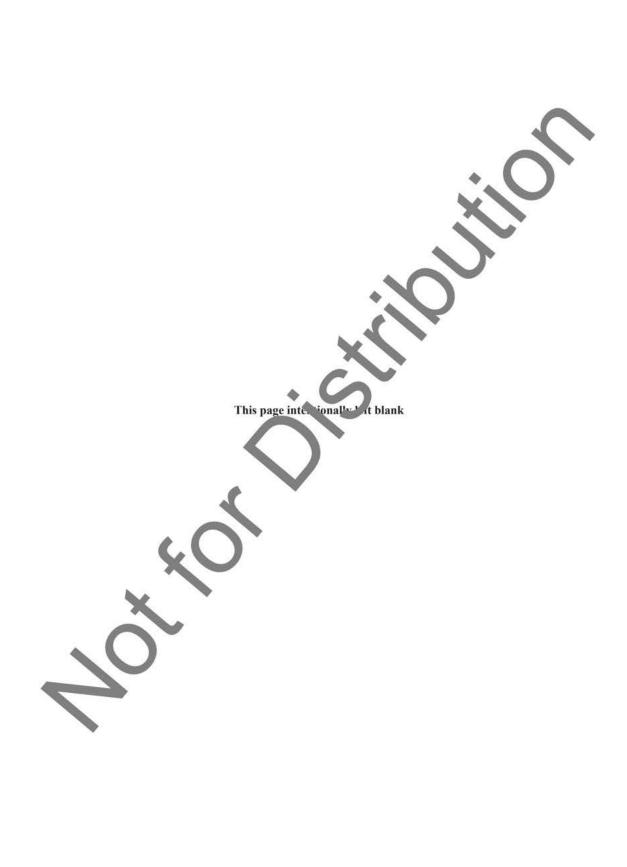
XX

CYBERSECURITY AND IDENTITY THEFT INSURANCE COVERAGE SUPPLEMENT

PART 3 – PART OF A PACKAGE POLICY POLICY AND CLAIMS DATA

| | 1
Cybersecurity Insurance | Ide ity Then surance |
|--|------------------------------|----------------------|
| Direct Premiums Quantified | 4 | |
| 1. Written
2. Earned | | |
| Direct Premiums Estimated Using Reasonable Assumptions | - | |
| 3. Written | | |
| Direct Losses | | |
| 5. Paid | | 9 |
| Direct Defense and Cost Containment | | |
| 7. Paid | | |
| Number of Policies in Force | | |
| 9. Claims-Made
10. Occurrence
11. Total (9 + 10) | | XXX
XXX |
| Number of Claims Reported | | |
| 12. First Party | | XXX
XXX |
| Number of Claims Open | 1 | |
| 15. First Party 16. Third Party 17. Total (15 + 16) | | XXX
XXX |
| Number of Claims Closed with Payment | | |
| 18. First Party 19. Third Party 20. Total (18 + 19) | | XXX
XXX |
| Number of Claims Closed without Payment | | |
| 21. First Party | 1 | XXX
XXX |





LIFE, HEALTH & ANNUITY GUARANTY ASSOCIATION MODEL ACT ASSESSMENT BASE RECONCILIATION EXHIBIT For Year Ended December 31, 2018 (To be Filed by April 1) NAIC COMPANY CODE

| OF T | t Business in the State of | NAIC COMPANY C | ODE | | |
|----------------------|--|---|---|---|---|
| | | 1 | 2 | 3 | 4 |
| | | Life | | | s osit-Type
c act
Funds and |
| | PREMIUMS, CONSIDERATIONS AND DEPOSITS | Insurance
Premiums | Annuity
Considerations | Prem | Other |
| 1.
2. | Premiums, considerations and deposits from Schedule T or Exhibit of Premiums and Losses Premiums, considerations and deposits NOT reported in Schedule T or Exhibit of Premiums and Losses, including investment contract receipts credited to liability account | | | | |
| | 2.1 Contract fees for variable contracts with guarantees | | | | *************************************** |
| 3. | Amounts, if applicable, that were deducted prior to determining amounts included in Lines 1 and 2 which are in the following categories: 3.1 Transfers to guaranteed Separate Accounts | | | - | |
| | 3.2 Roll over of GICs or annuities into other companies | | | 9 | *************************************** |
| | 3.3 Surrenders or other benefits paid out | | | | |
| | Excess interest credited to accounts Aggregate write-ins for other amounts deducted prior to determining amounts included in Lines 1 or 2 | 3 | () | | |
| | 3.99 Total (Lines 3.1 through 3.5) | | | | |
| 4. | Transfers: 4.1 Enter in Column 2, as a negative number, and Column 4, as a positive number, the total of all amounts received to fund contracts established under Section 403(b) of the U.S. | | | | |
| | Internal Revenue Code, that are included in Column 2, Lines 1, 2, and 3.99. 4.2 Enter in Column 2, as a positive number, and Column 4 as a negative number, any amounts reported in Column 4, Lines 1, 2 and 3.99 that are allocated. (Note: amounts received to fund contracts established under 403(b) of the U.S. Internal Revenue. | | *************************************** | *************************************** | *************************************** |
| | should not be included in Line 4.2) | - | *************************************** | | |
| | amounts reported in Column 2, Lines 1, 2, and 3.99 that are unallocated 4.99 Total (Lines 4.1 + 4.2 + 4.3) | J | | | |
| | Total (Lines 1 + 2 + 3.99 + 4.99) | | | | |
| | ELOPMENT OF AMOUNTS INCLUDED IN LINES 1 THR GH 5 THE SHOW BE of include any amounts more than once in Lines 6 through 9 | DEDUCTED IN | DETERMINING | THE BASE | |
| 6. | A Aggregate write-ins for amounts where the insurer is not sub, to risk. Premium protitions of policies or contracts NOT guaranteed or under which entire invest ant risk is borne by the policyholder. (Please specify such deductions and index where a manuals were reported in the Annual Statement | | | | |
| 7. | Amounts NOT allocated to individuals or individual certificate holders or a sunts received for such contracts in excess of limits: 7.1 Unallocated funding obligations that do NOT for a government lotteries or employee, | | | | |
| | union or association of natural persons benefit of | XXX | XXX | XXX | |
| | 7.2 Unallocated funding obligations that fund any empter union or association of natural persons benefits plans protected by the decreasing the persons benefits plans protected by the decreasing the persons persons that the decreasing the persons that the decreasing the persons that the decreasing the persons that the decreasing the persons that the persons that the persons that the persons that the persons th | XXX | XXX | XXX | |
| | of the U.S. Internal Revenue or (b) by the Federal Pension Benefit | | | | |
| | Guaranty Corporation | XXX | XXX | XXX | |
| | 7.4 Total (Lines 7.1 + 7.2 + 7.3) | XXX | XXX | XXX | |
| 8. | Dividends/Experience rating credits paid or created, but only if NOT guaranteed in advance (include only amounts. already deducted in determining Lines 1 and 2) | | | | 101101101111111111111111111111111111111 |
| 9. | Aggregate write-ins for Deductions | | | | |
| MOI | DEL ACT BASE (2 inus E 3) | | Ï | | |
| 11. | Current Year | | 100 | | |
| DET
3.501 | AILS OF WRI 7-INS | (motomsoumrotor) | унаниономнание: | -371101000010111010 | (10101000000000000000000000000000000000 |
| 3.502 | | | *************************************** | | |
| 3.503 | | *************************************** | 401110011001101111 | | 1010111001110100111001 |
| 3. | Summary of aining write-ins for Line 3.5 from overflow page | | | | |
| 0607 | | | *************************************** | | |
| 0602 | | | | | |
| 0698
0699 | Summer of remaining write-ins for Line 6 from overflow page Total (Lines 0601 through 0603 plus 0698) (Line 6 above) | 300000000000000000000000000000000000000 | *************************************** | | Tionaccomonican) |
| 0901 | | | | | |
| 0902 | | | | | |
| 0903
0998
0999 | Summary of remaining write-ins for Line 9 from overflow page | | | | |

NEW PAGE

OVERFLOW PAGE FOR WRITE-INS

new page

Affix Bar Code Above

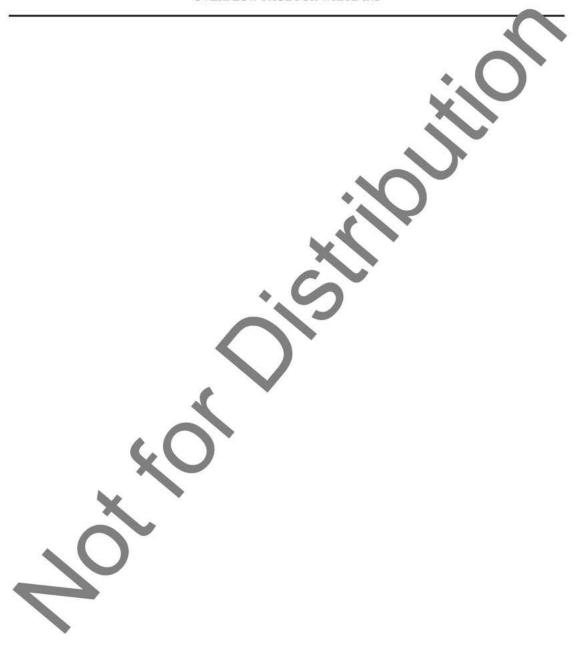
ADJUSTMENTS TO THE LIFE, HEALTH & ANNUITY GUARANTY ASSOCIATION MODEL ACT ASSESSMENT BASE RECONCILIATION EXHIBIT

For The Year Ended December 31, 2018 (To Be Filed by April 1)

| OF TH | E | N | AIC COMPANY CO | DDE | |
|----------------|---|---|---------------------------------------|---|--|
| Direct | Business in the State of | | | | |
| | | Life
Insurance
Premium | Allocated Annut and Other Annut osits | Accider & realth Premium | 4
Unallocated
Annuity &
Other
Unallocated
Fund Deposits |
| 1. | MODEL ACT BASE (Line 11 of the Reconciliation Exhibit) | | | | |
| AMOU | INTS REQUIRED TO DETERMINE THIS STATE'S ASSESSMENT BASE | | | 2 | |
| 2. | Enter in Column 2, as a positive number, and Column 4, as a negative number, the total of all amounts received to fund allocated contracts established under Section 403(b) of the U.S. Internal Revenue Code that are included in Column | VVV | 1 | VVV | |
| 3. | 4, Line I above | XXX | | XXX | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 4. | Amounts NOT in excess of \$1 million per contract | 137 | XXX
XXX | XXX
XXX | *************************************** |
| | employee, union, or association of natural persons benefit plans which are NOT: (a) governmental retirement plans established under Sections 401, 37 or 457 of the U.S. Internal Revenue Code, or (b) protected by the Fe Pension Benefit Guaranty Corporation: | | | | |
| | 4.1 Amounts NOT in excess of \$1 million per contract 4.2 Amounts in excess of \$1 million but NOT in excess of \$5 million | XXX | XXX | XXX | |
| | contract | XXX | XXX | XXX | *************************************** |
| | 4.3 Amounts in excess of \$5 million per contract | XXX | XXX | XXX | · |
| | 4.4 Total (Lines 4.1 + 4.2 + 4.3) | XXX | XXX | XXX | ////////////////////////////////////// |
| 5. | Unallocated funding obligations issued to fund vernmentar tireme, plans established under Sections 401 and 457 of the V 3. Internal Reve. e Code: | 10000 | 2 422-20-2 | 27 40220 1-201-20 | *************************************** |
| | 5.1 Amounts in excess of \$1 million per contra | XXX | XXX | XXX | |
| | 5.2 All amounts | XXX | XXX | XXX | |
| | 5.3 Amounts in excess of \$2 million per contract. (New Yers Only) | XXX | XXX | XXX | |
| 6. | 5.4 Amounts not in excess of \$7.5 million per contract (no desota only) Unallocated funding obligations issued to and governmental retirement plans established under Section 403(b) of the contract (no desota only) Internal Revenue Code: | XXX | XXX | XXX | *************************************** |
| | 6.1 Amounts NOT in excess of \$1 millio er contract | XXX | XXX | XXX | · |
| | 6.2 Amounts in excess of \$1 million con ct | XXX | XXX | XXX | |
| | 6.3 Total (Lines 6.1 + 6.2) | XXX | XXX | XXX | |
| | 6.4 Amounts in exce of \$2 Illion per cutract (New Jersey Only) | XXX | XXX | XXX | |
| 7. | 6.5 Amounts not in the state of 5 million for contract (Minnesota only) Unallocated funding obtains a 6 employee, union, or association of natural persons benefit protected by the Federal Pension Benefit Guaranty Corporation: | XXX | XXX | XXX | |
| | 7.1 Amour NOT in excess of St million per contract | XXX | XXX | XXX | |
| | 7.2 All amounts No. in excess of \$2 million per contract (New Jersey only) | XXX | XXX | XXX | |
| 8. | Unallocated funding limitions issued to fund government lotteries NOT in | XXX | XXX | XXX | |
| 9. | Unallo ted funda obligations that fund employee or association of natural person genefit plass in excess of \$2 million but NOT in excess of \$5 million | XXX | XXX | XXX | *************************************** |
| 10. | Age ate write-ins for other deductions | XXX | XXX | XXX | |
| 2 | Current auf (20) | | | | |
| DETA | S OF WRITE-INS | | | | |
| 1001. | | *************************************** | | | *************************************** |
| 1002.
1003. | | | | | |
| 1003. | Summary of remaining write-ins for Line 10 from overflow page | *************************************** | | *************************************** | *************************************** |
| 1098. | Totals (Lines 1001 through 1003 plus 1098) (Line 10 above) | | | | |

NEW PAGE

OVERFLOW PAGE FOR WRITE-INS



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