# **ANNUAL STATEMENT**

## OF THE

Texas FAIR Plan Association		
of	Austin	
STATE OF	Texas	

# **TO THE**

**Insurance Department** 

**OF THE** 

**State of Texas** 

FOR THE YEAR ENDED

**December 31, 2020** 



# **ANNUAL STATEMENT**

For the Year Ended December 31, 2020 OF THE CONDITION AND AFFAIRS OF THE

	Texas FAIF	R Plan Association	
NAIC Group Code 476 (Curren	6 4766 NAIC Company (Prior Period)	CodeEmployer	s ID Number 43-1982873
Organized under the Laws of	Texas	, State of Domicile or Port of Entry	X
Country of Domicile US			
Incorporated/Organized	December 31, 2002	Commenced Business	December 31, 2002
	0 S. Mopac, Bldg A	, Austin, TX, US	78749
Statutory Home Office	(Street and Number)	(City	or Town, State, Country and Zip Code)
Main Administrative Office	5700 S. Mopac, Bldg A		
and should be a state of the st	-	(Street and Number)	
	Austin, TX, US 78749	512-899-4900	
	(City or Town, State, Country and Zip Co	/	phone Number)
Mail Address PO Box 990		, Austin, TX, US	78709-9080 or Town, State, Country and Zip Code)
	(Street and Number or P.O. Box)		
Primary Location of Books and R	Records 5700 S. Mopac, Bldg A (Street and Number)	Austin, TX, US 78749	512-899-4900 nd Zip Code) (Area Code) (Telephone Number)
Internet Mah Cite Address	V	(Oity of Town, State, Country as	(Alba Code) (Alba Code) (Folephone Hamber)
	https://www.texasfairplan.org	512-899-4988	***************************************
Statutory Statement Contact	Allen David Fulkerson (Name)		phone Number) (Extension)
, pr	afulkerson@twia.org	, , , , , , , , , , , , , , , , , , , ,	512-899-4952
-	(E-Mail Address)		(Fax Number)
	10	FICERS	
	Oi	TICENS	
*			
	Jo	ohn Miletti	
	Name		Title
1. John William Polak		General Manager	
<ol><li>Mark Solomon</li></ol>		Vice Chairman	
Wendy Mueller		Secretary/Treasurer	
4. Jerome Tonra Fadden		Chief Financial Officer	
	Vice Pre	sidents of TFPA	
Name	Title	Name	Title
David Patrick Durden	VP Legal	David Scott Williams	VP Claims
Camron Malik	VP IT	Juanita Deloris Lester	VP HR and Administration
Jennifer Taylor Armstrong	VP Communications&Legislative Affairs	Denise Ingerson Larzalere	VP Underwriting
Jennier Taylor Armstrong	VI Communications & Legislative Analis	Defilise ingerson Earzaiere	VI Oliderwitting
		_	
		-	
		_	7
		-	
	TEPA Gov	erning Committee	
Wandy Muslins		John Miletti	Georgia Rutherford Neblett
Wendy Mueller	Debbie King		
Timothy Lawrence McCarthy	Corise Morrison	Edward James Sherlock	Frank Baumann, Jr
Mark Solomon	Marilyn Hamilton		
		_	
			_
			_
		-	
		# - Officer or Director who did not o	occupy the indicated position in the prior annual statement
State of Texas	* * * * * * * *		
County of Travis	88		
	eing duly sworn, each depose and say that they are the descr		
assets were the absolute property of	f the said reporting entity, free and clear from any liens or cla	aims thereon, except as herein stated, and that this	statement, together with related exhibits, schedules and
	xed or referred to, is a full and true statement of all the assets		
and of its income and deductions the	refrom for the period ended, and have been completed in acco	ordance with the NAIC Annual Statement Instructions	and Accounting Practices and Procedures manual except
	differ; or, (2) that state rules or regulations require difference		
	urthermore, the scope of this attestation by the described office		
(except for formatting differences due	to electronic filing) of the enclosed statement. The electronic	filing may be requested by various regulators in lieu of	of or in addition to the enclosed statement.
( ~ )		// / // h	//
XIA	-0-	11/1/01/	
1/1/	(Signature)	1 / 10	(Signature)
1 * *	John William Polak	Je	rome Tonra Fadden
	(Printed Name)		(Printed Name)
	1.		2.
	General Manager	Ch	ilef Financial Officer
	(Title)		(Title)
Subscribed and sworn to (or affirmed)	before me this on this		
27 day of Januar	, 2021, by		
		a. Is this an	original filing? [X]Yes []No
Anglo	ehl	b. If no:	1. State the amendment number
	<del></del>		2. Date filed
			3. Number of pages attached

# **ASSETS**

			Current Year		Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)				
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0 encumbrances)				
	4.2 Properties held for the production of income (less \$ 0 encumbrances)				
_	4.3 Properties held for sale (less \$ 0 encumbrances)				
5.	Cash (\$ 40,367,948, Schedule E - Part 1), cash equivalents (\$ 17,349,221,				
_	Schedule E - Part 2), and short-term investments (\$ 0, Schedule DA)	57,717,169		57,717,169	66,137,065
6.	Contract loans (including \$ 0 premium notes)				
	Derivatives (Schedule DB)				
	Other invested assets (Schedule BA)				
	Receivables for securities				
	Securities lending reinvested collateral assets (Schedule DL)				
	Aggregate write-ins for invested assets	F7 747 4C0		F7 747 400	CC 427 0CF
12.	Subtotals, cash and invested assets (Lines 1 to 11)	57,717,169		57,717,169	66,137,065
	Title plants less \$ 0 charged off (for Title insurers only) Investment income due and accrued			225	00.050
		335		335	26,952
15.	Premiums and considerations:	1 700 410	100 270	1 501 120	1 551 501
	<ul> <li>15.1 Uncollected premiums and agents' balances in the course of collection</li> <li>15.2 Deferred premiums, agents' balances and installments booked but deferred</li> </ul>	1,700,418	199,279	1,501,139	1,551,591
	and not yet due (including \$ 0 earned but unbilled premiums)	5,130,310		5,130,310	5,273,041
	15.3 Accrued retrospective premiums (\$ 0) and contracts subject to	3, 130,310		3, 130, 3 10	3,273,041
16	redetermination (\$ 0) Reinsurance:				
10.	4C.4. Associate as associately from a significant	1,506,148		1,506,148	1,148,863
		1,500,140		1,500,140	1,140,000
	16.2 Funds held by or deposited with reinsured companies 16.3 Other amounts receivable under reinsurance contracts				
17.	Associate associately solution to associate and alone				
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
	Guaranty funds receivable or on deposit				
	Electronic data processing equipment and software				
	Furniture and equipment, including health care delivery assets (\$ 0)				
	Net adjustment in assets and liabilities due to foreign exchange rates				
	Receivables from parent, subsidiaries and affiliates				
	Health care (\$ 0) and other amounts receivable				
	Aggregate write-ins for other-than-invested assets	183,748	183,748		
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	66,238,128	383,027	65,855,101	74,137,512
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)	66,238,128	383,027	65,855,101	74,137,512

DETAILS OF WRITE-IN LINES			
1101.			
1102.			l
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501. Surcharge Receivable	75,405	75,405	 
2502. Due from Agents	63,499	63,499	 l
2503. Prepaid Expenses	44,844	44,844	 l
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	183.748	183.748	

# LIABILITIES, SURPLUS AND OTHER FUNDS

-		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)	11,721,386	11,732,055
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)	3,736,520	3,229,726
4.	Commissions payable, contingent commissions and other similar charges	567,614	602,045
5.	Other expenses (excluding taxes, licenses and fees)	1,181,445	1,378,124
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		162,116
7.1	Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))		
7.2			
8.	Borrowed money \$ 0 and interest thereon \$ 0		
9.			
	reinsurance of \$ 14,464,539 and including warranty reserves of \$ 0		
	and accrued accident and health experience rating refunds including \$ 0		
	for medical loss ratio rebate per the Public Health Service Act)	24,801,277	27,345,273
10.	Advance premium	1,240,814	1,161,321
	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.		14,103,783	14,276,123
13.			
14.			
15.	Describeration and items and allocated	10 101	57,677
16.		333,000	95,000
17.	Michael Control of Control of PolyProphysics for the Control of Co		
18.			
19.	•		1,075,625
20.	Desiratives		1,073,023
21.	Describing for an amiliar		
	Described for the second of the form		
22.	*		
23.	Liability for amounts held under uninsured plans		
24.			000.270
25.		839,042	889,376
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	59,849,447	62,004,461
27.		50.040.445	20.004.404
28.	* * * * * * * * * * * * * * * * * * * *	59,849,447	62,004,461
29.	Aggregate write-ins for special surplus funds		
30.			
31.		I	
	Preferred capital stock		
32.	Aggregate write-ins for other-than-special surplus funds		
33.	Aggregate write-ins for other-than-special surplus funds Surplus notes		
33. 34.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus		
33. 34. 35.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus)	6,005,654	12,133,051
33. 34.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost:	6,005,654	12,133,051
33. 34. 35.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0)	6,005,654	12,133,051
33. 34. 35.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0)		
33. 34. 35.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	6,005,654	12,133,051
33. 34. 35. 36.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0)		
33. 34. 35. 36.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	6,005,654	12,133,051
33. 34. 35. 36.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	6,005,654	12,133,051
33. 34. 35. 36. 37. 38.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101	12,133,051 74,137,512
33. 34. 35. 36. 37. 38.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678	12,133,051 74,137,512 699,113
33. 34. 35. 36. 37. 38. 2501. 2502.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101	12,133,051 74,137,512
33. 34. 35. 36. 37. 38. 2501. 2502. 2503.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678	12,133,051 74,137,512 699,113
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2502. 2502. 2503. 2598. 2599. 2901. 2902.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998.	Aggregate write-ins for other-than-special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998.	Aggregate write-ins for other-than-special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2999. 3201.	Aggregate write-ins for other-than-special surplus funds Surplus notes Gross paid in and contributed surplus Unassigned funds (surplus) Less treasury stock, at cost: 36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263
33. 34. 35. 36. 37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201. 3202.	Aggregate write-ins for other-than-special surplus funds  Surplus notes  Gross paid in and contributed surplus  Unassigned funds (surplus)  Less treasury stock, at cost:  36.1	6,005,654 65,855,101 719,678 119,364	12,133,051 74,137,512 699,113 190,263 889,376

# **STATEMENT OF INCOME**

		1	2
		Current Year	Prior Year
	UNDERWRITING INCOME	Ourient real	Thor rear
1.	Premiums earned (Part 1, Line 35, Column 4)  DEDUCTIONS:	53,091,939	59,625,102
2.	Losses incurred (Part 2, Line 35, Column 7)	26,531,256	30,099,285
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		8,141,988
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)	22,397,738	25,309,881
5.	Aggregate write-ins for underwriting deductions		
6.	Total underwriting deductions (Lines 2 through 5)	59,018,140	63,551,154
7. 8.	Net income of protected cells  Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)		(2.026.052)
0.	INVESTMENT INCOME	(5,926,201)	(3,926,052)
	Net investment income earned (Exhibit of Net Investment Income, Line 17)		736,966
10.	Net realized capital gains (losses) less capital gains tax of \$ 0 (Exhibit of Capital Gains (Losses))		726.066
11.	Net investment gain (loss) (Lines 9 + 10)	(27,816)	736,966
	OTHER INCOME		
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered		
40	\$ 0 amount charged off \$ 140,243)	(140,243)	(126,887)
13. 14.	Finance and service charges not included in premiums	161,543	397,055
15	Aggregate write-ins for miscellaneous income Total other income (Lines 12 through 14)		270,168
	Net income before dividends to policyholders, after capital gains tax and before all other		
	federal and foreign income taxes (Lines 8 + 11 + 15)	(5,932,717)	(2,918,918)
	Dividends to policyholders		
18.	Net income, after dividends to policyholders, after capital gains tax and before	(5,000,747)	(0.040.040)
10	all other federal and foreign income taxes (Line 16 minus Line 17)  Federal and foreign income taxes incurred		(2,918,918)
	N. (1) 40 (1) 10 (1) (20)	(5.000.747)	(2,918,918)
_0.	CAPITAL AND SURPLUS ACCOUNT	(0,002,111)	(2,0:0,0:0)
21	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	12,133,051	15,088,438
22.	Net income (from Line 20)	(5,932,717)	(2,918,918)
23.	Net transfers (to) from Protected Cell accounts	1	
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ 0		
25.	Change in net unrealized foreign exchange capital gain (loss)		
26.	Change in net deferred income tax		
	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	(238,000)	12,531
28. 29.	Observation and a section	1	(49,000)
30.	Change in surplus notes Surplus (contributed to) withdrawn from protected cells		
31.	Cumulative effect of changes in accounting principles		
32.	Capital changes:		
	32.1 Paid in		
	32.2 Transferred from surplus (Stock Dividend) 32.3 Transferred to surplus		
33.	32.3 Transferred to surplus Surplus adjustments:		
00.	33.1 Paid in		
	33.2 Transferred to capital (Stock Dividend)	1	
	33.3 Transferred from capital		
34.	Net remittances from or (to) Home Office		
35. 36	Dividends to stockholders  Change in trackury stock /Page 3. Lines 36.1 and 36.2. Column 3 minus Column 1)		
36. 37.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) Aggregate write-ins for gains and losses in surplus		
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	(6,127,397)	(2,955,387)
JU.	Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 38) (Page 3, Line 37)	6,005,654	12,133,051

	DETAILS OF WRITE-IN LINES		
0501.			
0502.	MANE		
0503.	Summary of remaining write ine for Line 05 from overflow page		
0598.	Summary of remaining write-ins for Line 05 from overflow page		
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)		
1401.			
1402.	NAME		
1403.	NONE		
1498.	Summary of remaining write-ins for Line 14 from overflow page		
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)		
3701.			
3702.	NAME		
3703.	N()N-		
3798.	Summary of remaining write-ins for Line 37 from overflow page		
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		

20.0002

# **CASH FLOW**

		1	2
	Cash from Operations	Current Year	Prior Year
1.	Premiums collected net of reinsurance	50,543,688	57,667,97
2.	Net investment income	12,970	791,76
3.		21,300	270,16
4.	Total (Lines 1 through 3)	50,577,958	58,729,91
5.	Benefit and loss related payments	26 000 240	30,792,91
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	32,119,138	34,502,24
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	59,018,348	65,295,1
11.	Net cash from operations (Line 4 minus Line 10)	(8,440,390)	(6,565,24
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds		
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)		
14.			
15.			
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	20,494	19,9
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5		
	plus Line 16.6)	20,494	19,9
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(8,419,896)	(6,545,2
	Cash, cash equivalents and short-term investments:	(0,419,030)	(0,545,2
19.	10.1 Decipring of year	66,137,065	72,682,3
	19.2 End of year (Line 18 plus Line 19.1)	57,717,169	
	13.4 Liiu oi vedi (Liile 10 Dius Liile 13.1)	1 31,111,109	66,137,0

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# UNDERWRITING AND INVESTMENT EXHIBIT PART 1 – PREMIUMS EARNED

		1  Net  Premiums  Written per	2 Unearned Premiums Dec. 31 Prior Year- per Col. 3,	3 Unearned Premiums Dec. 31 Current Year- per Col. 5	4 Premiums Earned During Year
	Line of Business	Column 6, Part 1B	Last Year's Part 1	Part 1A	(Cols. 1 + 2 - 3)
1	Fire	2,378,730	1,429,642	1,002,508	2,805,864
	Allied lines	17 200 677	8,739,327	8,530,116	17,607,888
	Faces and the land of the land		0,100,021	0,000,110	17,007,000
	Homeowners multiple peril	30,770,536	17,176,304	15,268,653	32,678,187
	Commercial multiple peril			10,200,000	
	Mortgage guaranty				
	Ocean marine				
	Independent and a second a second and a second a second and a second a second and a second and a second and a				
	Financial quaranty				
	Medical professional liability—occurrence				
	Medical professional liability—claims-made				
	Corthauaka				
	Group accident and health				
	Credit accident and health				
14.	(analysis and in dividual)				
45	(group and individual)				
	Other accident and health				
	Workers' compensation				
	Other liability—occurrence				
	Other liability—claims-made				
	Excess workers' compensation				
	Products liability—occurrence				
18.2	Products liability—claims-made				
	Private passenger auto liability				
19.3,19.4	Commercial auto liability				
21	Auto physical damage				
22	Aircraft (all perils)				
23	Fidelity				
24	Surety				
26	Burglary and theft				
27	Boiler and machinery				
28	Credit				
29	International				
30	Warranty				
	Reinsurance-nonproportional				
	assumed property				
32	Reinsurance-nonproportional				
	assumed liability				
33	Reinsurance-nonproportional				
33.	assumed financial lines				
21	Aggregate write-ins for other lines				
34.	of business				
35	TOTALS	50,547,943	27,345,273	24,801,277	53,091,939
00	TOTALO	00,047,040	21,040,210	24,001,271	00,001,000

	DETAILS OF WRITE-IN LINES		
3401.			
3402.			
3403.		MANIE	
3498.	Sum of remaining write-ins for		
	Line 34 from overflow page		
3499.	Totals (Lines 3401 through 3403		
	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)		

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

		1	2	3	4	5
		Amount Unearned (Running One Year or Less from Date	Amount Unearned (Running More Than One Year from Date	Earned but	Reserve for Rate Credits and Retrospective	Total Reserve for Unearned
		of Policy)	of Policy)	Unbilled	Adjustments Based	Premiums
	Line of Business	(a)	(a)	Premium	on Experience	Cols. 1 + 2 + 3 + 4
	Ellic of Eddinoss		(α)	1 Tolliidili	OH EXPONONCE	
İ	Fire	1,002,508				1,002,508
l	Allied lines	8,530,116				8,530,116
	Farmowners multiple peril					
	Homeowners multiple peril	15,268,653				15,268,653
	Commercial multiple peril					
6.	Mortgage guaranty					
8.	Ocean marine					
	Inland marine					
10.	Financial guaranty					
11.1	Medical professional liability—occurrence					
	Medical professional liablity—claims-made					
	Earthquake					
13.	Group accident and health					
14.	Credit accident and health					
	(group and individual)					
15.	Other accident and health					
16.	Workers' compensation					
17.1	Other liability—occurrence					
17.2	Other liability—claims-made					
17.3	Excess workers' compensation					
18.1	Products liability—occurrence					
18.2	Products liability—claims-made					
19.1,19.2	Private passenger auto liability					
19.3,19.4	Commercial auto liability					
21.	Auto physical damage					
22.	Aircraft (all perils)					
23.	Fidelity					
24.	Surety					
26.	Burglary and theft					
	Boiler and machinery					
	Credit					
29.	International					
	Warranty					
31.	Reinsurance-nonproportional					
	assumed property					
32.	Reinsurance-nonproportional					
	assumed liability					
33.	Reinsurance-nonproportional					
	assumed financial lines					
34.	Aggregate write-ins for other lines					
	of business					
35.		24,801,277				24,801,277
	Accrued retrospective premiums based on exp		•	ı		2.,50.,217
	E ( 130 )					
	Balance (Sum of Lines 35 through 37)					24,801,277
						۲,001,211

	DETAILS OF WRITE-IN LINES			
3401. 3402.				 
3403.		 NON	· · · · · · · · · · · · · · · · · · ·	 
3498.	Sum of remaining write-ins for	11011		
	Sum of remaining write-ins for Line 34 from overflow page			
3499.	Totals (Lines 3401 through 3403			
	plus 3498) (Line 34 above)			

<sup>(</sup>a) State here basis of computation used in each case Daily Prorata

# UNDERWRITING AND INVESTMENT EXHIBIT PART 1B – PREMIUMS WRITTEN

		1	Reinsurand	e Assumed	Reinsurance Ceded		6
			2	3	4	5	Net Premiums
		Direct		From		То	Written
		Business	From	Non-	То	Non-	Cols. 1 + 2 + 3 -
	Line of Business	(a)	Affiliates	Affiliates	Affiliates	Affiliates	4 - 5
1.	Fire	3,936,632				1,557,902	2,378,730
2.	Allied lines	26,730,477				9,331,801	17,398,676
	Farmowners multiple peril						
4.	Homeowners multiple peril	48,809,909				18,039,373	30,770,536
5.	Commercial multiple peril						
6.	Mortgage guaranty						
8.	Ocean marine						
9.	Inland marine						
10.	Financial guaranty						
11.1	Medical professional liabilityoccurrence						
11.2	Medical professional liabilityclaims-made						
12.	Earthquake						
13.	Group accident and health						
14.	Credit accident and health						
	(group and individual)						
15.	Other accident and health						
	Workers' compensation						
17.1	Other liability—occurrence						
	Other liability—claims-made						
17.3	Excess workers' compensation						
18.1	Products liability—occurrence						
18.2	Products liability—claims-made						
19.1,19.2	Private passenger auto liability						
	Commercial auto liability						
	Auto physical damage						
22.	Aircraft (all perils)						
23.	Fidelity						
24.	Surety						
	Burglary and theft						
27.	Boiler and machinery						
28.	Credit						
29.	International						
30.	Warranty						
31.	Reinsurance-nonproportional						
	assumed property	XXX					
32.	Reinsurance-nonproportional						
	assumed liability	XXX					
33.	Reinsurance-nonproportional						
	assumed financial lines	XXX					
34.	Aggregate write-ins for other lines						
	of business						
35.	TOTALS	79,477,018				28,929,076	50,547,942

DETAILS OF WRITE-IN LINES				
3401.				
3402.				
3403.	l Nic	)	 	
3498. Sum of remaining write-ins for	INC	/INL		
Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403				
plus 3498) (Line 34 above)				

'a'	Dogs the	compan	v'e direct	nramiume	writton	include	premiums	racordad	on an	inetallma	nt hacic?
u		, compan	y 3 un cct	promiums	WITHOUT	IIICIUUC	promiums	recorded	on an	IIIStalliiio	iii basis :

Yes[] No[X]

If yes: 1. The amount of such installment premiums \$

<sup>2.</sup> Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$

# UNDERWRITING AND INVESTMENT EXHIBIT PART 2 – LOSSES PAID AND INCURRED

11.2 Medical profess 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical o 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	s multiple peril multiple peril aranty e e aranty essional liability—occurrence essional liability—claims-made ent and health ent and health (group and individual) nt and health	1 Direct Business 2,815,350 8,872,615 16,713,577	Reinsurance Assumed	3  Reinsurance Recovered  808,396  1,051,220	4  Net Payments (Cols. 1 + 2 - 3)  2,815,350 8,064,219  15,662,357	Net Losses	Net Losses Unpaid Prior Year 1,247,258 2,449,716 8,035,081	Losses Incurred Current Year (Cols. 4 + 5 - 6)  2,276,763 7,964,300  16,290,194	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)  81.143 45.231
2. Allied lines 3. Farmowners m 4. Homeowners n 5. Commercial m 6. Mortgage guar 8. Ocean marine 9. Inland marine 10. Financial guar 11.1 Medical profes 11.2 Medical profes 12. Earthquake 13. Group acciden 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical o 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	s multiple peril multiple peril aranty e e aranty essional liability—occurrence essional liability—claims-made ent and health ent and health (group and individual) nt and health	8,872,615			8,064,219	2,349,797	2,449,716	7,964,300	45.231
3. Farmowners m 4. Homeowners n 5. Commercial m 6. Mortgage guan 8. Ocean marine 9. Inland marine 10. Financial guara 11.1 Medical profess 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	s multiple peril multiple peril aranty e e aranty essional liability—occurrence essional liability—claims-made ent and health ent and health (group and individual) nt and health								
4. Homeowners n 5. Commercial mi 6. Mortgage guari 8. Ocean marine 9. Inland marine 10. Financial guari 11.1 Medical profesi 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	s multiple peril multiple peril aranty e e aranty essional liability—occurrence essional liability—claims-made ent and health ent and health (group and individual) nt and health	16,713,577		1,051,220	15,662,357	8,662,918	8,035,081	16,290,194	49.850
5. Commercial mi 6. Mortgage guan 8. Ocean marine 9. Inland marine 10. Financial guara 11.1 Medical profes: 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker: 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical o 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	multiple peril aranty e e e aranty sessional liability—occurrence sessional liability—claims-made ent and health ent and health (group and individual) nt and health	16,713,577		1,051,220	15,662,357	8,662,918	8,035,081	16,290,194	49.850
6. Mortgage guara 8. Ocean marine 9. Inland marine 10. Financial guara 11.1 Medical profess 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical c 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	aranty e e aranty essional liability—occurrence essional liability—claims-made ent and health ent and health (group and individual) nt and health								
8. Ocean marine 9. Inland marine 10. Financial guara 11.1 Medical profess 11.2 Medical profess 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical c 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	e aranty assional liability—occurrence assional liability—claims-made and health and health (group and individual) and health								
9. Inland marine 10. Financial guara 11.1 Medical profess 11.2 Medical profess 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabiliti 18.2 Products liabiliti 18.2 Products liabiliti 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	e aranty essional liability—occurrence essional liability—claims-made ent and health ent and health (group and individual) nt and health								
10. Financial guara 11.1 Medical profess 11.2 Medical profess 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabiliti 18.2 Products liabiliti 18.2 Products liabiliti 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	aranty essional liability—occurrence essional liability—claims-made ent and health ent and health (group and individual) nt and health								
11.1 Medical profess 11.2 Medical profess 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	essional liability—occurrence essional liability—claims-made ent and health ent and health (group and individual) nt and health								
11.2 Medical profess 12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	essional liability—claims-made ent and health ent and health (group and individual) nt and health								
12. Earthquake 13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	ent and health ent and health (group and individual) nt and health								
13. Group accident 14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical o 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	nt and health (group and individual) nt and health								
14. Credit accident 15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	nt and health (group and individual) nt and health								
15. Other accident 16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th	nt and health								
16. Workers' comp 17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical o 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th									
17.1 Other liability— 17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical o 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th									
17.2 Other liability— 17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th				1					
17.3 Excess worker 18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical of 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th									
18.1 Products liabilit 18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical o 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th									
18.2 Products liabilit 19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical c 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th									
19.1,19.2 Private passen 19.3,19.4 Commercial au 21. Auto physical c 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th									
19.3,19.4 Commercial au 21. Auto physical c 22. Aircraft (all peri 23. Fidelity 24. Surety 26. Burglary and th									
<ul><li>21. Auto physical c</li><li>22. Aircraft (all peri</li><li>23. Fidelity</li><li>24. Surety</li><li>26. Burglary and th</li></ul>									
<ul><li>22. Aircraft (all peri</li><li>23. Fidelity</li><li>24. Surety</li><li>26. Burglary and the</li></ul>									
<ul><li>23. Fidelity</li><li>24. Surety</li><li>26. Burglary and the</li></ul>	orile)								
<ul><li>24. Surety</li><li>26. Burglary and th</li></ul>	eriis)								
26. Burglary and th									
	theft								
<ol><li>Boiler and mad</li></ol>									
28. Credit	acimiery								
29. International									
30. Warranty									
		XXX							
	-nonproportional assumed property	XXX							
	nonproportional assumed property								
34. Aggregate write	-nonproportional assumed liability	XXX							
35. TOTALS		XXX			I				

DETAILS OF WRITE-IN LINES					
3401.					
3402.					
3403.	 	N(.)N	 	 	1
3498. Sum of remaining write-ins for Line 34 from overflow page		11011			
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)					

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

1   2   3   4   5   6   7		Incurred But Not Reporter		Incurred But Not Reported	8	9
Line of Business	1				İ	
2. Alled fines 956,866	Business Direct		osses Excl. ncurred But lot Reported		Unpaid	Net Unpaid Loss Adjustment Expenses
3. Farmowners multiple peril 4. Homoswors multiple peril 5. Commercial multiple paril 6. Mortage guarenty 8. Ocean marine 9. Intendia mustic 10. Financial guarenty 11. Medical professional liability—occurrence 11. Mortage guarenty 12. Mortage guarenty 13. Commercial and liability—occurrence 14. Set guarenty 15. Commercial and liability—occurrence 16. Set guarenty 17. Complet accident and nealth (group and individual) 18. Complet accident and nealth (group and individual) 19. Complet accident and individual 19. Complet and individual 19. Complet accident and individual 19	60		60,647 648,024		708,671	232,03
4. Homeowners multiple peril 4.549.862 767.974 3.781.888 6.066,597 1,185,567 8.662.918 5. Commercian multiple peril 8. Mortgage guaranty 8. 0. Rosan marine 9. Rosan			369,278 2,892,227	911,709	2,349,796	1,176,28
5. Commercial multiple peral 6. Mortage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11. Medical professional liability—courrence 11.2 Medical professional liability—colaris-mande 12. Earthquash 13. Stroup accident and health (group and individual) 14. Coeda cocident and health (group and individual) 15. Worker's compression 17. Offer liability—courrence 17.2 Offer liability—courrence 17.2 Offer liability—courrence 17.2 Offer liability—courrence 17.3 Excess worker's compression 18. Products liability—courrence 19. Expert due to select a courrence 19. Expert due to select a courrence 19. Products liability—courrence 19. Products liability—courrence 19. Products liability—courrence 19. In the selection of the	il					
6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liability—occurrence 11.1 Medical professional liability—occurrence 11.2 Medical professional liability—oclaims-made 12. Earthquake 13. Group acodent and health (group and individual) 14. Oreità acodent and health (group and individual) 15. Orber acodent and health (group and individual) 16. Workers' compensation 17.1 Orber liability—occurrence 17.2 Orber liability—occurrence 17.2 Chers indivity—occurrence 17.3 Excuss workers' compensation 18. Products liability—occurrence 18.1 Products liability—occurrence 18.2 Products liability—occurrence 18.1 Products liability—occurrence 18.2 Products liability—occurrence 18.3 Products liability—occurrence 18.3 Products liability—occurrence 18.4 Products liability—occurrence 18.5 Products liability—occurrence 18.6 Products liability—occurrence 18.7 Products liability—occurrence 18.8 Products liability—occurrence 18.9 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.2 Products liability—occurrence 18.3 Products liability—occurrence 18.4 Products liability—occurrence 18.5 Products liability—occurrence 18.6 Products liability—occurrence 18.6 Products liability—occurrence 18.7 Products liability—occurrence 18.8 Products liability—occurrence 18.9 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.1 Products liability—occurrence 18.2 Products liability—occurrence 18.3 Products liability—occurrence 18.4 Products liability—occurrence 18.5 Products liability—occurrence 18.6 Products liability—occurrence 18.6 Products liability—occurrence 18.7 Products liability—occurrence 18.8 Products liability—occurrence 18.9 Products liability—occurrence 18.9 Products liability—occurr			3,781,888 6,066,597	1,185,567	8,662,918	2,328,20
8. Ocean marine 9. Inland marine 10. Financial guaranty 11. Medical professional liabilty—claims-made 12. Earthquake 13. Group accident and health 14. Credit accident and health (goup and individual) 15. Olther accident and health 16. Worker's Compensation 17. Olther liability—claims-made 17. 2 Other liability—claims-made 17. 2 Other liability—claims-made 17. 2 Other liability—claims-made 17. 3 Excess workers' compensation 18. Products liability—claims-made 18. Products liability—claims-made 18. Products liability—claims-made 18. Products liability—claims-made 18. Products liability—claims-made 19. 2 Averance accident and health (soup and individual) 2 Averance accident and health (soup and individual) 3 Individual accident and health (soup and individual) 4 Sucress workers' compensation 4 Commercial accident and health (soup and individual) 5 Commercial acuto liability—claims-made 19. 2 Averance (all penis) 2 Averant (all penis) 2 Averant (all penis) 2 Averant (all penis) 2 Averant (all penis) 2 Averant (all penis) 2 Averant (all penis) 2 Averant (all penis) 3 Fidelity 4 Averant (all penis) 4 Averant (all penis) 5 Coeffit 6 Averant (all penis) 7 Averant (all penis) 8 A						
9. Inland marine   10. Financial guisarity   11. Medical professional liability—courrence   11. Medical professional liability—claims-made   2. Earthquake   3. Grup accident and health (group and individual)   (a)   4. Credit accident and health (group and individual)   (b) Morker's compensation   (a)   (b) Morker's compensation   (b) Morker's compensation   (c) Morker's compensation   (d)						
10   Financial guaranty						
1.1 Medical professional lability—courrence     1.2 Medical professional lability—claims-made     1.2 Earthquake						
11.2 Medical professional liability—claims-made   2. Earthquake   3. Grup accident and health   (a)   (a)   (a)   (b) ther accident and health (group and individual)   (a)   (b) ther accident and health (group and individual)   (a)   (b) ther accident and health (b)   (a)   (b) ther accident and health (b)   (a)   (b) therefore the accident and health (b)   (a)   (b) therefore the accident and health (b)   (a)   (b) therefore the accident and health (b)   (b) therefore the accident and health (b)   (a)   (b) therefore the accident and health (b)   (b) therefore the accident and health (b)   (b) therefore the accident and health (b	lity occurrence					
12. Earthquake   13. Group accident and health   (a)   (a)   (a)   (a)   (a)   (b)   (c)   (a)	lity—claims-made					
13. Group accident and health (group and individual) 15. Other accident and health (group and individual) 15. Other accident and health (group and individual) 16. Worker's compensation 17.1 Other liability—occurrence 17.2 Other liability—chairms-made 17.2 Excess workers' compensation 18. Products liability—chairms-made 19. Products liability—chairms-ma	inty—ciamis-made					
14. Credit accident and health (group and individual)	th				(a)	
15. Other accident and health 16. Worker's compensation 17.1 Other liability—occurrence 17.2 Other liability—occurrence 17.2 Other liability—occurrence 18. Products liability—occurrence 18. Products liability—occurrence 18. Products liability—occurrence 18. Products liability—occurrence 19. Products liability—o	h (group and individual)				(-,/	
16. Workers' compensation 17.1 Other liability—cocurrence 17.2 Other liability—cocurrence 17.3 Excess workers' compensation 18. Products liability—claims-made 18. Products liability—claims-made 18. Products liability—claims-made 18. Products liability—claims-made 18. Products liability—claims-made 18. Products liability 19. Private passenger auto liability 21. Auto physical damage 22. Aircraft (all perils) 23. Fidelity 24. Surety 26. Burglary and theft 27. Bolier and machinery 28. Credit 29. International 30. Warranty 31. Reinsurance-nonproportional assumed property 32. Reinsurance-nonproportional assumed property 33. Reinsurance-nonproportional assumed liability 34. XXX 35. Reinsurance-nonproportional assumed lines 35. XXX 36. Reinsurance-nonproportional assumed lines 36. XXX 37. Reinsurance-nonproportional assumed lines 37. Solier or there income to the lines of business					(a)	
17.2 Other liability—claims-made					(	
17.3 Excess workers' compensation					l	
18.1 Products liability—cocurrence	ade			l	1	
1,9.2 Products liability—claims-made						
1,19.2 Private passenger auto liability   3,19.4 Commercial auto liability   21. Auto physical damage   22. Aircraft (all perils)   3.15 Fidelity   24. Surety   25. Burglary and theft   27. Boiler and machinery   28. Credit   29. International   30. Warranty   31. Reinsurance-nonproportional assumed fiability   XXX   XXX   32. Reinsurance-nonproportional assumed filiability   XXX   XXX   33. Reinsurance-nonproportional assumed filines   XXX   XXX   34. Aggregate write-ins for other lines of business   3. Final Reinsurance   3. Final Reinsuranc	ence					
21. Auto physical damage   22. Aircraft (all perils)   23. Fidelity   24. Surety   26. Burglary and theft   27. Boiler and machinery   28. Credit   29. International   29. International   30. Warranty   31. Reinsurance-nonproportional assumed property   X X X   X X X X X X X X X X X X X X	-made					
21. Auto physical damage         22. Aircraft (all perils)         23. Fidelity         24. Surety         25. Burglary and theft         27. Boiler and machinery         28. Credit         29. International         30. Warranty         31. Reinsurance-nonproportional assumed property       XXX         32. Reinsurance-nonproportional assumed liability       XXX         33. Reinsurance-nonproportional assumed liability       XXX         34. Aggregate write-ins for other lines of business       XXX	ability					
22. Aircraft (all perils) 23. Fidelity 24. Surety 25. Burglary and theft 27. Boiler and machinery 28. Credit 29. International 30. Warranty 31. Reinsurance-nonproportional assumed property 32. Reinsurance-nonproportional assumed liability 33. Reinsurance-nonproportional assumed financial lines 34. Aggregate write-ins for other lines of business						
23. Fidelity 24. Surety 26. Burglary and theft 27. Boiler and machinery 28. Credit 29. International 30. Warranty 31. Reinsurance-nonproportional assumed property XXX 32. Reinsurance-nonproportional assumed liability XXX 33. Reinsurance-nonproportional assumed financial lines XXX 34. Aggregate write-ins for other lines of business						
24. Surety 26. Burglary and theft 27. Boiler and machinery 28. Credit 29. International 30. Warranty 31. Reinsurance-nonproportional assumed property 32. Reinsurance-nonproportional assumed liability 33. Reinsurance-nonproportional assumed liability 34. Reinsurance-nonproportional assumed financial lines 35. Reinsurance-nonproportional assumed financial lines 36. XXX 37. XXX						
26. Burglary and theft 27. Boiler and machinery 28. Credit 29. International 30. Warranty 31. Reinsurance-nonproportional assumed property 32. Reinsurance-nonproportional assumed liability 33. Reinsurance-nonproportional assumed financial lines 34. Aggregate write-ins for other lines of business						
27. Boiler and machinery 28. Credit 29. International 30. Warranty 31. Reinsurance-nonproportional assumed property 32. Reinsurance-nonproportional assumed liability 33. Reinsurance-nonproportional assumed financial lines 34. Aggregate write-ins for other lines of business						
28. Credit 29. International 30. Warranty 31. Reinsurance-nonproportional assumed property X X X 32. Reinsurance-nonproportional assumed liability X X X 33. Reinsurance-nonproportional assumed financial lines X X X 34. Aggregate write-ins for other lines of business						
29. International 30. Warranty 31. Reinsurance-nonproportional assumed property X X X 32. Reinsurance-nonproportional assumed liability X X X 33. Reinsurance-nonproportional assumed financial lines X X X 34. Aggregate write-ins for other lines of business						
30. Warranty 31. Reinsurance-nonproportional assumed property XXX 32. Reinsurance-nonproportional assumed liability XXX 33. Reinsurance-nonproportional assumed financial lines XXX 34. Aggregate write-ins for other lines of business						
31. Reinsuránce-nonproportional assumed property X X X 32. Reinsurance-nonproportional assumed liability X X X 33. Reinsurance-nonproportional assumed financial lines X X X 34. Aggregate write-ins for other lines of business						
32. Reinsurance-nonproportional assumed liability XXX XXX XXX XXX XXX XXX XXX XXX XXX X			XXX			
34. Aggregate write-ins for other lines of business	onal assumed liability X X X		XXX		l	
34. Aggregate write-ins for other lines of business 35. TOTALS 9.606.848 2.007.276 11.721.385	onal assumed financial lines XXX		XXX			
35 TOTALS 5 570 365 1 1 358 552 4 211 813 9 606 848 2 0 07 276 11 721 385	ther lines of business					
00. 10 11/LO   0,010,000   1,000,002   7,211,010   0,000,000   1,121,000	5,570		4,211,813 9,606,848	2,097,276	11,721,385	3,736,5

DETAILS OF WRITE-IN LINES						
3401.						
3402.						
3403.						
3498. Sum of remaining write-ins for Line 34 from overflow page 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	.	OIIL			 	
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)						

<sup>(</sup>a) Including \$ 0 for present value of life indemnity claims.

# UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		Loss Adjustment	Other Underwriting	Investment	
		Expenses	Expenses	Expenses	Total
1	Claim adjustment services:				
	1.1 Direct	6,450,000			6,450,000
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded	976,883			976,883
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	5,473,117			5,473,117
2	Commission and brokerage:				
	2.1 Direct, excluding contingent		8,372,627		8,372,627
	2.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent		696,454		696,454
	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 (2.1 + 2.2 - 2.3 +				
	2.4 + 2.5 - 2.6 + 2.7)		7,676,173		7,676,173
	Allowances to manager and agents				
	Advertising		438		438
	Boards, bureaus and associations		148,173		148,173
	Surveys and underwriting reports		484,203		484,203
	Audit of assureds' records				
8	Salary and related items:				
	8.1 Salaries	2,930,274	5,286,099		8,216,373
	8.2 Payroll taxes	86,625	346,501		433,126
	Employee relations and welfare	463,827	1,960,521		2,424,348
	Insurance	18,476	63,638		82,114
	Directors' fees				
	Travel and travel items	923	9,261		10,184
	Rent and rent items	109,903	440,144		550,047
	Equipment	108,223	1,391,369		1,499,592
	Cost or depreciation of EDP equipment and software				
	Printing and stationery	32,364	52,444		84,808
	Postage, telephone and telegraph, exchange and express	145,214	670,316		815,530
	Legal and auditing	32,063	329,151		361,214
	Totals (Lines 3 to 18)	3,927,892	11,182,258		15,110,150
20	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty				
	association credits of \$ 0		1,480,222		1,480,222
	20.2 Insurance department licenses and fees		4,808		4,808
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)				
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)		1,485,030		1,485,030
	Real estate expenses				
	Real estate taxes				
	Reimbursements by uninsured plans				
24	Aggregate write-ins for miscellaneous expenses	688,137	2,054,277	150,501	2,892,915
25		10,089,146	22,397,738	150,501	1
	Less unpaid expenses—current year	3,736,520	1,929,117		5,665,637
	Add unpaid expenses—prior year	3,229,726	2,142,285		5,372,011
	Amounts receivable relating to uninsured plans, prior year				
	Amounts receivable relating to uninsured plans, current year				
30	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	9,582,352	22,610,906	150,501	32,343,759

DETAILS OF WRITE-IN LINES				
2401. IT systems Support & Product development	448,115	1,543,508		1,991,623
2402. Outside Professional Services	199,252	415,638		614,890
2403. Line of Credit Fees	.		150,501	150,501
2498. Sum of remaining write-ins for Line 24 from overflow page	40,770	95,131		135,901
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	688.137	2.054.277	150.501	2.892.915

<sup>(</sup>a) Includes management fees of \$ 14,314,490 to affiliates and \$ 0 to non-affiliates.

# **EXHIBIT OF NET INVESTMENT INCOME**

		1 Collected During Year	2 Earned During Year
1.	U.S. Government bonds	(a)	
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a)	
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	(c)	
4.	Real estate	(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 149,302	122,68
7.	Derivative instruments	(f)	l
8.	Other invested assets		l
9.	Aggregate write-ins for investment income		l
10.	Total gross investment income	149,302	122,68
11.	Investment expenses		(g) 150,50
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)		150,50
17.	Net investment income (Line 10 minus Line 16)	:	(27,81
-	DETAILS OF WRITE-IN LINES	,	
901.			,

	DETAILS OF WRITE-IN LINES	
0901.	NAME	
0902.	NIC INIE	
0903.	INDINE	
0998.	Summary of remaining write-ins for Line 09 from overflow page	
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)	
1501.		
1502.	NANE	
1503.	NUNE	
1598.	Summary of remaining write-ins for Line 15 from overflow page	
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)	

(a)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(b)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued dividends on purchases.
(c)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(d)	Includes \$	0 for company's occupancy of its own b	ouildings; and excludes \$ 0 interes	t on encumbrances.
(e)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(f)	Includes \$	0 accrual of discount less \$	0 amortization of premium.	
(g)	Includes \$	0 investment expenses and \$	0 investment taxes, licenses and fees, excl	luding federal income taxes,
	attributable to segregate	d and Separate Accounts.		
(h)	Includes \$	0 interest on surplus notes and \$	0 interest on capital notes.	
(i)	Includes \$	0 depreciation on real estate and \$	0 depreciation on other invested asse	ets.

# **EXHIBIT OF CAPITAL GAINS (LOSSES)**

		1	2	3	4	5
		Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds					
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)					
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated) Common stocks of affiliates					
2.21	Common stocks of affiliates		N L			
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)					

	DETAILS OF WRITE-IN LINES			
0901.				
0902.				
0903.				
0998.	Summary of remaining write-ins for Line 09 from overflow page			
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)			

# **EXHIBIT OF NONADMITTED ASSETS**

		1	2	3
		Current Year		
		Total	Prior Year	Change in Total
		Nonadmitted	Total	Nonadmitted Assets
		Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
1.	Bonds (Schedule D)			
	Stocks (Schedule D):			
	2.1 Preferred stocks			
	2.2 Common stocks	1		
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First leins			
	3.2 Other than first leins			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
	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			
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)			
	Investment income due and accrued			
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	199,279	94,689	(104,590)
	15.2 Deferred premiums, agents' balances and installments booked but deferred			
	and not yet due			
	15.3 Accrued retrospective premiums and contracts subject to 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			
18.1	Current federal and foreign income tax recoverable and interest thereon			
18.2	• • • • • • • • • • • • • • • • • • • •			
19.	Guaranty funds receivable or on deposit			
20.	Electronic data processing equipment and software			
21.	Furniture and equipment, including health care delivery assets			
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable			
25.	Aggregate write-ins for other-than-invested assets	183,748	331,658	147,910
	Total assets excluding Separate Accounts, Segregated Accounts and	133,740	001,000	117,010
	Protected Cell Accounts (Lines 12 to 25)	383,027	426,347	43,320
27	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	, , , , , , , , , , , , , , , , , , , ,	120,047	10,920
28.	Total (Lines 26 and 27)	383.027	426,347	43,320
	\==========		120,011	10,020

DETAILS OF WRITE-IN LINES			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501. Surcharge Receivable	75,405	130,604	55,199
2502. Due from Agents	63,499	124,703	61,204
2503. Prepaid Expenses	44,844	76,351	31,507
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	183,748	331,658	147,910

#### Note 1 - Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices, Impact of NAIC/State Differences

The accompanying financial statements of Texas FAIR Plan Association (The "Association") have been prepared on the basis of accounting practices prescribed or permitted by the Texas Department of Insurance ("TDI"). TDI prescribed statutory accounting practices include state laws, regulations and general administrative rules applicable to all insurance companies domiciled in the State of Texas and the National Association of Insurance Commissioners' Accounting Practices and Procedures Manual ("NAIC SAP") subject to any deviations prescribed or permitted by TDI.

Reconciliations of net income and policyholders' surplus between the amounts reported in the accompanying financial statements (TX basis) and NAIC SAP follow:

Net Income	SSAP#	F/S Page	F/S Line #	2020	2019
Company state basis (P 4, Line 20, Columns 1&3)     State Prescribed Practices that is an increase / (decrease) from NAIC SAP     State Permitted Practices that is an increase / (decrease) from NAIC SAP	XXX	XXX	XXX	(\$5,932,717)	(\$ 2,918,918)
4. NAIC SAP $(1-2-3=4)$	XXX	XXX	XXX	(\$5,932,717)	(\$ 2,918,918)

Surplus	SSAP#	F/S Page	F/S Line #	December 31, 2020	December 31, 2019
<ul> <li>5. Company state basis (Page 3, Line 37, Columns 1 &amp; 2)</li> <li>6. State Prescribed Practices that is an increase / (decrease) from NAIC SAP</li> <li>7. State Permitted Practices that is an increase / (decrease) from NAIC SAP</li> </ul>	XXX	XXX	XXX	\$6,005,654 - -	\$ 12,133,051
8. NAIC SAP $(5-6-7=8)$	XXX	XXX	XXX	\$6,005,654	\$ 12,133,051

#### B. Use of Estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the amounts reported in these financial statements and notes. Actual results could differ from these estimates.

#### C. Accounting Policies

Direct and ceded premiums are earned over the terms of the related policies or reinsurance contracts, respectively. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed using pro rata methods for both direct and ceded business. The Association has a minimum policy premium of \$100.

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable. Net investment income consists primarily of interest income recognized on an accrual basis and is reduced by investment related expenses.

In addition, the company uses the following accounting policies:

- 1. Short-term investments are stated at amortized cost, which approximates market value.
- 2-9. Investment and mortgage loan related, Not applicable
- 10. The Association does not anticipate investment income when evaluating the need for premium deficiency reserves.
- 11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports, plus an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amounts are adequate, the ultimate liabilities may be in excess of or less than the amounts provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- 12. The Association has a written capitalization policy. The predefined capitalization policy thresholds have not changed from the prior year.
- 13. Not applicable as the Association does not write medical insurance with prescription drug coverage.

D. Going Concern

Based upon its evaluation of relevant conditions and events, management does not have substantial doubt about the Association's ability to continue as a going concern.

#### Note 2 - Accounting Changes and Correction of Errors

A. Material Changes in Accounting Principles

Not applicable

B. Correction of Errors

Not applicable

#### Note 3 - Business Combinations and Goodwill

Not applicable

#### Note 4 - Discontinued Operations

Not applicable

#### Note 5 - Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

None

B. Debt Restructuring

None

C. Reverse Mortgages

None

D. Loan-Backed and Structured Securities

None

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

None

F. Repurchase Agreements Transactions Accounted for as a Secured Borrowing

None

G. Reverse Repurchase Agreements Transactions Accounted for as a Secured Borrowing

None

H. Repurchase Agreements Transactions Accounted for as a Sale

None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

None

J. Real Estate

None

K. Low-Income Housing Tax Credits (LIHTC)

None

#### L. Restricted Assets

- 1. The Association holds no restricted assets.
- 2. Detail of Assets Pledged as Collateral not Captured in Other Categories

None

3. Detail of Other Restricted Assets

None

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

None

M. Working Capital Finance Investments

None

N. Offsetting and Netting of Assets and Liabilities

None

O. 5GI Securities

None

P. Short Sales

None

Q. Prepayment Penalty and Acceleration Fees

None

#### Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

Not applicable

#### Note 7 – Investment Income

A. Accrued Investment Income

The Association does not admit investment income due and accrued if amounts are over 90 days past due.

B. Amounts Nonadmitted

Not applicable

#### Note 8 – Derivative Instruments

Not applicable

### Note 9 – Income Taxes

As of June 18, 2005, the Association is a tax exempt organization whose gross income is excludable under Internal Revenue Code Section 115 and is no longer required to file federal tax returns.

#### Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of Relationships

On October 10, 2002, the Texas Commissioner of Insurance enacted Article 21.49A of the Texas Insurance Code creating the Texas FAIR Plan Association. The commissioner then instructed the Texas Windstorm Insurance Association ("TWIA") to manage the activities of the Association.

B. Significant Transactions and Changes in Terms of Intercompany Arrangements

None

C. Transactions with related parties who are not reported on Schedule Y

None

D. Amounts Due to or from Related Parties

During 2020 and 2019 the Association incurred expenses under its service contract with TWIA in the amounts of \$14,314,490 and \$14,133,008 respectively (See Note 10E). As of December 31, 2020 and December 31, 2019, the Association held an intercompany payable of \$1,132,407 and \$1,075,625, respectively with TWIA. This arrangement is subject to a written agreement which requires that balances be settled within 30 days.

E. Management, Service Contracts, Cost Sharing Arrangements

In 2002, the Association entered into a service contract with TWIA in which the Association is to reimburse TWIA for all expenditures, professional fees, consulting services, allocated employee time, lost investment income and other costs directly associated with the services provided by TWIA on behalf of the Association.

F. Guarantees or Undertakings for Related Parties

None

G. Nature of Relationships that Could Affect Operations

None

H. Amount Deducted for Investment in Upstream Company

Not applicable

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

Not applicable

J. Write-downs for Impairment of Investments in Affiliates

Not applicable

K. Foreign Insurance Subsidiary Valued Using CARVM

Not applicable

L. Downstream Holding Company Valued Using Look-Through Method

Not applicable

M. All SCA Investments

Not applicable

N. Investment in Insurance SCAs

Not applicable

O. SCA or SSAP No. 48 Entity Loss Tracking

Not applicable

#### Note 11 - Debt

- A. The Association has renewed a \$40,000,000 line of credit with one of its primary financial institutions effective August 31, 2020. This line of credit terminates on August 29, 2021. There were no draws against the line of credit in 2019 or 2020. The Association pays the lender a 0.5% commitment fee against the unused portion of the line of credit.
- B. FHLB (Federal Home Loan Bank) Agreements

Not applicable

# Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

Not Applicable

B. Description of Investment Policies

Not Applicable

C. Fair Value Measurements of Plan Assets at Reporting Date

Not Applicable

D. Rate of Return Assumptions

Not Applicable

E. Defined Contribution Plans

Not Applicable

F. Multiemployer Plans

Not applicable

G. Consolidated/Holding Company Plans

Not applicable

H. Postemployment Benefits and Compensated Absences

The Association has no obligations to current or former employees for benefits after their employment but before their retirement other than for compensation related to earned personal time off. The liability for earned but untaken personal time off has been accrued.

I. Impact of Medicare Modernization Act on Postretirement Benefits

Not applicable

#### Note 13 - Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

In August 2017, Hurricane Harvey struck the Texas Coast impacting policyholders of the Association. Gross and net of reinsurance, the ultimate loss and loss adjustment expenses from Hurricane Harvey are estimated to be approximately \$85,000,000 and \$41,198,680, respectively. The line of credit established by the Association provides for improved liquidity to pay claims (see note 11). Texas Insurance Code 2211 allows the Association to seek funding for expenses and liabilities incurred by the association by issuing public securities or by assessing member companies upon approval by the Texas Department of Insurance Commissioner (Commissioner).

### Note 14 - Liabilities, Contingencies and Assessments

A. Contingent Commitments

The Association has no commitments or contingent commitments to other entities.

B. Assessments

1. Liability and Related Asset

The Association is subject to a fire assessment levied by the State of Texas. The assessment is premium based and recorded at the time premiums are written. The Association is not subject to loss-based assessments. The Association has accrued a liability as of December 31, 2020 for the fire assessment in the amount of \$49,000 which represents management's best estimate based on assessment rate information received from the State of Texas. The assessment is recouped by imposing a surcharge on policies written. Surcharges receivable totaling \$75,405 and \$124,703 have been non-admitted as of December 31, 2020 and December 31, 2019 respectively. Policy surcharges collected were \$103,044 and \$127,793 for the periods ended December 31, 2020 and December 31, 2019, respectively.

#### 2. Rollforward of Related Asset

Description	Amount
a. Assets recognized from paid and accrued	\$ 124,703
premium tax offsets and policy surcharges	
prior year-end	
b. Decreases current year:	
Premium tax offsets applied	-
Premium tax offsets charged off	-
Policy surcharges collected	103,044
Policy surcharges charged off	-
c. Increases current year:	
Premium tax offsets accrued	-
Policy surcharges accrued	53,746
d. Assets recognized from paid and accrued	
premium tax offsets and policy surcharges at	
December 31, 2020	\$ 75,405

#### 3. Long-term Care Insolvencies

None

C. Gain Contingencies

Not applicable

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

The Association paid no amounts separately identified in the current year to settle claims related to extra contractual obligations or bad faith clams resulting from lawsuits.

Description	Direct
Claims related ECO and bad faith losses paid during the reporting period	\$ 0

Number of claims for which amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits.

(a)	0-25 Claims	(b)	26-50 Claims	(c)	51-100 Claims	(d)	101-500 Claims	(e)	More than 500 Claims	
	v									

Indicate whether claim count information is disclosed per claim or per claimant:

(f) Per Claim [X]

(g) Per Claimant [ ]

E. Product Warranties

Not applicable

F. Joint and Several Liabilities

Not applicable

G. Other Contingencies

The Association is subject to various investigations, claims and legal proceedings covering a wide range of matters that arise in the ordinary course of business. Management believes that any liability that may ultimately result from the resolution of these matters in excess of the amounts provided will not have a material adverse effect on the financial position of the Association. These matters are subject to various uncertainties, and some of these matters may be resolved unfavorably to the Association.

### Note 15 – Leases

A. Lessee Leasing Arrangements

Not applicable

B. Lessor Leasing Arrangements

Not applicable

## Note 16 - Information about Financial Instruments with Off-Balance Sheet Risk

Not applicable

#### Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

Not applicable

## Note 18 - Gain or Loss from Uninsured Plans and Uninsured Portion of Partially Insured Plans

Not applicable

#### Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable

#### Note 20 – Fair Value Measurements

A. Inputs Used for Assets and Liabilities Measured and Reported at Fair Value

Not applicable

B. Other Fair Value Disclosures

Not applicable

C. Fair Values for All Financial Instruments by Levels 1, 2 and 3

The table below reflects the fair values and admitted values of all admitted assets and liabilities that are financial instruments. The fair values are also categorized into the three-level fair value hierarchy. The three-level fair value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined. The three levels are defined as follows.

Level 1- Quoted Prices in Active Markets for Identical Assets and Liabilities.

Level 2 - Significant Other Observable Inputs: This category is for items measured at fair value on a recurring basis often determined by independent pricing services using observable inputs. The Association has no assets or liabilities measured at fair value in this category.

Level 3 - Significant Unobservable Inputs: The Association has no assets or liabilities measured at fair value in this category.

Cash, cash equivalents and short-term investments are the only financial instruments held by the Association and the carrying value and fair value are the same.

Type or Class of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Leve	12	Level	13	Value (NAV)		(Carrying Value)	
Cash, cash equivalents and short-term investments	\$ 40,367,948	\$ 40,367,948	\$ 40,367,948	\$	-	\$	-	\$	-	\$	-
Exempt Money Market Mutual Funds – as Identified by SVO	\$ 17,349,221	\$ 17,349,221	\$ -	\$	-	\$	-	\$17,349,22	1	\$	-
Total Cash, Cash Equivalents and Short-Term Investments	\$ 57,717,169	\$ 57,717,169	\$ 40,367,948	\$	-	\$	-	\$17,349,22	1	\$	-

D. Items for which Not Practicable to Estimate Fair Values

Not applicable

E. Instruments Measured at Net Asset Value (NAV)

The Association has elected to use NAV for all money market mutual funds in lieu of fair value as NAV is more readily available. These funds are backed by high quality, very liquid short-term instruments and the probability is remote that the funds would be sold for a value other than NAV.

### Note 21 – Other Items

A. Unusual or Infrequent Items

Not applicable

B. Troubled Debt Restructuring for Debtors

Not applicable

C. Other Disclosures

None

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-transferable Tax Credits

Not applicable

F. Subprime Mortgage Related Risk Exposure

Not applicable

G. Insurance Linked Securities (ILS) Contracts

Not applicable

H. The Amount that Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

Not applicable

#### Note 22 - Events Subsequent

The Association has evaluated subsequent events through February 25, 2021, the date of issuance of these statutory financial statements. There were no events occurring subsequent to the end of the year that merited recognition or disclosure in these statements.

#### Note 23 - Reinsurance

A. Unsecured Reinsurance Recoverables

The Association has unsecured aggregate recoverables for losses, paid and unpaid including IBNR, loss adjustment expenses and unearned premium with individual reinsurers, authorized or unauthorized, that exceed 3% of the Company's policyholder surplus.

Individual Reinsurers Who Are Not Members of a Group

marviduai remsureis who h	de Not Members of a Gloup	
FEIN	Reinsurer Name	Unsecured Amount
22-2005057	Everest Reinsurance Company	\$675,802
31-0542366	The Cincinnati Insurance Company	162,780
13-5616275	Transatlantic Reinsurance Company	320,600
AA-3194168	Aspen Bermuda Ltd.	204,588
AA-3194122	DaVinci Reins	253,329
AA-3194130	Endurance Speciality Ins Ltd.	440,188
AA-1340125	Hannover Rück SE	194,576
AA-1126033	Lloyd's Underwriter Syndicate No. 0033 HIS	280,483
AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR	181,712
AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE	511,839
AA-3190686	Partner Reinsurance Company Ltd.	395,827
AA-3190339	Renaissance Reinsurance Ltd.	379,994
AA-3190870	Validus Reinsurance, Ltd.	452,290
AA-3194158	Allianz Risk Transfer Ltd.	462,368
AA-1320031	SCOR Global P&C S.E Lirma S7300	245,000

Individual Reinsurers Who are Members of a Group

Group Code	FEIN	Reinsurer Name	Unsecured Amount
		NONE	

All Members of the Groups Shown above with Unsecured Reinsurance Recoverables

Group Code	FEIN	Reinsurer Name	Unsecured Amount
		NONE	
Total Group			

#### B. Reinsurance Recoverables in Dispute

The Association does not have reinsurance recoverables in dispute for paid losses and loss adjustment expenses that exceed 5% of policyholders' surplus from an individual reinsurer or exceed 10% of policyholders' surplus in aggregate.

		Status of Dispute		
Name of Reinsurer	Total Amount in Dispute	Notification	Arbitration	Litigation
None				

#### C. Reinsurance Assumed and Ceded

1. The following table summarizes the assumed and ceded unearned premiums and related commissions equity at the end of the quarter.

	Assu	med	Ce	ded	Assumed Le	ess Ceded
	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity
a. Affiliates						
b. All other			14,464,539	433,936	(14,464,539)	(433,936)
c. Totals			14,464,539	433,936	(14,464,539)	(433,936)
d. Direct Unea	arned Premium Re	eserve \$ 3	9,265,816			

The maximum amount of return commission that would have been due the reinsurers if they or the Association had cancelled the Association's excess of loss reinsurance agreement is \$1,446,454 as of December 31, 2020.

- 1. No accrual exists at the end of the current period for additional or return commission, predicated on loss experience or on any other form of profit sharing agreements in this quarterly statement as a result of existing contractual arrangements.
- 3. The Association does not use protected cells as an alternative to traditional reinsurance.
- D. Uncollectible Reinsurance

None

E. Commutation of Ceded Reinsurance

Not applicable

F. Retroactive Reinsurance

Not applicable

G. Reinsurance Accounted for as a Deposit

Not applicable

H. Run-off Agreements

Not applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable

K. Reinsurance Credit on Contracts Covering Health Business

Not applicable

#### Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

Not applicable

#### Note 25 - Changes in Incurred Losses and Loss Adjustment Expenses

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Current year changes in estimates of the costs of prior year losses and loss adjustment expenses (LAE) affect the current year Statement of Income. Increases in those estimates increase current year expense and are referred to as unfavorable development or prior year reserve shortages. Decreases in those estimates decrease current year expense and are referred to as favorable development or prior year reserve redundancies. Current calendar year losses and LAE reflected on the Statement of Income of \$36,620,402 are higher by \$254,554 due to unfavorable development of prior year estimates. Increases or decreases of this nature occur as the result of claim settlements and receipt and evaluation of additional information regarding unpaid claims. Recent development trends are also taken into account in evaluating the overall adequacy of reserves. Due to the inherently uncertain process involving loss and loss adjustment expense reserve estimates, the final resolution of the ultimate liability may be different from that anticipated at the reporting date. The Appointed Actuary for the Association has opined that the loss and LAE reserves as of December 31, 2020 make a reasonable provision for Texas FAIR Plan Association.

Rollforward of unpaid losses and loss adjustment expenses	December 31, 2020	December 31, 2019
Balance as of January 1,	\$ 27,423,810	\$ 34,208,449
Less: Reinsurance Recoverable	12,462,029	17,463,842
Net Balance at January 1,	14,961,781	16,744,607
Incurred, net of reinsurance, related to:		
Current year	36,365,848	43,796,151
Prior years	254,554	(5,554,880)
Net Incurred	36,620,402	38,241,271
Paid, net of reinsurance, related to:		
Current year	(25,892,230)	(33,788,722)
Prior years	(10,232,047)	(6,235,375)
Net Paid Losses	(36,124,277)	(40,024,097)
Net Balance at end of period,	15,457,906	14,961,781
Plus: Reinsurance Recoverable	7,562,066	12,462,029
Balance at end of period,	\$ 23,019,972	\$ 27,423,810

#### B. Significant Changes in Reserving Methodology

Not applicable

#### Note 26 - Intercompany Pooling Arrangements

Not applicable

#### Note 27 – Structured Settlements

Not applicable

#### Note 28 – Health Care Receivables

Not applicable

#### **Note 29 – Participating Policies**

Not applicable

## Note 30 – Premium Deficiency Reserves

The Association evaluated the need to record a premium deficiency reserve as of the end of the current year. No premium deficiency reserve was required as of December 31, 2020. The Association does not anticipate investment income when evaluating the need for premium deficiency reserves.

(1) Liability carried for premium deficiency reserve

\$-0-

(2) Date of the most recent evaluation of this liability

December 31, 2020

(3) Was anticipated investment income utilized in calculation?

## Note 31 – High Deductibles

Not applicable

#### Note 32 - Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not applicable

## Note 33 – Asbestos and Environmental Reserves

Not applicable

## Note 34 - Subscriber Savings Accounts

Not applicable

## Note 35 – Multiple Peril Crop Insurance

Not applicable

## Note 36 - Financial Guaranty Insurance

A. and B. Not applicable

## PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?	Yes[]No[X]
	If yes, complete Schedule Y, Parts 1, 1A and 2.	
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements	Vert I Net I Nia IVI
	substantially similar to those required by such Act and regulations?	Yes[] No[] N/A [X]
1.3	State Regulating?	Texas
1.4	Is the reporting entity publicly traded or a member of a publicly traded group?	Yes[] No[X]
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.	
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes[]No[X]
2.2	If yes, date of change:	
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	12/31/2017
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.	12/31/2017
3.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).	02/12/2019
3.4	By what department or departments? Texas Department of Insurance	
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments?	Yes[X] No[] N/A[]
3.6	Have all of the recommendations within the latest financial examination report been complied with?	Yes [X] No [ ] N/A [ ]
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  4.11 sales of new business?	Vee [ ] Ne [ V]
	4.11 sales of new business? 4.12 renewals?	Yes[] No[X] Yes[] No[X]
4.2	During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:	
	<ul><li>4.21 sales of new business?</li><li>4.22 renewals?</li></ul>	Yes[] No[X] Yes[] No[X]
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	Yes[] No[X]
	If yes, complete and file the merger history data file with the NAIC.	

5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

п аррпсавте)	suspended or revoked by any governmental entity du	нну ше герогину репоа?		Ye.	s[]No[X	
If yes, give fu	ıll information:					
				.,		
Does any for	eign (non-United States) person or entity directly or inc	directly control 10% or more of the reporting enti	ty?	Ye	s[]No[X	]
If yes,						
7.2	21 State the percentage of foreign control.					
7.2		(s) or entity(s); or if the entity is a mutual or		_		
	,(,,	attorney-in-fact and identify the type of entity(s)				
	(e.g., individual, corporation, government, m					
	1	2				
	Nationality	Type of Entity				
is the compa	ny a subsidiary of a bank holding company regulated l	by the Federal Reserve Board?		Ye	s[]No[X	]
Is the compa	ny affiliated with one or more banks, thrifts or securitie	es firms?		Ye	s[]No[X	1
If response to affiliates regulation of the Compt	ny affiliated with one or more banks, thrifts or securities as 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insur	es firms?  city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi  urance Corporation (FDIC) and the Securities	ce	Ye	s[]No[X	]
Is the compa If response to affiliates regu of the Compt	ny affiliated with one or more banks, thrifts or securities as 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency	es firms?  city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi  urance Corporation (FDIC) and the Securities	ce	Ye	s[]No[X	]
Is the compa If response to affiliates regu of the Compt	ny affiliated with one or more banks, thrifts or securities as 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insur	es firms?  city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi  urance Corporation (FDIC) and the Securities	ce	Ye	s[] No[X	]
Is the compa If response to affiliates regu of the Compt	ny affiliated with one or more banks, thrifts or securities of 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary fe	es firms?  city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi  irrance Corporation (FDIC) and the Securities  deral regulator.		ı		
Is the compa If response to affiliates regu of the Compt	ny affiliated with one or more banks, thrifts or securities of 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insubmission (SEC)] and identify the affiliate's primary fe	es firms?  city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi  urance Corporation (FDIC) and the Securities  deral regulator.		ı		
Is the compa If response to affiliates regu of the Compt	ny affiliated with one or more banks, thrifts or securities as 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary fermal Affiliate	es firms?  city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi  urance Corporation (FDIC) and the Securities  deral regulator.  2  Location	3	4	5	6
Is the compa If response to affiliates regu of the Compt	ny affiliated with one or more banks, thrifts or securities as 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary fermal Affiliate	es firms?  city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi  urance Corporation (FDIC) and the Securities  deral regulator.  2  Location	3	4	5	6
Is the compa If response to affiliates regu of the Compt	ny affiliated with one or more banks, thrifts or securities as 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary fermal Affiliate	es firms?  city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi  urance Corporation (FDIC) and the Securities  deral regulator.  2  Location	3	4	5	6
Is the compa	ny affiliated with one or more banks, thrifts or securities as 3.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary ferman of the Currency (Affiliate Name	city and state of the main office) of any y [i.e. the Federal Reserve Board (FRB), the Offi urance Corporation (FDIC) and the Securities deral regulator.  2 Location (City, State)	3	4	5	6
Is the compa	ny affiliated with one or more banks, thrifts or securities as 3.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary fermal Affiliate  Name	city and state of the main office) of any y [i.e. the Federal Reserve Board (FRB), the Offi urance Corporation (FDIC) and the Securities deral regulator.  2 Location (City, State)	3	4	5	6
Is the compa  If response to affiliates regulated from the Compt Exchange Compatible Compt Exchange Compatible	ny affiliated with one or more banks, thrifts or securities as 3.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary feather than the services agency or and identify the affiliate and address of the independent certified public agentual audit?	city and state of the main office) of any  (i.e. the Federal Reserve Board (FRB), the Offi  irrance Corporation (FDIC) and the Securities deral regulator.  2  Location (City, State)	3	4	5	6
Is the compa	ny affiliated with one or more banks, thrifts or securities as 3.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary fermal Affiliate  Name	city and state of the main office) of any  (i.e. the Federal Reserve Board (FRB), the Offi  irrance Corporation (FDIC) and the Securities deral regulator.  2  Location (City, State)	3	4	5	6
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Is the compa	ny affiliated with one or more banks, thrifts or securities as 3.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary feather than the services agency or and identify the affiliate and address of the independent certified public agentual audit?	city and state of the main office) of any  (i.e. the Federal Reserve Board (FRB), the Offi  irrance Corporation (FDIC) and the Securities deral regulator.  2  Location (City, State)	3	4	5	6
Is the compa  If response to affiliates regulated from the Compt Exchange Compatible from the Compatible f	ny affiliated with one or more banks, thrifts or securities of 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary feathfiliate  1 Affiliate Name  Name  annual audit? mson & Matza LLP; 9500 Arboretum Blvd #120, Austin	city and state of the main office) of any  / [i.e. the Federal Reserve Board (FRB), the Offi  rance Corporation (FDIC) and the Securities  deral regulator.  2 Location (City, State)  accountant or accounting firm retained to  n, TX 78759	3 FRB	4	5	6
If response to affiliates regulated from the Compt Exchange Compt	ny affiliated with one or more banks, thrifts or securities of 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insubstraint (SEC)] and identify the affiliate's primary ferman for the financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insubstraint (SEC)] and identify the affiliate's primary ferman for the financial regulatory from the f	city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi prance Corporation (FDIC) and the Securities deral regulator.  2 Location (City, State)  accountant or accounting firm retained to  n, TX 78759	3 FRB	4	5	6
Is the compa  If response to affiliates regulated from the Compt Exchange Compatible E	ny affiliated with one or more banks, thrifts or securities of 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency proller of the Currency (OCC), the Federal Deposit Insubstration (SEC)] and identify the affiliate's primary fermands of the Affiliate Name  1	city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi prance Corporation (FDIC) and the Securities deral regulator.  2 Location (City, State)  accountant or accounting firm retained to  n, TX 78759	3 FRB	4 OCC	5 FDIC	6 SEC
Is the compa	ny affiliated with one or more banks, thrifts or securities of 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insubstraint (SEC)] and identify the affiliate's primary ferman for the financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insubstraint (SEC)] and identify the affiliate's primary ferman for the financial regulatory from the f	city and state of the main office) of any  y [i.e. the Federal Reserve Board (FRB), the Offi prance Corporation (FDIC) and the Securities deral regulator.  2 Location (City, State)  accountant or accounting firm retained to  n, TX 78759	3 FRB	4 OCC	5	6 SEC
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Is the compa  If response to affiliates regulated from the Compt Exchange Comparison of the Compt Exchange Comparison of the Compt Exchange Comparison of the Compt Exchange Comparison of the C	ny affiliated with one or more banks, thrifts or securities of 8.3 is yes, please provide the names and locations (collated by a federal financial regulatory services agency roller of the Currency (OCC), the Federal Deposit Insummission (SEC)] and identify the affiliate's primary feathfiliate Name  1 Affiliate Name Name  annual audit? mson & Matza LLP; 9500 Arboretum Blvd #120, Austing the provided and the prov	city and state of the main office) of any  v [i.e. the Federal Reserve Board (FRB), the Offi prance Corporation (FDIC) and the Securities deral regulator.  2 Location (City, State)  accountant or accounting firm retained to  n, TX 78759  p-audit services provided by the certified independental Financial Reporting Model Regulation (Model Regulation (Model Regulation))	3 FRB	4 OCC	5 FDIC	6 SEC

10.3	Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?	Yes[X] No[]
10.4	If response to 10.3 is yes, provide information related to this exemption:	
10.5	Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?	Yes[] No[X] N/A []
10.6	If the response to 10.5 is no or n/a, please explain.	
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?	
	Xiuyu Li, 5700 S MoPac Expy, Austin, TX 78749, In-house Actuary	
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes[] No[X]
	12.11 Name of real estate holding company 12.12 Number of parcels involved	
	12.13 Total book/adjusted carrying value	\$
12.2	If yes, provide explanation:	
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:	
13.1	What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?	
13.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on	
	risks wherever located?	Yes[] No[X]
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes[] No[X]
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes[] No[] N/A [X]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?  a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;	
	c. Compliance with applicable governmental laws, rules, and regulations;  d. The promot internal reporting of violations to an appropriate person or persons identified in the code; and	
	<ul> <li>d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and</li> <li>e. Accountability for adherence to the code.</li> </ul>	Yes [X] No []
4.11	If the response to 14.1 is no, please explain:	

14.2 H	Has the code of ethics for senior managers be	een amended?		Yes[]No[X]
4.21 l	If the response to 14.2 is yes, provide information	ition related to amendment(s)	).	
143 F	Have any provisions of the code of ethics beer	n waived for any of the speci	fied officers?	Yes[] No[X]
			ind dillott.	100[][10[X]
4.31 l	If the response to 14.3 is yes, provide the natu	ure of any waiver(s).		
	Is the reporting entity the beneficiary of a Lette confirming bank is not on the SVO Bank List?		o reinsurance where the issuing or	Yes[]No[X]
į	If the response to 15.1 is yes, indicate the Ame issuing or confirming bank of the Letter of Cree is triggered.			
	1	2	3	4
	American Bankers			
	Association	Issuing or Confirming		
	(ABA) Routing Number	Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
	ls the purchase or sale of all investments of th a subordinate committee thereof?		OF DIRECTORS on either by the board of directors or	Yes [X] No []
17. [ s 18. H		me reporting entity passed upor manent record of the proceed dure for disclosure to its board fficers, directors, trustees or r	on either by the board of directors or dings of its board of directors and all d of directors or trustees of any material	Yes [X] No []  Yes [X] No []
17. [ s 18. H	a subordinate committee thereof?  Does the reporting entity keep a complete pensubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its of	me reporting entity passed upor manent record of the proceed dure for disclosure to its board fficers, directors, trustees or rech person?	on either by the board of directors or dings of its board of directors and all d of directors or trustees of any material	Yes[X] No[]
17. [ s 18. H ii ii ii 19. H	a subordinate committee thereof?  Does the reporting entity keep a complete pensubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its of	me reporting entity passed upor manent record of the proceed dure for disclosure to its board fficers, directors, trustees or rich person?	on either by the board of directors or  dings of its board of directors and all  d of directors or trustees of any material responsible employees that is in conflict or	Yes[X] No[]
17. [ s s 18. H ii ii ii ii ii ii ii (	a subordinate committee thereof?  Does the reporting entity keep a complete persubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such likely to conflict with the official duties of such likely the official duties of such likely the official duties of such likely the official duties of such likely the official duties of such likely the official duties of such likely the official duties	manent record of the proceed dure for disclosure to its board efficers, directors, trustees or right person?  For accounting other than Second error of Separate Accounts, exclusive and processing the process of the person of t	on either by the board of directors or  dings of its board of directors and all  d of directors or trustees of any material responsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g.,	Yes [X] No [] Yes [X] No [] Yes [] No [X]
17. [ s s 18. H ii ii ii ii ii ii ii (	a subordinate committee thereof?  Does the reporting entity keep a complete perisubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such is likely to conflict with the official duties of such Has this statement been prepared using a bas Generally Accepted Accounting Principles)?	rmanent record of the procee dure for disclosure to its boan fficers, directors, trustees or r ch person?  F sis of accounting other than S e of Separate Accounts, excle	on either by the board of directors or dings of its board of directors and all d of directors or trustees of any material responsible employees that is in conflict or  INANCIAL Statutory Accounting Principles (e.g.,	Yes [X] No [] Yes [X] No [] Yes [] No [X]
17. [ s 18. H ii ii 19. H (	a subordinate committee thereof?  Does the reporting entity keep a complete perisubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such is likely to conflict with the official duties of such Has this statement been prepared using a bas Generally Accepted Accounting Principles)?	rmanent record of the procee dure for disclosure to its boar efficers, directors, trustees or r ch person?  F sis of accounting other than S e of Separate Accounts, excli 20.11 To 20.12 To	on either by the board of directors or  dings of its board of directors and all  d of directors or trustees of any material esponsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g., usive of policy loans): directors or other officers	Yes [X] No [] Yes [X] No []
17. [ s s 18. F ii ii ii ii ii ii ii ii ii ii ii ii i	a subordinate committee thereof?  Does the reporting entity keep a complete perisubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such is likely to conflict with the official duties of such Has this statement been prepared using a bas Generally Accepted Accounting Principles)?	rmanent record of the procee  dure for disclosure to its boar  fficers, directors, trustees or r  ch person?  F  sis of accounting other than S  e of Separate Accounts, exclo 20.11 To 20.12 To 20.13 Tru  of year (inclusive of Separate	dings of its board of directors and all  d of directors or trustees of any material responsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g.,  usive of policy loans): directors or other officers a stockholders not officers ustees, supreme or grand (Fraternal only)	Yes [X] No []  Yes [X] No []  Yes [] No [X]  \$ \$ \$ \$
17. [ s s 18. F ii ii ii ii ii ii ii ii ii ii ii ii i	a subordinate committee thereof?  Does the reporting entity keep a complete pensubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such likely to conflict with the official duties of such Has this statement been prepared using a bas Generally Accepted Accounting Principles)?  Total amount loaned during the year (inclusive	rmanent record of the procee  dure for disclosure to its boar  fficers, directors, trustees or r  ch person?  F  sis of accounting other than S  e of Separate Accounts, excli 20.11 To 20.12 To 20.13 Tri  of year (inclusive of Separate 20.21 To	dings of its board of directors and all  d of directors or trustees of any material responsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g.,  usive of policy loans): directors or other officers stockholders not officers ustees, supreme or grand (Fraternal only)	Yes [X] No []  Yes [X] No []  Yes [] No [X]  \$ \$ \$ \$
17. [ s s 18. F ii ii ii ii ii ii ii ii ii ii ii ii i	a subordinate committee thereof?  Does the reporting entity keep a complete pensubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such likely to conflict with the official duties of such Has this statement been prepared using a bas Generally Accepted Accounting Principles)?  Total amount loaned during the year (inclusive	rmanent record of the procee dure for disclosure to its board fficers, directors, trustees or r ch person?  F sis of accounting other than S e of Separate Accounts, exclored 20.11 To 20.12 To 20.13 Tru of year (inclusive of Separate 20.21 To 20.22 To	dings of its board of directors and all  d of directors or trustees of any material esponsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g.,  usive of policy loans): directors or other officers ustees, supreme or grand (Fraternal only)  e Accounts, exclusive of policy loans): directors or other officers	Yes [X] No [] Yes [X] No [] Yes [] No [X]
117. [ s s 118. H ii ii ii ii ii ii ii ii ii ii ii ii i	a subordinate committee thereof?  Does the reporting entity keep a complete pensubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such likely to conflict with the official duties of such Has this statement been prepared using a bas Generally Accepted Accounting Principles)?  Total amount loaned during the year (inclusive	rmanent record of the procee dure for disclosure to its boar efficers, directors, trustees or r ch person?  F sis of accounting other than S e of Separate Accounts, excli 20.11 To 20.12 To 20.13 Tri of year (inclusive of Separate 20.21 To 20.22 To 20.23 Tri ubject to a contractual obligat	dings of its board of directors and all  d of directors or trustees of any material responsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g.,  usive of policy loans): directors or other officers estockholders not officers ustees, supreme or grand (Fraternal only)  Accounts, exclusive of policy loans): directors or other officers ustees, supreme or grand (Fraternal only)	Yes [X] No []  Yes [X] No []  Yes [] No [X]  \$ \$ \$ \$
17. [ s s 18. H ii ii ii ii ii ii ii ii ii ii ii ii i	a subordinate committee thereof?  Does the reporting entity keep a complete pensubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such that is likely to conflict with the official duties of such that this statement been prepared using a base Generally Accepted Accounting Principles)?  Total amount loaned during the year (inclusive)  Total amount of loans outstanding at the end of the conflict with this statement such that the conflict with the official duties of su	rmanent record of the procee dure for disclosure to its boan efficers, directors, trustees or r ch person?  Full sis of accounting other than S e of Separate Accounts, exclored 20.11 To 20.12 To 20.13 Tru of year (inclusive of Separate 20.21 To 20.22 To 20.23 Tru ubject to a contractual obligat the statement?	dings of its board of directors and all  d of directors or trustees of any material responsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g.,  usive of policy loans): directors or other officers estockholders not officers ustees, supreme or grand (Fraternal only)  Accounts, exclusive of policy loans): directors or other officers ustees, supreme or grand (Fraternal only)	Yes [X] No []  Yes [X] No []  Yes [] No [X]  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
17. [ s s 18. H ii ii ii ii ii ii ii ii ii ii ii ii i	a subordinate committee thereof?  Does the reporting entity keep a complete pensubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such sis likely to conflict with the official duties of such sis likely to conflict with the official duties of such as this statement been prepared using a base Generally Accepted Accounting Principles)?  Total amount loaned during the year (inclusive)  Total amount of loans outstanding at the end of the statement such as the statement such	rmanent record of the procee  dure for disclosure to its boars  fficers, directors, trustees or r  ch person?  F  sis of accounting other than \$  e of Separate Accounts, excli  20.11 To  20.12 To  20.13 Tri  of year (inclusive of Separate  20.21 To  20.22 To  20.23 Tri  ubject to a contractual obligative statement?  31 of the current year:  21.21 Re	dings of its board of directors and all  d of directors or trustees of any material esponsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g., usive of policy loans): directors or other officers stockholders not officers ustees, supreme or grand (Fraternal only)  Accounts, exclusive of policy loans): directors or other officers stockholders not officers stockholders not officers stockholders not officers ustees, supreme or grand (Fraternal only) ion to transfer to another party without the	Yes [X] No []  Yes [X] No []  Yes [] No [X]  \$  \$  \$  Yes [] No [X]   Yes [] No [X]
17. [ s s 18. H ii ii ii ii ii ii ii ii ii ii ii ii i	a subordinate committee thereof?  Does the reporting entity keep a complete pensubordinate committees thereof?  Has the reporting entity an established proced interest or affiliation on the part of any of its official duties of such sis likely to conflict with the official duties of such sis likely to conflict with the official duties of such as this statement been prepared using a base Generally Accepted Accounting Principles)?  Total amount loaned during the year (inclusive)  Total amount of loans outstanding at the end of the statement such as the statement such	rmanent record of the procee  dure for disclosure to its board fficers, directors, trustees or rich person?  Final State of Separate Accounts, exclination of year (inclusive of Separate 20.21 To 20.23 Trustees of year (inclusive of	dings of its board of directors and all  d of directors or trustees of any material responsible employees that is in conflict or  INANCIAL  Statutory Accounting Principles (e.g.,  directors or other officers  stockholders not officers  ustees, supreme or grand (Fraternal only)  e Accounts, exclusive of policy loans):  directors or other officers  stockholders not officers  ustees, supreme or grand (Fraternal only)  indirectors or other officers  ustees, supreme or grand (Fraternal only)  ion to transfer to another party without the	Yes [X] No []  Yes [X] No []  Yes [] No [X]  \$ \$ \$ \$  Yes [] No [X]

22.1	Does this statement include payments for assessments as describe	d in the Annual Statement Instructions other than	
	guaranty fund or guaranty association assessments?		Yes[] No[X]
22.2	If answer is yes:		
	22	.21 Amount paid as losses or risk adjustment	\$
	22	.22 Amount paid as expenses	\$
	22	.23 Other amounts paid	\$
23.1	Does the reporting entity report any amounts due from parent, subs	idiaries or affiliates on Page 2 of this	
	statement?		Yes[]No[X]
23.2	If yes, indicate any amounts receivable from parent included in the f	Page 2 amount:	\$
		INVESTMENT	
24.01	Were all the stocks, bonds and other securities owned December 3	1 of current year, over which the reporting entity has	
	exclusive control, in the actual possession of the reporting entity on	said date? (other than securities lending programs	
	addressed in 24.03)		Yes[]No[X]
24.02	If no, give full and complete information, relating thereto: TFPA does not hold any stocks, bonds, or other securities. TFPA h mutual funds.	olds only cash bank accounts, CD's and money market	
24.03	For security lending programs, provide a description of the program	-	
	securities, and whether collateral is carried on or off-balance sheet. information is also provided)	(an alternative is to reference Note 17 where this	
	TFPA does not have a security lending program.		
24.04	For the reporting entity's securities lending program, report amount	of collateral for conforming programs as outlined	
	in the Risk Based Capital Instructions.		\$
24.05	For the reporting entity's securities lending program report amount of	of collateral for other programs.	\$
24.06	Does your securities lending program require 102% (domestic secu-	rities) and 105% (foreign securities) from the	
	counterparty at the outset of the contract?		Yes[] No[] N/A [X]
24.07	Does the reporting entity non-admit when the collateral received from	m the counterparty falls below 100%?	Yes[] No[] N/A [X]
24.08	Does the reporting entity or the reporting entity's securities lending a	agent utilize the Master Securities Lending	
	Agreement (MSLA) to conduct securities lending?		Yes[] No[] N/A [X]
24.09	For the reporting entity's security lending program, state the amount	t of the following as of December 31 of the current year:	
	24.091 Total fair value of reinvested collateral assets reported on	Schedule DL, Parts 1 and 2	\$
	24.092 Total book adjusted/carrying value of reinvested collatera	l assets reported on Schedule DL, Parts 1 and 2	\$
	24.093 Total payable for securities lending reported on the liabilit	y page	\$
25.1	Were any of the stocks, bonds or other assets of the reporting entity	owned at December 31 of the current year not	
	exclusively under the control of the reporting entity or has the report		
	a put option contract that is currently in force? (Exclude securities s	subject to Interrogatory 21.1 and 24.03).	Yes[] No[X]

25 21

25.2 If yes, state the amount thereof at December 31 of the current year:

25.21	Subject to repurchase agreements	\$
25.22	Subject to reverse repurchase agreements	\$
25.23	Subject to dollar repurchase agreements	\$
25.24	Subject to reverse dollar repurchase agreements	\$
25.25	Placed under option agreements	\$
25.26	Letter stock or securities restricted as to sale -	
	excluding FHLB Capital Stock	\$
25.27	FHLB Capital Stock	\$
25.28	On deposit with states	\$
25.29	On deposit with other regulatory bodies	\$
25.30	Pledged as collateral - excluding collateral	
	pledged to an FHLB	\$
25.31	Pledged as collateral to FHLB - including	
	assets backing funding agreements	\$
25 32	Other	\$

25.3 For category (25.26) provide the following:

1	2	3	
Nature of Restriction	Description	Amount	

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes[]No[X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

Yes [ ] No [ ] N/A [X]

LINES 26.3 through 26.5 : FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?

Yes[]No[X]

26.4 If the response to 26.3 is YES, does the reporting entity utilize:

26.41	Special accounting provision of SSAP No. 108	Yes[]No[X]
26.42	Permitted accounting practice	Yes[]No[X]
26.43	Other accounting guidance	Yes[]No[X]

26.5 By responding YES to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

Yes[]No[X]

- The reporting entity has obtained explicit approval from the domiciliary state.
- $\bullet \ \ \text{Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.}$
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes[]No[X]

27.2 If yes, state the amount thereof at December 31 of the current year.

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes[]No[X]

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

	1	2
	Name of Custodian(s)	Custodian's Address
Ī		
ł		
-		

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

1	2	3
Name(s)	Location(s)	Complete Explanation(s)

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes[]No[X]

28.04 If yes, give full and complete information relating thereto:

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

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

"...handle securities"]

1	2
Name Firm or Individual	Affiliation
John Polak	I
Jerome Fadden	I

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets?

Yes[]No[X]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?

Yes [ ] No [X]

28.06 For those firms or individuals listed in the table 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below

1	2	3	4	5
	Central Registration	Legal Entity		Investment Management
Name Firm or Individual	Depository Number	Identifier (LEI)	Registered With	Agreement (IMA) Filed

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D – Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes[]No[X]

29.2 If yes, complete the following schedule:

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

1	2	3
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value
29.2999 TOTAL		

29.3	For each	mutual	fund listed	I in the	table above,	complete	the following	schedule

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

30.	. Provide the following information for all short-term and long-term bonds and all preferred stocks. De	o not substitute
	amortized value or statement value for fair value.	

	1	2	3	
			Excess of Statement	
			over Fair Value (-),	
	Statement (Admitted)		or Fair Value over	
	Value	Fair Value	Statement (+)	
30.1 Bonds				
30.2 Preferred stocks				
30.3 Totals				

30.4	Describe the sources or methods utilized in determining the fair values: TFPA does not have short-term bonds, long-term bonds or preferred stocks.				
31.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Yes[]No[X]			
31.2	If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's				
	pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Yes[]No[X]			
31.3	If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing				
	source for purposes of disclosure of fair value for Schedule D:				
32.1	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been				
	followed?	Yes[X] No[]			
32.2	If no, list exceptions:				

- 33 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 security is not available.
  - o. 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?

Yes[]No[X]

- 34 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.
  - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
  - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown 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?

Yes[]No[X]

- 35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
  - a. The shares were purchased prior to January 1, 2019.
  - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
  - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
  - d. The fund only or predominantly holds bonds in its portfolio.
  - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
  - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [

Yes [ ] No [X]

- 36. By rolling/renewing short-term or cash-equivalent investments with continued reporting on Schedule DA, part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
  - a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
  - b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
  - c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
  - d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 36.a 36.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?

Yes [ ] No [ X ] N/A [ ]

#### **OTHER**

37.1	Amount of payments to trade associa	tions, service organizations and	I statistical or Rating Bureaus, if ar	ny
------	-------------------------------------	----------------------------------	--	----

\$\_\_\_\_\_120,494

37.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1		2	
Name		Amount Paid	
Insurance Services Office Inc.	\$	84,225	
	\$		
	\$		

38.1 Amount of payments for legal expenses, if any?

5\_\_\_\_\_122,247

38.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total

payments for legal expenses during the period covered by this statement.

1	2	
Name	Amount Paid	
Perkins Law Group PLLC	\$ 84,071	
	\$	
	\$	

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

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

1	2
Name	Amount Paid
	\$
	\$
	\$

\$\_\_\_\_\_

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any	direct Medicare Sup	plement Insurance in force?		Yes[]No[X]
1.2 If yes, indicate premium earned on U.S. business only.			\$	
1.3 What portion of Item (1.2) is not rep 1.31 Reason for excluding	oorted on the Medica	re Supplement Insurance Experier	nce Exhibit?	\$
				•
				•
<ul><li>1.4 Indicate amount of earned premium</li><li>1.5 Indicate total incurred claims on all</li><li>1.6 Individual policies:</li></ul>			ed in Item (1.2) above.	\$ \$
1.5 marriada policios.	Most	current three years:		
	1.61	Total premium earned		\$
	1.62 1.63	Total incurred claims  Number of covered lives		\$
	All yea	ars prior to most current three year	rs:	
	1.64	Total premium earned		\$
	1.65	Total incurred claims		\$
1.7 Group policies:	1.66	Number of covered lives		
1.7 Group policies.	Most	current three years:		
	1.71	Total premium earned		\$
	1.72	Total incurred claims		\$
	1.73	Number of covered lives		
		ars prior to most current three year	rs:	•
	1.74 1.75	Total premium earned Total incurred claims		\$
	1.76	Number of covered lives		Ψ
2. Health Test:			1 2	
			Current Year Prior Year	
	2.1 2.2	Premium Numerator Premium Denominator	\$\$ \$\$ \$ 53,091,939 \$ 59,625,101	_
	2.2	Premium Ratio (2.1 / 2.2)	\$53,091,939_ \$59,625,101	_
	2.4	Reserve Numerator	\$	_
	2.5	Reserve Denominator	\$ 40,259,183 \$ 42,307,054	_ 
	2.6	Reserve Ratio (2.4 / 2.5)		_
3.1 Did the reporting entity issue partici	pating policies durin	g the calendar year?		Yes[]No[X]
3.2 If yes, provide the amount of premi	um written for partici	pating and/or non-participating poli	icies during the calendar year	
	3.21	Participating policies		\$
	3.22	Non-participating policies		\$
4. For Mutual reporting entities and Re	eciprocal Exchanges	only:		
4.1 Does the reporting entity issue asse	essable policies?			Yes [ ] No [ X ]
4.2 Does the reporting entity issue non-		?		Yes[]No[X]
4.3 If assessable policies are issued, w	·		nolders?	%
4.4 Total amount of assessments paid				¢ , ,
	or ordered to be pare	rading the year on deposit notes	or contingent premiums.	Ψ
5. For Reciprocal Exchanges Only:				V [ ] N- [ V ]
5.1 Does the exchange appoint local ag	gents?			Yes[]No[X]
5.2 If yes, is the commission paid:				
	5.21	Out of Attorney's-in-fact compens		Yes [ ] No [ ] N/A [ X ]
	5.22	As a direct expense of the excha		Yes[]No[]N/A[X
5.3 What expenses of the Exchange ar	·	•	act?	
				• •
5.4 Has any Attorney-in-fact compensa	tion, contingent on f	ulfillment of certain conditions, bee	n deferred?	Yes [ ] No [X]
5.5 If yes, give full information				
				••
compensation contract issued with	out limit loss:		e event of a catastrophe under a workers'	
Texas Fair Plan does not write Wor	kers compensation	INSUITATICE		
				• •

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:  TFPA estimates its probable maximum loss using the AIR Touchstone and RMS RiskLink software models, modeling the risk of Hurricane and other wind hazards. The PML is comprised of residental property exposure in and around the Houston, Texas greater metropolitan area.	
0.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  The XOL agreement provides the Assn. with two layers of coverage totaling \$385M xs of \$40M. After the first event there is an underlying layer providing coverage of \$30M xs \$10M. The underlying layer does not respond until the second event. The Assn. also has a RPP reinsurance coverage with a limit of \$25M to provide recoveries of reinstatement premium due the reinsurers incurred in conjunction with the first two layers of reinsurance coverage.	
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes[]No[X]
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 provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes[]No[X]
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 applicable limiting provision(s)?	Yes[]No[X]
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes[]No[X]
8.2	If yes, give full information	
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior	
	year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;  (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;	
	<ul> <li>(c) Aggregate stop loss reinsurance coverage;</li> <li>(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;</li> <li>(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or</li> </ul>	
	(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.	Yes[]No[X]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:	
	<ul><li>(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or</li><li>(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.</li></ul>	Yes[]No[X]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	
9.4	Except for transactions meeting the requirements of paragraph 37 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes[]No[X]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.	
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:  (a) The entity does not utilize reinsurance; or,	Voc I INc IVI
	(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation	Yes[]No[X]
	supplement; or  (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.	Yes [ ] No [ X ] Yes [ ] No [ X ]
	anesianon suotiemen	TEST INOTAL

### **GENERAL INTERROGATORIES**

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	Yes[]No[]N/A[X]
	Has the reporting entity guaranteed policies issued by any other entity and now in force: If yes, give full information	Yes [ ] No [ X ]
	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the	
	amount of corresponding liabilities recorded for:  12.11 Unpaid losses	\$
	12.12 Unpaid underwriting expenses (including loss adjustment expenses)	\$
12.2	Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	\$
	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	Yes[]No[]N/A[X]
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement:	
	12.41 From 12.42 To	%
	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?	Yes[]No[X]
12.6	If yes, state the amount thereof at December 31 of current year:  12.61 Letters of Credit	¢
	12.62 Collateral and other funds	\$ \$
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	\$1,900,000_
13.2	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?	Yes[]No[X]
	State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.	
14.1	Is the company a cedant in a multiple cedant reinsurance contract?	Yes[]No[X]
14.2	If yes, please describe the method of allocating and recording reinsurance among the cedants:	
14.3	If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?	Yes [ ] No [ ]
14.4	If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?	Yes [ ] No [ ]
14.5	If the answer to 14.4 is no, please explain:	
15.1	Has the reporting entity guaranteed any financed premium accounts?	Yes[]No[X]
15.2	If yes, give full information	
	Does the reporting entity write any warranty business?  If yes, disclose the following information for each of the following types of warranty coverage:	Yes[]No[X]
	1 2 3 4 5	
	Direct Losses Direct Losses Direct Written Direct Premium Direct Premium Incurred Unpaid Premium Unearned Earned	
	16.11 Home \$ \$ \$ \$ \$ \$ \$ 16.12 Products \$ \$ \$ \$ \$	
	16.12 Products \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
	* Disclose type of coverage:	

#### **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[X]
	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:	
	<ul> <li>17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3 exempt from the statutory provision for unauthorized reinsurance</li> <li>17.12 Unfunded portion of Interrogatory 17.11</li> <li>17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11</li> <li>17.14 Case reserves portion of Interrogatory 17.11</li> <li>17.15 Incurred but not reported portion of Interrogatory 17.11</li> <li>17.16 Unearned premium portion of Interrogatory 17.11</li> <li>17.17 Contingent commission portion of Interrogatory 17.11</li> </ul>	\$ \$
18.1	Do you act as a custodian for health savings accounts?	Yes[]No[X]
18.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$
18.3	Do you act as an administrator for health savings accounts?	Yes[]No[X]
18.4	If yes, please provide the balance of the funds adminstered as of the reporting date.	\$
19.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes[]No[X]
19.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes[]No[X]

### FIVE - YEAR HISTORICAL DATA

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

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)  2. Property lines (Lines 1, 2, 9, 12, 21 & 26)  3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)  4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  5. Nonproportional reinsurance lines (Lines 31, 32 & 33)  6. Total (Line 35)  Net Premiums Written (Page 8, Part 1B, Col. 6)  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)  8. Property lines (Lines 1, 2, 9, 12, 21 & 26)  9. 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)  11. Nonproportional reinsurance lines (Lines 31, 32 & 33)  12. Total (Line 35)  Statement of Income (Page 4)	2017 38,094,381 74,221,966 12,316,347 25,963,631 48,245,782 74,209,413 37,765,760) 102,715 (557,851)	2016 39,483,156 83,002,947 122,486,103 27,115,474 53,271,099 80,386,573 (20,025,669 53,446
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) 2. Property lines (Lines 1, 2, 9, 12, 21 & 26) 3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 5. Nonproportional reinsurance lines (Lines 31, 32 & 33) 6. Total (Line 35) 79,477,018 85,326,762 95,881,503 1 Net Premiums Written (Page 8, Part 1B, Col. 6) 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) 8. Property lines (Lines 1, 2, 9, 12, 21 & 26) 9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) 12. Total (Line 35) Statement of Income (Page 4) 13. Net underwriting gain (loss) (Line 8) (5,926,201) (3,926,052) (3,926,052) (3,926,052) (3,926,052)	74,221,966 12,316,347 25,963,631 48,245,782 74,209,413 37,765,760) 102,715	83,002,947 122,486,103 27,115,474 53,271,099 80,386,573 (20,025,669
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) 2. Property lines (Lines 1, 2, 9, 12, 21 & 26) 3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 5. Nonproportional reinsurance lines (Lines 31, 32 & 33) 6. Total (Line 35) 79,477,018 85,326,762 95,881,503 1. Net Premiums Written (Page 8, Part 1B, Col. 6) 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) 8. Property lines (Lines 1, 2, 9, 12, 21 & 26) 9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 30,770,536 35,002,595 40,283,286 10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) 12. Total (Line 35) Statement of Income (Page 4) 13. Net underwriting gain (loss) (Line 8) (5,926,201) (3,926,052) (3,926,052) (3,926,052)	74,221,966 12,316,347 25,963,631 48,245,782 74,209,413 37,765,760) 102,715	83,002,947 122,486,103 27,115,474 53,271,099 80,386,573 (20,025,669
2. Property lines (Lines 1, 2, 9, 12, 21 & 26) 3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 5. Nonproportional reinsurance lines (Lines 31, 32 & 33) 6. Total (Line 35) Net Premiums Written (Page 8, Part 1B, Col. 6) 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) 8. Property lines (Lines 1, 2, 9, 12, 21 & 26) 9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 30,770,536 35,002,595 40,283,286 10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) 12. Total (Line 35) Statement of Income (Page 4) 13. Net underwriting gain (loss) (Line 8) (5,926,201) (3,926,052) (5,924,201) (6,926,201) (7,926,052)	74,221,966 12,316,347 25,963,631 48,245,782 74,209,413 37,765,760) 102,715	83,002,947 122,486,103 27,115,474 53,271,099 80,386,573 (20,025,669
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 5. Nonproportional reinsurance lines (Lines 31, 32 & 33) 6. Total (Line 35)  Net Premiums Written (Page 8, Part 1B, Col. 6) 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) 8. Property lines (Lines 1, 2, 9, 12, 21 & 26) 9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) 12. Total (Line 35)  Statement of Income (Page 4) 13. Net underwriting gain (loss) (Line 8)  (5,926,201)  (3,926,052)  (6,122,064) (7,941,920) (7,941,920) (7,942,941,920) (8,941,920) (8,941,920) (9,941,942) (9,941,942	74,221,966 12,316,347 25,963,631 48,245,782 74,209,413 37,765,760) 102,715	83,002,947 122,486,103 27,115,474 53,271,099 80,386,573 (20,025,669
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  5. Nonproportional reinsurance lines (Lines 31, 32 & 33)  6. Total (Line 35)  Net Premiums Written (Page 8, Part 1B, Col. 6)  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)  8. Property lines (Lines 1, 2, 9, 12, 21 & 26)  9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)  30,770,536  35,002,595  40,283,286  10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  11. Nonproportional reinsurance lines (Lines 31, 32 & 33)  12. Total (Line 35)  Statement of Income (Page 4)  13. Net underwriting gain (loss) (Line 8)  (5,926,201)  (3,926,052)  (3,926,052)	12,316,347 25,963,631 48,245,782 74,209,413 37,765,760) 102,715	122,486,103 27,115,474 53,271,099 80,386,573 (20,025,669
5. Nonproportional reinsurance lines (Lines 31, 32 & 33) 6. Total (Line 35) 79,477,018 85,326,762 95,881,503 1  Net Premiums Written (Page 8, Part 1B, Col. 6) 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) 8. Property lines (Lines 1, 2, 9, 12, 21 & 26) 19,777,406 21,119,469 23,206,685 20 9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 30,770,536 35,002,595 40,283,286 20 10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) 12. Total (Line 35) 50,547,942 56,122,064 63,489,971 Statement of Income (Page 4) 13. Net underwriting gain (loss) (Line 8) (5,926,201) (3,926,052) 12,941,920 (3	25,963,631 48,245,782 74,209,413 37,765,760) 102,715	27,115,474 53,271,099 80,386,573 (20,025,669
6. Total (Line 35) 79,477,018 85,326,762 95,881,503 1  Net Premiums Written (Page 8, Part 1B, Col. 6)  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)  8. Property lines (Lines 1, 2, 9, 12, 21 & 26) 19,777,406 21,119,469 23,206,685 20, 20,206,685 20, 20,206,685 20, 20,206,201)  9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 30,770,536 35,002,595 40,283,286 20,283,286	25,963,631 48,245,782 74,209,413 37,765,760) 102,715	27,115,474 53,271,099 80,386,573 (20,025,669
Net Premiums Written (Page 8, Part 1B, Col. 6)         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)         8. Property lines (Lines 1, 2, 9, 12, 21 & 26)       19,777,406       21,119,469       23,206,685         9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)       30,770,536       35,002,595       40,283,286         10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)       11. Nonproportional reinsurance lines (Lines 31, 32 & 33)       50,547,942       56,122,064       63,489,971         12. Total (Line 35)       50,547,942       56,122,064       63,489,971         Statement of Income (Page 4)       (5,926,201)       (3,926,052)       12,941,920       (5,926,201)	25,963,631 48,245,782 74,209,413 37,765,760) 102,715	27,115,474 53,271,099 80,386,573 (20,025,669
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)  8. Property lines (Lines 1, 2, 9, 12, 21 & 26)  9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)  10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  11. Nonproportional reinsurance lines (Lines 31, 32 & 33)  12. Total (Line 35)  Statement of Income (Page 4)  13. Net underwriting gain (loss) (Line 8)  (5,926,201)  (3,926,052)  (3,926,052)  (3,924,920)  (3,924,920)  (4,941,920)  (5,926,201)	74,209,413 37,765,760) 102,715	53,271,099 80,386,573 (20,025,669
8. Property lines (Lines 1, 2, 9, 12, 21 & 26) 9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) 10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) 11. Nonproportional reinsurance lines (Lines 31, 32 & 33) 12. Total (Line 35)	74,209,413 37,765,760) 102,715	53,271,099 80,386,573 (20,025,669
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)  10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  11. Nonproportional reinsurance lines (Lines 31, 32 & 33)  12. Total (Line 35)  Statement of Income (Page 4)  13. Net underwriting gain (loss) (Line 8)  30,770,536  35,002,595  40,283,286  40,283,286  50,547,942  56,122,064  63,489,971  (3,926,052)  12,941,920  (3,926,052)	74,209,413 37,765,760) 102,715	53,271,099 80,386,573 (20,025,669
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  11. Nonproportional reinsurance lines (Lines 31, 32 & 33)  12. Total (Line 35)  Statement of Income (Page 4)  13. Net underwriting gain (loss) (Line 8)  (5,926,201)  (3,926,052)  (3,941,920)  (3,941,920)  (4,941,920)	74,209,413 37,765,760) 102,715	80,386,573 (20,025,669
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)         12. Total (Line 35)       50,547,942       56,122,064       63,489,971         Statement of Income (Page 4)         13. Net underwriting gain (loss) (Line 8)       (5,926,201)       (3,926,052)       12,941,920       (3,926,052)	37,765,760) 102,715	(20,025,669
12. Total (Line 35) 50,547,942 56,122,064 63,489,971 Statement of Income (Page 4)  13. Net underwriting gain (loss) (Line 8) (5,926,201) (3,926,052) 12,941,920 (3,926,052)	37,765,760) 102,715	(20,025,669
Statement of Income (Page 4)         13. Net underwriting gain (loss) (Line 8)       (5,926,201)       (3,926,052)       12,941,920       (3,926,052)	37,765,760) 102,715	(20,025,669
13. Net underwriting gain (loss) (Line 8) (5,926,021) (3,926,052) 12,941,920 (3,926,052)	102,715	1
1 44 11 4 4 4 4 1 7 1 7 1 4 1 4 1 4 1 4	102,715	1
		1
15. Total other income (Line 15) 21,300 270,168 54,899,033		(414,081
16. Dividends to policyholders (Line 17)		
17. Federal and foreign income taxes incurred (Line 19)		
49 Nationama (Lina 20) (5 020 747) (2 049 049) 69 029 067 (7	38,220,896)	(20,386,304
16. Net income (Line 20) (5,932,717) (2,916,916) 66,036,967 (	50,220,050)	(20,000,004
	73,131,341	73,296,769
20. Premiums and considerations (Page 2, Col. 3)	73,131,341	73,290,709
004 la saves et allestica (line 45 4)	2,129,019	2,205,441
00.0 0 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		
20.2 Deferred and not yet due (Line 15.2) 5,130,310 5,273,041 7,680,670	9,307,629	10,444,596
20.3 Accrued retrospective premiums (Line 15.3)		00.500.400
00 Lavra (David Liver) 40 700 000	28,072,377	88,500,196
	17,513,381	18,035,329
23. Loss adjustment expenses (Page 3, Line 3) 3,736,520 3,229,726 3,980,698	5,071,838	5,595,388
	36,597,531	39,225,281
25. Capital paid up (Page 3, Lines 30 & 31)		45.000.400
	54,941,036)	(15,203,132
Cash Flow (Page 5)	FF 0F0 000\	/07 000 000
	55,850,063)	(27,396,829
Risk-Based Capital Analysis	5 4 O 4 4 OOO)	/45 000 400
	54,941,036)	1
	27,052,334	11,407,101
Percentage Distribution of Cash, Cash Equivalents and Invested Assets		
(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0		
30. Bonds (Line 1)		
31. Stocks (Lines 2.1 & 2.2)		
32. Mortgage loans on real estate (Lines 3.1 and 3.2)		
34. Cash, cash equivalents and short-term investments (Line 5)       100.0       100.0       100.0	100.0	100.0
36. Derivatives (Line 7)		
38. Receivables for securities (Line 9)		
40. Aggregate write-ins for invested assets (Line 11)		
41. Cash, cash equivalents and invested assets (Line 12)       100.0       100.0       100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates		
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)		
44 Affiliated accounts at also (Oak D. Common Line O4 Oak A)		
45. Affiliated short-term investments (subtotals included in Schedule DA Verification,		
Col. 5, Line 10)		
AC Affiliated mantages leave an year extent		l
47. All other affiliated		
49. Total of should lines 40 to 47		
40. Total investment in perent included in Lines 42 to 47 above		1
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as		[
regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)		

## FIVE - YEAR HISTORICAL DATA

(Continued)

		1	2	3	4	5
		2020	2019	2018	2017	2016
	Capital and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)					
52. 53.	Dividends to stockholders (Line 35)  Change in surplus as regards policyholders for the year (Line 38)	(6,127,397)	(2,955,387)	70,029,474	(39,737,904)	(20,180,07
					(44)	<del> </del>
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	D ( )' ()' () () () () () () ()	44.007.005	40.000.070		00 000 504	05.400.00
55. 56.	Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	11,687,965 16,713,577	13,226,873 20,067,177	9,202,819 17,977,262	23,620,531 38,655,609	25,460,89 38,631,52
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)		20,007,117	11,011,202		
58.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59.	Total (Line 35)	28,401,542	33,294,050	27,180,081	62,276,140	64,092,41
	Net Losses Paid (Page 9, Part 2, Col. 4)					
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.		10,879,568	12,286,631	7,317,699	19,902,439	25,460,89
62.		15,662,357	18,844,508	15,555,943	33,790,635	38,631,52
63. 64.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  Nonproportional reinsurance lines (Lines 31, 32 & 33)					
	Total (Line 35)	26,541,925	31,131,139	22,873,642	53,693,074	64,092,41
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100
67.	Losses incurred (Line 2)	50.0	50.5	26.2	69.2	73.
68.		19.0	13.7	12.4	41.2	19.
69. 70.	Other underwriting expenses incurred (Line 4)  Net underwriting gain (loss) (Line 8)	42.2 (11.2)	42.4 (6.6)	42.7 18.7	38.7 (49.2)	31 (23
	Other Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15					
	divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0	44.3	44.6	(39.9)	40.8	33.
72.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3					
	divided by Page 4, Line 1 x 100.0)	69.0	64.1	38.6	110.4	92
/3.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	841.7	462.6	420.8	(135.1)	(528
	One Year Loss Development (\$000 omitted)					
74.	Development in estimated losses and loss expenses incurred prior to current					
	year (Schedule P, Part 2-Summary, Line 12, Col. 11)	(2,099)	(5,443)	(7,361)	(3,172)	(1,09
75.	Percent of development of losses and loss expenses incurred to policyholders'					
	surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	(17.3)	(36.1)	13.4	20.9	(21
	Two Year Loss Development (\$000 omitted)					
76						
10.	Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12,					
	Col. 12)	(6,449)	(9,570)	(5,908)	(2,855)	(5,59
77.	Percent of development of losses and loss expenses incurred to reported					
	policyholders' surplus of second prior year end (Line 76 above divided					
	by Page 4, Line 21, Col. 2 x 100.0)	(42.7)	17.4	38.9	(57.4)	(93.

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





EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

IC Group Code 4766				BUSINESS IN	THE STATE OF TEX	(AS DURING THE YE	AR 2020				<b>NAIC Company Cod</b>	e 11543	
		Gross Premiums, Including Police Return Premiums and Premi	y and Membership Fees, Less iums on Policies not Taken	3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire		3,936,632	4,348,243		1,781,459	2,815,350	2,276,763	708,671 3,852,084				375,257	73,5 499,4
<ul><li>2.1 Allied Lines</li><li>2.2 Multiple Peril Crop</li></ul>		26,730,477	26,942,710		13,193,887	8,872,615	8,223,605	3,852,084				2,548,064	
2.3 Federal Flood													
2.4 Private Crop													
2.5 Private Flood													
Farmowners Multiple Peril													
4. Homeowners Multiple Peril	_, .,, .,	48,809,909	50,867,872		24,290,470	16,713,577	15,054,006	10,616,459				4,652,769	912,0
5.1 Commercial Multiple Peril (Non-Liability F	Portion)												
<ul><li>5.2 Commercial Multiple Peril (Liability Portio</li><li>6. Mortgage Guaranty</li></ul>	on)												
8. Ocean Marine													
9. Inland Marine													
0. Financial Guaranty													
Medical Professional Liability													
2. Earthquake													
Group Accident and Health (b)													
4. Credit A & H (Group and Individual)													
1 Collectively Renewable A & H (b)													
2 Non-Cancelable A & H (b)													
<ul><li>3 Guaranteed Renewable A &amp; H (b)</li><li>4 Non-Renewable for Stated Reasons Only</li></ul>													
5 Other Accident Only	y (b)												
6 Medicare Title XVIII Exempt from State T													
.7 All Other A & H (b)	10,03 01 1 003												
8 Federal Employees Health Benefits Plan	Premium (b)												
6. Workers' Compensation													
.1 Other Liability - Occurrence													
2 Other Liability - Claims-Made													
3 Excess Workers' Compensation													
3. Products Liability													
.1 Private Passenger Auto No-Fault (Person	nal Injury Protection)												
<ul><li>.2 Other Private Passenger Auto Liability</li><li>.3 Commercial Auto No-Fault (Personal Inju</li></ul>	un Drotootion												
4 Other Commercial Auto Liability	ary Protection)												
.1 Private Passenger Auto Physical Damag													
.2 Commercial Auto Physical Damage	~												
2. Aircraft (all perils)													
3. Fidelity													
1. Surety													
6. Burglary and Theft													
7. Boiler and Machinery													
8. Credit 9. International													
9. International													
34. Aggregate Write-Ins for Other Lines of Bu													
35. TOTALS (a)	usiiiess	79,477,018	82,158,825		39,265,816	28,401,542	25,554,374	15,177,214				7,576,090	1,485,0
DETAILS OF WRITE-INS	s	70,117,010	32,100,020		00,200,010	20,101,012	20,001,011	.0,,2				7,010,000	.,,
)1.	-												
11. 12.													
)3.					NON								
98. Summary of remaining write-ins for Line	34 from overflow page												
99. Totals (Lines 3401 through 3403 plus 34	98) (Line 34 above)												
		101 510											

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

161,543

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0.





EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)
BUSINESS IN THE STATE OF TOTAL DURING THE YEAR 2020

AIC Group Code 4766				THE STATE OF TOTAL						NAIC Company Code	e 11543	
	Gross Premiums, Including Policy Return Premiums and Premiums		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	3,936,632	4,348,243		1,781,459	2,815,350	2,276,763	708,671				375,257	73,5
2.1 Allied lines	26,730,477	26,942,710		13,193,887	8,872,615	8,223,605	3,852,084				2,548,064	499,
2.2 Multiple Peril Crop 2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
Farmowners Multiple Peril												
Homeowners Multiple Peril	48,809,909	50,867,872		24,290,470	16,713,577	15,054,006	10,616,459		l	1	4,652,769	912
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
Mortgage Guaranty     Ocean Marine												
9. Inland Marine												
10. Financial Guaranty												
11. Medical Professional Liability												
12. Earthquake								l	I	1		
13. Group Accident and Health (b)												
14. Credit A & H (Group and Individual)												
15.1 Collectively Renewable A & H (b)												
<ul><li>15.2 Non-Cancelable A &amp; H (b)</li><li>15.3 Guaranteed Renewable A &amp; H (b)</li></ul>												
15.5   Guaranteed Renewable A & IT (b)												
15.5 Other Accident Only												
15.6 Medicare Title XVIII Exempt from State Taxes or Fees												
5.7 All Other A & H (b)										1		
15.8 Federal Employees Health Benefits Plan Premium (b)												
16. Workers' Compensation												
7.1 Other Liability - Occurrence 7.2 Other Liability - Claims-Made												
17.3 Excess Workers' Compensation												
18 Products Liability												
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
9.2 Other Private Passenger Auto Liability										1		
9.3 Commercial Auto No-Fault (Personal Injury Protection)									I			
9.4 Other Commercial Auto Liability												
11.1 Private Passenger Auto Physical Damage 11.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft				l				l	I			
27. Boiler and Machinery												
28. Credit												
29. International 30. Warranty												
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTALS (a)	79,477,018	82,158,825		39,265,816	28,401,542	25,554,374	15,177,214				7,576,090	1,485,
DETAILS OF WRITE-INS	, , ,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				, ,					, , , , , ,	,
401.			_									
3402.												
3403.			`````	NON					l			
3498. Summary of remaining write-ins for Line 34 from overflow page				1011								
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)										1		

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

161,543

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

0 and number of persons insured under indemnity only products 0.

NONE Schedule F - Part 1 Assumed Reinsurance

NONE Schedule F - Part 2 Premium Portfolio

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

										D:								1 40	1 00
1	2	3	4	5	6	7		1 0	10	Reinsurance F	Recoverable On	40	44	1 45 1	40	Reinsuran		19	20
						1	8	9	10	11	12	13	14	15	16	17	18		
			-																+
																			+
																			+
																			†
																			†
	•											•	•					•	†
	ŀ											i	•					•	1
							•											Net Amount	Funds Held
																		Recoverable	by
													•	İ	Amount in		Other	From	Company
	NAIC	Name			Reinsurance			Known	Known	IBNR	IBNR			Cols. 7	Dispute	Ceded	Amounts	Reinsurers	Under
ID ID	Company	of [	Domiciliary		Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Contingent	through 14	Included in	Balances	Due to	Cols. 15 –	Reinsurance
Number	Code	Reinsurer J	Jurisdiction   Sp	pecial Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
								<u> </u>									1		
22-2005057	26921	Everest Reinsurance Company	DE		2,908	40	47	95	128	147	159	1,455		2,071		1,393		678	
47-0698507	23680	Odyssey Reinsurance Company	CT		484	6	6	14	18	21	23	242		330		246		84	
31-0542366	10677	The Cincinnati Insurance Company	OH		504	12	13	27	37	42	46	252		429		265		164	
13-5616275	19453	Transatlantic Reinsurance Company	NY		446	23	27	54	73	84	91	223		575		255		320	1
13-2673100	22039	General Reinsurance Corporation	CT		223			1				112		112		110		2	1
13-4924125	10227	Munich Reinsurance America, Inc.	NJ		463			1				231		231		227		4	1
0999999	Total Authorize	ed - Other U.S. Unaffiliated Insurers			5,028	81	93	190	256	294	319	2,515		3,748		2,496		1,252	
AA-3194168		Aspen Bermuda Ltd.	BMU		756	1/1	17	34		52	57	378		598		394		204	
AA-3194100	0	AXIS Specialty Limited	BMU		532							266		266		261		5	
AA-3194122		DaVinci Reins	BMU			18	22	/3	58	67	73			281		28		253	
AA-3194130	· · · · · · · · · · · · · · · · · · ·	Endurance Speciality Ins Ltd.	BMU			29	33	68	91	105	114			440				440	
AA-1340125	0	Hannover Rück SE	DEU											1		(195)		195	
AA-1126033	1	Lloyd's Underwriter Syndicate No. 0033 HIS	GBR		388	20	23	48	64	73	80	194		502		220		282	
AA-1126623	0	Lloyd's Underwriter Syndicate No. 0623 AFB	GBR		91	1	2	4	5	6	6	45		69		46		23	
AA-1127183	0	Lloyd's Underwriter Syndicate No. 1084 CSL	GBR		136	4	4	9	12	14	15	68		126		72		54	
AA-1127183	0	Lloyd's Underwriter Syndicate No. 1183 TAL	GBR		504	8	9	18	25	28	31	252		371		259		112	
AA-1120085	0	Lloyd's Underwriter Syndicate No. 1274 AUL	GBR		58							29		29		27		2	
AA-1127414	0	Lloyd's Underwriter Syndicate No. 1414 ASC	GBR		500							250		250		245		5	
AA-1120102	0	Lloyd's Underwriter Syndicate No. 1458 RNR	GBR		579	12	13	27	37	42	46	289		466		283		183	
AA-1120156	0	Lloyd's Underwriter Syndicate No. 1686 AXS	GBR		223							112		112		109		3	
AA-1120083	0	Lloyd's Underwriter Syndicate No. 1910 ARE	GBR		372	23	27	54	73	84	91	186		538		126		412	1
AA-1120083	0	Lloyd's Underwriter Syndicate No. 1910 ARE	GBR		1,077				[			539		539		438		101	1
AA-1120084	0	Lloyd's Underwriter Syndicate No. 1955 BAR	GBR		151	3	3	7	9	10	11	76		119		79		40	l
AA-1128001	0	Lloyd's Underwriter Syndicate No. 2001 AML	GBR		1,569	31	37	75	101	115	125	784		1,268		715		553	l
AA-1128010	0	Lloyd's Underwriter Syndicate No. 2010 MMX	GBR		269	5	6	12	16	18	19	134		210		140		70	
AA-1128623	0	Lloyd's Underwriter Syndicate No. 2468 NEO	GBR			3	3	7	9	10	11			43		4		39	

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

			T .		T -											T		T	
1	2	3	4	5	6	7		l q	40	Reinsurance F	Recoverable On	40		45	40	Reinsuran		19	20
						/	8	9	10	11	12	13	14	15	16	17	18		
													•						
									1				•						
													•						
													•				•		
													•				•		
													1	1			•		
													1						
							•						•						•
																		Net Amount	Funds Held
							•											Recoverable	by
															Amount in		Other	From	Company
	NAIC	Name			Reinsurance			Known	Known	IBNR	IBNR			Cols. 7	Dispute	Ceded	Amounts	Reinsurers	Under
ID	Company	of	Domiciliary		Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Contingent	through 14	Included in	Balances	Due to	Cols. 15 –	Reinsurance
Number	Code	Reinsurer	Jurisdiction	Special Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
				<u> </u>												,		<u> </u>	
AA-1128623	0	Lloyd's Underwriter Syndicate No. 2623 AFB	GBR		413	7	8	17	22	26	28	207		315		214		101	
AA-1128791	0	Lloyd's Underwriter Syndicate No. 2791 MAP	GBR		414				· · · · · · <del></del>		<del></del>	207		207		203		4	
AA-1129000	0	Lloyd's Underwriter Syndicate No. 3000 MKL	GBR		395							197		197		194		3	
AA-1120075	0	Lloyd's Underwriter Syndicate No. 4020 ARK	GBR		316	6	6	14	18	21	23	158		246		100		146	
AA-3190829	0	Markel Bermuda Limited	BMU		647	12	13	27	37	42	46	323		500		336		164	
AA-3190686	0	Partner Reinsurance Company Ltd.	BMU			29	33	68	91	105	114			440		44		396	
AA-3190339	0	Renaissance Reinsurance Ltd.	BMU			28	32	65	88	101	109			423		43		380	
AA-3190870	0	Validus Reinsurance, Ltd.	BMU		1,555	31	37	75	101	115	125	778	1	1,262		810		452	
1299999	Total Authorize	d - Other Non-U.S. Insurers#	T		10,945	284	328	672	903	1,034	1,124	5,472		9,817		5,195		4,622	
440000	T				45.070	225	101	000	4.450	4 000	4 440	7.007		40.505		7.004		5.074	
1499999	Total Authorize	d - Total Authorized Excluding Protected Cells		1	15,973	365	421	862	1,159	1,328	1,443	7,987		13,565		7,691		5,874	
AA-3194158	0	Allianz Risk Transfer Ltd.	BMU			29	33	67	90	105	114			438		(22)		460	
AA-3190978	0	AlphaCat Reinsurance Ltd.	BMU	[										1		(130)		130	
AA-3190005	0	Ascot Underwriting (Bermuda) Ltd o/b/o American	BMU	[	328	12	13	27	36	42	46	164		340		179		161	
AA-3190770	0	Chubb Tempest Reinsurance Ltd.	BMU			43	50	101	136	156	170			656		22		634	
AA-3191289	0	Fidelis Insurance Bermuda Limited	BMU	[	1,344	14	17	34	46	52	56	672		891		682		209	
AA-3191190	0	Hamilton Re, Ltd.	BMU		290	6	6	14	18	21	23	145		233		151		82	
AA-3190875	0	Hiscox Insurance Company Ltd	BMU	[		40	47	95	128	147	159			616				616	
AA-1320031	0	SCOR Global P&C S.E Lirma S7300	FRA	[	1,135	155	181	78	105	121	131	567		1,338		632		706	
AA-5320039	0	Peak Reinsurance	HKG		81	4	5	10	14	16	17	40		106		46		60	
AA-5324100	0	Taiping Reinsurance Company Ltd	HKG		[	3	3	6	8	9	10		[	39	l	4		35	
AA-1460019	0	MS Amlin AG	CHE		572	12	11	27	37	42	46	286		461		299		162	
AA-1460023	0	Tokio Millennium Re AG	CHE	[		4	7	10	14	16	17			68		7		61	
AA-3191295	0	Third Point Reinsurance (USA) Ltd.	BMU	[	252				l			126		126		124		2	
AA-5340660	0	New India Assurance Company Limited - Lirma N	IND	[	134			1	l			67		67	l	66		1	l
AA-1120175	0	Fidelis Underwriting Limited - Lirma F0012	GBR	[	905							453		453		445		8	
AA-1460100	0	SATEC Srl o/b/o Neue Ruckversicherungs-Gesell	CHE		58				1			29	1	29		28	1	1	1

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

				1				<u> </u>		-		-				10	
1	2 3	4 5	6						Recoverable On						ce Payable	19	20
				7	8	9	10	11	12	13	14	15	16	17	18		
ID Number	1 ' 1	Domiciliary	Reinsurance Premiums	Paid	Paid LAE	Known Case Loss	Known Case LAE	IBNR Loss	IBNR LAE	Unearned	Contingent	Cols. 7 through 14	Amount in Dispute Included in	Ceded Balances	Other Amounts Due to	Net Amount Recoverable From Reinsurers Cols. 15 –	Funds Held by Company Under Reinsurance
Number	Code Reinsurer Ju	urisdiction Special Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
AA-3191388 AA-3191315	0 Vermeer Reinsurance Ltd. 0 XL Bermuda Ltd	BMU BMU	301	12		27	37	42	46	150		150		148		2 159	
2699999	Total Unauthorized - Other non-U.S. Insurers#		5,400	334	386	496	669	769	835	2,699		6,188		2,699		3,489	
2799999	Total Unauthorized - Protected Cells																
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells		5,400	334	386	496	669	769	835	2,699		6,188		2,699		3,489	
CR-3194126 CR-3190770 CR-3194122 CR-3194130 CR-3190875 CR-3190339 CR-3190339 CR-3191315 CR-1340125 CR-3194126	0 Arch Reinsurance, Ltd. 0 Chubb Tempest Reinsurance Ltd. 0 DaVinci Reins thru Renaissance UW 0 Endurance Speciality Ins Ltd. 0 Hiscox Insurance Company Ltd. 0 Partner Reinsurance Company Ltd. 0 Renaissance Reinsurance Ltd. 0 XL Bermuda Ltd 0 Hannover Rück SE 0 Arch Reinsurance Ltd	BMU BMU BMU BMU BMU BMU BMU BMU BMU BMU	504 1,501 913 1,029 845 310 913 529 587 425							252 751 456 515 423 155 456 265 294 212		252 751 456 515 423 155 456 265 294 212		249 741 449 507 415 153 449 261 285 205		3 10 7 8 8 8 2 7 7 7 7	
4099999	Total Certified - Other Non-U.S. Insurers#	'	7,556							3,779		3,779		3,714		65	
4199999	Total Certified - Protected Cells																
4000000	T-10 "5"   T-10 "5"   F-1 "   D-1   10 "		7.550							0.770		0.770		0.744		05	
4299999 5799999	Total Certified - Total Certified Excluding Protected Cells  Total Authorized, Unauthorized and Certified Excluding Protected Cells		7,556 28,929	699	807	1,358	1,828	2,097	2,278	3,779 14,465		3,779 23,532		3,714 14,104		9,428	
0133333	Total / Mation 2004, Oriented and Octained Excitating 1 Total Code Octob		20,323	033	001	1,000	1,020	2,001	2,210	14,400		20,002		14,104		3,420	
0000000	T-t-1		00.000			4.050	4.000	0.00=	0.070	44.405		00.500		44404		0.400	
9999999	Totals		28,929	699	807	1,358	1,828	2,097	2,278	14,465		23,532		14,104		9,428	L

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

				`	Juit I tiolty											
		Collateral			25	26	27					ed Reinsuranc				
	21	22	23	24				28	29	30	31	32	33	34	35	36
					*								•			
													•		Credit Risk o	
				•	•							•			Collateralized	Credit Risk on
										Reinsurance					Recoverable	Uncollateralized
										Payable&			Stressed Net		(Col. 32 *	Recoverables
				Single	•			Total Amount		Funds Held		Total	Recoverable		Factor	(Col. 33 * Factor
			Issuing or	Beneficiary		Net		Recoverable		(Cols		Collateral	Net of		Applicable to	Applicable to
ID Number	Name of Multiple		Confirming	Trusts &	Total Funds	Recoverable	Applicable Sch. F	From	Stressed	17+18+20; But not in	Stressed Net Recoverable	(Cols. 21 + 22 + 24. not	Collateral Offsets	Dainauras	Reinsurer	Reinsurer
From	Name of Multiple Reinsurer Beneficiary	Letters of	Bank Reference	Other Allowable	Held, Payables &	Net of Funds Held &	Penalty	Reinsurers Less Penalty	Recoverable (Col. 28 *	Excess of	(Cols. 29 -	in Excess of	(Col. 31 -	Reinsurer Designation	Designation Equivalent in	Designation Equivalent in
Col. 1	From Col. 3	Credit	Number	Collateral	Collateral	Collateral	(Col. 78)	(Cols. 15-27)	120%)	Col. 29)	30)	Col. 31)	32)	Equivalent	Col. 34)	Col. 34)
001. 1	11000	Oroun	Tumbor	Conditional	Conatoral	Conditional	(001.70)	(0010: 10 21)	12070)	001. 20)	00)	001.01)	02)	Equivalent	001. 01)	001. 01)
22-2005057	Everest Reinsurance Company		0		1,393	678		2,071	2,485	1,393	1,092		1,092	2		45
47-0698507	Odyssey Reinsurance Company		0		246	84		330	396	246	150		150	3		7
31-0542366	The Cincinnati Insurance Company		0		265	164		429	515	265	250		250	2		10
13-5616275	Transatlantic Reinsurance Company		0		255	320		575	690	255	435		435	2		18
13-2673100	General Reinsurance Corporation		0		110	2		112	134	110	24		24	2		1
13-4924125	Munich Reinsurance America, Inc.		0		227	4		231	277		50		50			2
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		XXX		2.496	1.252		3.748	4,497	2,496	2.001		2,001	XXX		83
0999999	Total Autitorized - Other U.S. Urlammated insurers		^^^		2,490	1,232		3,740	4,491	2,490	2,001		2,001	^^^		03
AA-3194168	Aspen Bermuda Ltd.		0		394	204		598	718	394	324		324	3		16
	AXIS Specialty Limited		0		261	5		266	319	261	58		58	3		3
	DaVinci Reins	1	0		28	253		281	337	28	309		309	3		15
AA-3194130	Endurance Speciality Ins Ltd.		0		-	440		440	528		528		528	2		22
AA-1340125	Hannover Rück SE		0		(195)	195				(195)	195		195	2		8
AA-1126033			0		220	282		502	602	220	382		382	2		16
AA-1126623	Lloyd's Underwriter Syndicate No. 0623 AFB		0		46	23		69	83	46	37		37			2
AA-1127183			0			54		126	151	72			79			3
AA-1127183	<b>↓</b>				259	112		371	445	259	186		186			8
AA-1120085	Lloyd's Underwriter Syndicate No. 1274 AUL	.	1		27	2		29	35	27						
AA-1127414 AA-1120102	Lloyd's Underwriter Syndicate No. 1414 ASC				245	183		250 466	300 559	245	55 276		276	22		
AA-1120102 AA-1120156	Lloyd's Underwriter Syndicate No. 1458 RNR Lloyd's Underwriter Syndicate No. 1686 AXS	.	· · · · · · · · · · · ·		109	103		112	134	109	25		25	2		1
AA-1120130 AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE		1		126	412		538	646	126	520		520	2		· · · · · · ·
AA-1120083			1		438	101		539	647	438	209		209	2		9
AA-1120084	Lloyd's Underwriter Syndicate No. 1955 BAR		0		79	40		119	143	79	64		64	2 <del>-</del>		3
AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML		0		715	553		1,268	1,522	715	807		807	2		33
AA-1128010	Lloyd's Underwriter Syndicate No. 2010 MMX		0		140	70		210	252	140	112		112	2		5
	Lloyd's Underwriter Syndicate No. 2468 NEO		0		4	39		43	52	4	48	1	48	2		2

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

				(	out i tioity											
	C	ollateral			25	26	27				Cede	ed Reinsuranc	e Credit Risk			
	21	22	23	24				28	29	30	31	32	33	34	35	36
															Credit Risk o	
					İ										Collateralized	Credit Risk on
										Reinsurance					Recoverable	Uncollateralized
										Payable&			Stressed Net		(Col. 32 *	Recoverables
			laavina ar	Single		Net		Total Amount		Funds Held		Total	Recoverable		Factor	(Col. 33 * Factor
ID			Issuing or Confirming	Beneficiary Trusts &	Total Funds	Net Recoverable	Applicable	Recoverable From	Stressed	(Cols 17+18+20;	Stressed Net	Collateral (Cols. 21 +	Net of Collateral		Applicable to Reinsurer	Applicable to Reinsurer
Number	Name of Multiple		Bank	Other	Held,	Net of Funds		Reinsurers	Recoverable	But not in	Recoverable	22 + 24. not	Offsets	Reinsurer	Designation	Designation
From	Reinsurer Beneficiary	Letters of	Reference	Allowable	Payables &	Held &	Penalty	Less Penalty	(Col. 28 *	Excess of	(Cols. 29 -	in Excess of	(Col. 31 -	Designation	Equivalent in	Equivalent in
Col. 1	From Col. 3 Trusts	Credit	Number	Collateral	Collateral	Collateral	(Col. 78)	(Cols. 15-27)	120%)	Col. 29)	30)	Col. 31)	32)	Equivalent	Col. 34)	Col. 34)
AA-1128623	Lloyd's Underwriter Syndicate No. 2623 AFB		0		214	101		315	378	214	164		164	2		7
AA-1128791	Lloyd's Underwriter Syndicate No. 2791 MAP		0		203	4		207	248	203	45		45	2		2
AA-1129000			0		194	3		197	236	194	42		42	2		2
	Lloyd's Underwriter Syndicate No. 4020 ARK		0		100	146		246	295	100	195		195			8
AA-3190829	·   · · · · · · · · · · · · · · · · · ·				336	164		500	600	336	264		264	3		13
AA-3190686 AA-3190339	.				43	396		440	528 508	44 43	484 465		484 465	2		20 19
	Validus Reinsurance, Ltd.				810	452		1,262	1,514	810	704		704	3		34
7.4	Tundo Honordano, Ed.							1,202								
1299999	Total Authorized - Other Non-U.S. Insurers#		XXX		5,195	4,622		9,817	11,780	5,195	6,585		6,585	XXX		282
			1001					/						1001		
1499999	Total Authorized - Total Authorized Excluding Protected Cells		XXX		7,691	5,874		13,565	16,277	7,691	8,586		8,586	XXX		365
AA-3194158	Allianz Risk Transfer Ltd.	460	1		438			438	526	(22)	548	460	88	2	19	4
	AlphaCat Reinsurance Ltd.		0	130	-					(130)	130	130		3	6	
AA-3190005	Ascot Underwriting (Bermuda) Ltd o/b/o American International Reinsurance	161	2		340	I	l	340	408	179	229	161	68	3	8	3
AA-3190770	Chubb Tempest Reinsurance Ltd.	634	3		656			656	787	22	765	634	131	1	23	5
	Fidelis Insurance Bermuda Limited	201	4		883	8	8	883	1,060	682	378	201	177	4	10	9
	Hamilton Re, Ltd.	81	5		232	1		232	278	151	127	81	46	4	4	2
AA-3190875 AA-1320031	Hiscox Insurance Company Ltd SCOR Global P&C S.E Lirma S7300	617			1,094	244	244	1,094	739 1,313	622	739 681	617	122		30	
AA-1320031 AA-5320039	.	61			1,094	244	244	106	127	632	81	61	20		19	
	Taiping Reinsurance Company Ltd	36	12		39			39	47	4	43	36	7	3	2	
	MS Amlin AG	161	10		460	1	1	460	552	299	253	161	92	3	8	4
AA-1460023	Tokio Millennium Re AG	61	11		68	1		68	82	7	75	61	14	1	2	1
AA-3191295	Third Point Reinsurance (USA) Ltd.	1	0		124	2	2	124	149	124	25		25	4		
AA-5340660			0		66	ļ <u>1</u>	J	66	79	66	13	[	13	5	1	[
	Fidelis Underwriting Limited - Lirma F0012		0		445	8	8	445	534	445	89		89	3		4
AA-1460100	SATEC Srl o/b/o Neue Ruckversicherungs-Gesellschaft AG/New Reinsuranc	L	0	l	28	1 1	1	28	34	28	6	L	[ 6	2		0

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

				\ -	Juit Hiory											
		Collateral			25	26	27				Cede	ed Reinsuranc	e Credit Risk			
	21	22	23	24				28	29	30	31	32	33	34	35	36
					•											
				4								4			-	
				4											Credit Risk o	
													•		Collateralized	Credit Risk on
										Reinsurance			•		Recoverable	Uncollateralized
					•					Payable&		•	Stressed Net		(Col. 32 *	Recoverables
				Single	•			Total Amount		Funds Held		Total	Recoverable		Factor	(Col. 33 * Factor
			Issuing or	Beneficiary	*	Net		Recoverable		(Cols		Collateral	Net of		Applicable to	Applicable to
ID			Confirming	Trusts &	Total Funds	Recoverable	Applicable	From	Stressed	17+18+20;	Stressed Net	(Cols. 21 +	Collateral		Reinsurer	Reinsurer
Number	Name of Multiple		Bank	Other	Held,	Net of Funds	Sch. F	Reinsurers	Recoverable	But not in	Recoverable	22 + 24. not	Offsets	Reinsurer	Designation	Designation
From	Reinsurer Beneficiary	Letters of	Reference	Allowable	Payables &	Held &	Penalty	Less Penalty	(Col. 28 *	Excess of	(Cols. 29 -	in Excess of	(Col. 31 -	Designation	Equivalent in	Equivalent in
Col. 1	From Col. 3 Trusts	Credit	Number	Collateral	Collateral	Collateral	(Col. 78)	(Cols. 15-27)	120%)	Col. 29)	30)	Col. 31)	32)	Equivalent	Col. 34)	Col. 34)
AA-3191388	Vermeer Reinsurance Ltd.		0		148	2	2	148	178	148	30		30	2		
AA-3191315	XL Bermuda Ltd	161	7		177			177	212	18	194	161	33			
3																
2699999	Total Unauthorized - Other non-U.S. Insurers#	3,096	XXX	130	5,920	268	268		7,105	2,699	4,406	3,226	1,180	XXX	140	54
2799999	Total Unauthorized - Protected Cells		XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells	3,096	XXX	130	5.920	268	268	5.920	7,105	2.699	4.406	3.226	1,180	XXX	140	54
		3,000			0,020			0,020	1,100	_,,,,,	,,	7,220	1,100			
CR-3194126	Arch Reinsurance, Ltd.		0		249	3	3	249	299	249	50		50	2		2
CR-3190770	Chubb Tempest Reinsurance Ltd.		0		741	10	10	741	889	741	148		148	1		5
	DaVinci Reins thru Renaissance U/W		0		449	7	7 7.	449	539	449	90		90	3		4
	Endurance Speciality Ins Ltd.		0		507	8	8	507	608	507	101		101			4
CR-3190875			0		415	8	8	415	498	415	83		83	3		4
CR-3190686	Partner Reinsurance Company Ltd.				153	2	2	153	184	153	31		31			<u>.</u>
CR-3190339	Renaissance Reinsurance Ltd.				449	1		449	539	449	90		90			4
CR-3191315 CR-1340125	XL Bermuda Ltd Hannover Rück SE				261 285	4	44	261 285	313	261 285	52 57		52	2		2
	Arch Reinsurance Ltd				205	7		205	246	205	41		41	2		
CK-2194120	Alon Reliabilative Liu								240	200			7!	· <del></del>		
4099999	Total Certified - Other Non-U.S. Insurers#		XXX		3,714	65	65	3,714	4,457	3,714	743		743	XXX		31
4199999	Total Certified - Protected Cells		XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4299999	Total Certified - Total Certified Excluding Protected Cells	+	XXX		3,714	65	65	3,714	4,457	3,714	743		743	XXX		31
720000	Total Octanou Total Octanou Excluding Florected Octa		7///		,	03	- 03	3,714	7,437	3,114	140		140	\\\\\		31
5799999	Total Authorized, Unauthorized and Certified Excluding Protected Cells	3,096	XXX	130	17,325	6,207	333	23,199	27,839	14,104	13,735	3,226	10,509	XXX	140	450
9999999	Totals	3,096	XXX	130	17,325	6,207	333	23,199	27,839	14,104	13,735	3,226	10,509	XXX	140	450
333333	TOTALO	0,000		130	11,020	0,207	333	20,133	21,000	17,104	10,733	5,220	10,303	////	140	450

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

	T	D-:	D	erable on Paid	1	_			44	45	46	47	48	49	50	F4	52	53
		37	ance Recove	Hable off Falu	Overdue	raiu Luss Auj	usimeni Expe	43	- 44	45	40	47	40	49	] 50	51	52	33
		31	38	39	40	41	42	43	+									
			30	39	40	41	42											
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	1- 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Total Overdue Cols. 38 + + 40 + 41	Total Due Cols. 37 + 42 (In total should Equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losse & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	1	Recoverable on Paid Losse & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prio 90 Days	Percentage Overdue C 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/Cols. 46 + 48)	Percentage Mor Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 4 for Reinsurers wit Values Less Tha 20% in Col. 50
			-			-		•		<u> </u>								
22-2005057	Everest Reinsurance Company	87						87	1		87						YES	
47-0698507	Odyssey Reinsurance Company	12						12	1		12						YES	
31-0542366		25						25			25						YES	
13-5616275	. 🛊	50						50			50						YES	
13-2673100																	YES	
13-4924125	. 🛊																YES	
10-4324125	William Neinsulance America, inc.																!	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	174						174			174						XXX	
	<u>.</u>																YES	
AA-3194168		31									31							
	AXIS Specialty Limited																YES	
AA-3194122		40						40			40						YES	
	Endurance Speciality Ins Ltd.	62						62			62						YES	
AA-1340125	. •																YES	
AA-1126033		43						43			43						YES	
AA-1126623	. 🛊	3									3						YES	
AA-1127183	. 🛊	8						8			8						YES	
AA-1127183		17						17			17						YES	
AA-1120085																	YES	
AA-1127414	Lloyd's Underwriter Syndicate No. 1414 ASC								1	1							YES	
AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR	25		[				25	1	1	25	[	l	1	[	[ <u>.</u> . ]	YES	1
AA-1120156	Lloyd's Underwriter Syndicate No. 1686 AXS	[		[					1	1	[	[	l		[	[	YES	1
AA-1120083		50		[ ]			<i>.</i>	50	1	1	50	[	l		[	[	YES	1
AA-1120083		1								1	1	1	l				YES	
AA-1120084		6		[				6	1	[	6			1			YES	[
AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML	68						68	1		68			1			YES	
AA-1128010	.	11						11	1		11			1			YES	
AA-1128623	Lloyd's Underwriter Syndicate No. 2468 NEO	6	1	1		1		6	1		6			1			YES	

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

		Poingu	ranco Pocov	erable on Paid	Loccoc and I	Paid Loss Ad	iustmont Evno	neoe	44	45	46	47	48	49	50	51	52	53
		37	TATIOE NECOVI	CIADIC UII F dIU	Overdue	aiu Loss Au	justinent Expe	43	<b>-</b>	70	1 +0	71	40	43	30	J 31	JZ	33
		01	38	39	40	41	42	10										
			00		10		"-		1									
									1									
			•						1									
			•						1									
			•						1									
									Total	Recoverable		Recoverable						
									Recoverable	on Paid Losse		on Paid Losse			Percentage of			
									on Paid Losses	& LAE Over	Total	& LAE Over			Amounts More			
								Total Due	& LAE	90 Days Past	Recoverable on	90 Days Past			Than 90 Days			
ID							Total	Cols. 37 + 42	Amounts in	Due Amounts	Paid Losses &	Due Amounts			Overdue Not	Percentage Mor	Is the Amount	Amounts in Col. 4
Number	Name of						Overdue	(In total should	Dispute	in Dispute	LAE Amounts	Not in Dispute	Amounts	Percentage	in Dispute	Than 120 Days	in Col. 50 Less	for Reinsurers wit
From	Reinsurer		1- 29	30 - 90	91 - 120	Over 120	Cols. 38 +	Equal	Included in	Included in	Not in Dispute	(Cols. 40 +	1	Overdue C	(Col. 47/Cols.	Overdue	Than 20%?	Values Less Tha
Col. 1	From Col. 3	Current	Days	Days	Days	Days	+ 40 + 41	Cols. 7 + 8)	Col. 43	Cols. 40 & 41	(Cols. 43 - 44)	41 - 45)	90 Days	42/Col. 43	46 + 48)	(Col. 41/Col. 43)	(Yes or No)	20% in Col. 50
AA-1128623	Lloyd's Underwriter Syndicate No. 2623 AFB	15									15						YES	
	Lloyd's Underwriter Syndicate No. 2791 MAP																YES	
AA-1129000	Lloyd's Underwriter Syndicate No. 3000 MKL																YES	
	Lloyd's Underwriter Syndicate No. 4020 ARK	12									12						YES	
	Markel Bermuda Limited	25						25			25						YES	
AA-3190686	Partner Reinsurance Company Ltd.	62						62	1		62						YES	
AA-3190339	Renaissance Reinsurance Ltd.	60						60			60						YES	
AA-3190870	Validus Reinsurance, Ltd.	68						68	4		68						YES	
									-								1001	
1299999	Total Authorized - Other Non-U.S. Insurers#	612						612			612			-			XXX	
1499999	Total Authorized - Total Authorized Excluding Protected Cells	786						786			786						XXX	
											1.22							
AA-3194158	Allianz Risk Transfer Ltd.	62		1			1	62	1	1	62						YES	· · · · · · · ·
	AlphaCat Reinsurance Ltd.			1			1		1		1						YES	· · · · · · · ·
	Ascot Underwriting (Bermuda) Ltd o/b/o American International Rein	25	1	1			1	25	1		25			1			YES	
	Chubb Tempest Reinsurance Ltd.	93	1				1	93	1		93						YES	
	Fidelis Insurance Bermuda Limited	31						31			31						YES	
AA-3191190	Hamilton Re, Ltd.	12						12			12						YES	
AA-3190875	Hiscox Insurance Company Ltd	87						87	1		87						YES	
AA-1320031	SCOR Global P&C S.E Lirma S7300	336	1	1		l		336	1	1	336		l	1	[	[]	YES	
	Peak Reinsurance	9		1			1	9	1	1	9			1		[	YES	
AA-5324100	Taiping Reinsurance Company Ltd	6		[				6	1		6			1		[	YES	
AA-1460019	MS Amlin AG	23		[				23	1		23			1		[	YES	
AA-1460023	Tokio Millennium Re AG	11		[				11	1	1				1			YES	
AA-3191295	Third Point Reinsurance (USA) Ltd.			[					1		[			1			YES	
AA-5340660	New India Assurance Company Limited - Lirma N2118								1		[						YES	
AA-1120175	Fidelis Underwriting Limited - Lirma F0012								1								YES	
AA-1460100	SATEC Srl o/b/o Neue Ruckversicherungs-Gesellschaft AG/New Rei			l					L					1			YES	

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

			ance Recove	erable on Paid		Paid Loss Ad	justment Expe		44	45	46	47	48	49	50	51	52	53
		37			Overdue			43										
			38	39	40	41	42											
ID Number From	Name of Reinsurer		1- 29	30 - 90	91 - 120	Over 120	Total Overdue Cols. 38 +	Total Due Cols. 37 + 42 (In total should Equal	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in	1 -	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute	Recoverable on Paid Losse & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 +	Amounts Received Pric	Percentage Overdue C	in Dispute	Percentage Mor Than 120 Days Overdue	Is the Amount in Col. 50 Less Than 20%?	Amounts in Col. 4 for Reinsurers wit Values Less Tha
Col. 1	From Col. 3	Current	Days	Days	Days	Days	+ 40 + 41	Cols. 7 + 8)	Col. 43	Cols. 40 & 41	(Cols. 43 - 44)	41 - 45)	90 Days	42/Col. 43	46 + 48)	(Col. 41/Col. 43)	(Yes or No)	20% in Col. 50
AA-3191388 AA-3191315	Vermeer Reinsurance Ltd. XL Bermuda Ltd	25						25			25						YES YES	
2699999	Total Unauthorized - Other non-U.S. Insurers#	720						720			720						XXX	
2799999	Total Unauthorized - Protected Cells																XXX	
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells	720						720			720						XXX	
	Arch Reinsurance, Ltd.																YES YES	
	Chubb Tempest Reinsurance Ltd.																YES	
	DaVinci Reins thru Renaissance U/W																YES	
	Endurance Speciality Ins Ltd.																YES	
	Hiscox Insurance Company Ltd																YES	
	Partner Reinsurance Company Ltd.																YES	
	Renaissance Reinsurance Ltd.																YES	
	XL Bermuda Ltd																YES	
CR-1340125	Hannover Rück SE																YES	
CR-3194126	Arch Reinsurance Ltd																YES	
																	1001	
4099999	Total Certified - Other Non-U.S. Insurers#																XXX	
4199999	Total Certified - Protected Cells																XXX	
4299999	Total Certified - Total Certified Excluding Protected Cells																XXX	
5799999	Total Authorized, Unauthorized and Certified Excluding Protected C	1,506						1,506			1,506						XXX	
	,	,,,,,,						,,,,,			,,,,,,							
											[			1				
				1		1	1		1		1			1				
9999999	Totals	1,506						1,506			1,506						XXX	

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Provision for Reinsurance for Certified Reinsurers)

		54	55	56	57	58	59	60	61	62	63	64	65	Complete if	Col. 52 = "No"; O	therwise Enter 0	69
ID Number	Name of	Certified Reinsurer	Effective D of Certififed	Percent Collateral Required for	Catatrophic Recoverables Qualifying for	Net Recoverable Subject to Collatereal Requirement for Full Credi	Dollar Amount of Collateral	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col.22 +	Percent Credit Allowed on Net Recoverables Subject to Collate Requirements (Col. 60 / Col.	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts	Amounts of Credit Allowed for Net Recoverables	Provision for Reinsurance with Certified Reinsurers Du to Collateral Defciency	90 Days Past Due Amounts	21 + Col. 22		68	Provision for Overdue Reinsurance Ced to Certified Reinsurers ( Grea of [ Col. 62 + Col.
From Col. 1	Reinsurer From Col. 3	Rating (1 through 6)	Reinsurer	Full Credit (0% through 100%)	Collateral Deferral	(Col. 19 - Col. 57)	Required (Col 56 * Col. 58)	Col. 24]/ Col. 58)	56, not to exceed 100%)	in Dispute (Col. 45 * 20%)	(Col. 57 +[Col. 58 * Col. 61 ])	(Col. 19 - Col. 63)	Not in Dispute (Col. 47 * 20	Col.24; not to	is Allowed (Col. 63 -Col. 6	20% of Amount in Col. 67	65] or Col.68; not to Exceed Col. 63
COI. I	FIUIII CUI. 3	(1 through 6)	Rating	unough 100%)	Deletial	COI. 37)	JU (UI. 30)	COI. 30)	exceed 100%)	(001.40 20%)	30 COI. 01 ])	COI. 03)	(001.47 20	LACEEU COI 6	(001. 03 -001. 6	III COI. 07	IO EXCEED COI. 03
22-2005057	Everest Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-0698507	Odyssey Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
31-0542366	The Cincinnati Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-5616275	Transatlantic Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-2673100	General Reinsurance Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-4924125	Munich Reinsurance America, Inc.	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0999999	Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194168	Aspen Bermuda Ltd.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194139	AXIS Specialty Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194122	DaVinci Reins	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194130	Endurance Speciality Ins Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340125	Hannover Rück SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126033	Lloyd's Underwriter Syndicate No. 0033 HIS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126623	Lloyd's Underwriter Syndicate No. 0623 AFB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127183	Lloyd's Underwriter Syndicate No. 1084 CSL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127183	Lloyd's Underwriter Syndicate No. 1183 TAL		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120085	Lloyd's Underwriter Syndicate No. 1274 AUL		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127414	Lloyd's Underwriter Syndicate No. 1414 ASC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120102 AA-1120156	Lloyd's Underwriter Syndicate No. 1458 RNR	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120156 AA-1120083	Lloyd's Underwriter Syndicate No. 1686 AXS Lloyd's Underwriter Syndicate No. 1910 ARE		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120063 AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120084	Lloyd's Underwriter Syndicate No. 1910 ARE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128010	Lloyd's Underwriter Syndicate No. 2010 MMX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128623	Lloyd's Underwriter Syndicate No. 2468 NEO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Provision for Reinsurance for Certified Reinsurers)

		54	55	56	57	58	59	60	61	62	63	64	65	Complete if	Col. 52 = "No"; O	therwise Enter 0	69
						Net		Percent of Collateral Provided for Net Recoverables	Percent Credit	20% of		Provision for	20% of	66	67	68	Provision for
						Recoverable		Subject to	Allowed on Net	Recoverable		Reinsurance	Recoverable				Overdue
				Percent	Catatrophic	Subject to Collatereal		Collateral Requirements	Recoverables Subject to Collate	on Paid Losses & LAE Over	Amounts of Credit Allowed	with Certified Reinsurers Du	on Paid Losse % LAE Over	Total Collater Provided	Net Unsecured		Reinsurance Ced to Certified
ID I		Certified	Effective D	Collateral	Recoverables	Requirement	Dollar Amount	([Col. 20 + Col.	Requirements	90 Days Past	for Net	to Collateral	90 Days Past		Recoverable fo		Reinsurers ( Grea
Number	Name of	Reinsurer	of Certififed	Required for	Qualifying for	for Full Credi	of Collateral	21 + Col.22 +	(Col. 60 / Col.	Due Amounts	Recoverables	Defciency	Due Amounts	21 + Col. 22	Which Credit		of [ Col. 62 + Col.
From	Reinsurer	Rating	Reinsurer	Full Credit (0%	Collateral	(Col. 19 -	Required (Col	Col. 24]/	56, not to	in Dispute	(Col. 57 +[Col.	(Col. 19 -	Not in Dispute	Col.24; not to	is Allowed	20% of Amount	65] or Col.68; not
Col. 1	From Col. 3	(1 through 6)	Rating	through 100%)	Deferral	Col. 57)	56 * Col. 58)	Col. 58)	exceed 100%)	(Col. 45 * 20%)	58 * Col. 61 ])	Col. 63)	(Col. 47 * 20	Exceed Col 6	(Col. 63 -Col. 6	in Col. 67	to Exceed Col. 63
AA-1128623 Lloyd	d's Underwriter Syndicate No. 2623 AFB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	d's Underwriter Syndicate No. 2791 MAP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	d's Underwriter Syndicate No. 3000 MKL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	d's Underwriter Syndicate No. 4020 ARK	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	kel Bermuda Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190686 Partn	ner Reinsurance Company Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190339 Rena	aissance Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190870 Valid	dus Reinsurance, Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1299999 Total	I Authorized - Other Non-U.S. Insurers#				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999 Total	I Authorized - Total Authorized Excluding Protected Cells				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999 Total	ii Authorized - Total Authorized Excluding Protected Cells						***	^^^			****			***	^^^	***	****
AA-3194158 Allian	nz Risk Transfer Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190978 Alpha	aCat Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	ot Underwriting (Bermuda) Ltd o/b/o American International Reins	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	bb Tempest Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	lis Insurance Bermuda Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	nilton Re, Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	ox Insurance Company Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	DR Global P&C S.E Lirma S7300	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	k Reinsurance ing Reinsurance Company Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	ıng Keinsurance Company Ltd Amlin AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	o Millennium Re AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	d Point Reinsurance (USA) Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	India Assurance Company Limited - Lirma N2118	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	lis Underwriting Limited - Lirma F0012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	EC Srl o/b/o Neue Ruckversicherungs-Gesellschaft AG/New Rei	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Provision for Reinsurance for Certified Reinsurers)

	I				(FIOVISIOI	II IOI Reilis		Certified Rei	ilisuleis)	-							
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if	Col. 52 = "No"; O	Otherwise Enter 0	69
						Net Recoverable		Percent of Collateral Provided for Net Recoverables Subject to	Percent Credit Allowed on Net	20% of Recoverable		Provision for Reinsurance	20% of Recoverable	66	67	68	Provision for Overdue
					0.1.1.	Subject to		Collateral	Recoverables	on Paid Losses	1	with Certified	on Paid Losse	1	•		Reinsurance Ced
ID		Certified	Effective D	Percent Collateral	Catatrophic Recoverables	Collatereal Requirement	Dollar Amount	Requirements ([Col. 20 + Col.	Subject to Collate Requirements	& LAE Over 90 Days Past	Credit Allowed for Net	Reinsurers Du to Collateral	% LAE Over 90 Days Past	1	Net Unsecured Recoverable fo	1	to Certified Reinsurers ( Grea
Number	Name of	Reinsurer	of Certififed	Required for	Qualifying for	for Full Credi	of Collateral	21 + Col.22 +	(Col. 60 / Col.	Due Amounts		Defciency	Due Amounts	21 + Col. 22	Which Credit		of [ Col. 62 + Col.
From Col. 1	Reinsurer From Col. 3	Rating (1 through 6)	Reinsurer Rating	Full Credit (0% through 100%)	Collateral Deferral	(Col. 19 - Col. 57)	Required (Col 56 * Col. 58)	Col. 24]/ Col. 58)	56, not to exceed 100%)	in Dispute (Col. 45 * 20%)	(Col. 57 +[Col. 58 * Col. 61 ])	(Col. 19 - Col. 63)	Not in Dispute (Col. 47 * 20	Col.24; not to Exceed Col 6		20% of Amount in Col. 67	65] or Col.68; not to Exceed Col. 63
001. 1	1 10111 001. 3	(1 tillough o)	Rating	tillough 100 %)	Deletial	Coi. 37)	30 (01. 30)	Coi. 30)	exceed 100 %)	(COI. 43 20%)	30 (01.01])	001.03)	(001.47 20	Lxceed Coi c	(Coi. 03 -Coi. 0		to Exceed Coi. 03
AA-3191388	Vermeer Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191315	XL Bermuda Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2699999	L Total Unauthorized - Other non-U.S. Insurers#				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2799999	Total Unauthorized - Protected Cells				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
222222					100/	2004	1004	2004	2004	100/	2007	2007	100/	1004	200/	100/	2007
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
CR-3194126	Arch Reinsurance, Ltd.	2	1/1/2019	10.000		3	0					3					
CR-3190770	Chubb Tempest Reinsurance Ltd.	1	8/6/2019			10						10					
	DaVinci Reins thru Renaissance U/W	3	10/15/2019	20.000		7											
CR-3194130 CR-3190875	Endurance Speciality Ins Ltd. Hiscox Insurance Company Ltd	2	7/10/2019	10.000		8	1					8					
CR-3190686	Partner Reinsurance Company Ltd.	2	8/18/2019	10.000		2	0					2					
CR-3190339	Renaissance Reinsurance Ltd.	2	11/12/2019	10.000		7	1					7					
CR-3191315	XL Bermuda Ltd	2	1/1/2019	10.000		4	0					4					
CR-1340125	Hannover Rück SE	2	11/20/2018	10.000		9	ļ <u>1</u>					9					
CR-3194126	Arch Reinsurance Ltd		1/1/2019	10.000													
4099999	Total Certified - Other Non-U.S. Insurers#					65	7	XXX	XXX			65					
4199999	Total Certified - Protected Cells	1	1	1				XXX	XXX								
4299999	Total Certified - Total Certified Excluding Protected Cells					65	7	XXX	XXX			65					
5799999	Total Authorized, Unauthorized and Certified Excluding Protected Cell	le .				65	7	XXX	XXX	-		65				-	
טוטטטט	Total Authorized, Orlandhorized and Certified Excluding Protected Cell	10				00	<u> </u>	^^^				1 00			+		
9999999	Totals					65	7	XXX	XXX			65					
	TUIdIS					1 05	/	1 777	1 7/1/	1	1	1 00	1	1	1	1	1

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Total Provision for Reinsurance)

		70			Provision for Over	due Authorized and				
			Provision for Unau	thorized Reinsurance	1	iction Reinsurance		Total Provision	for Reinsurance	
			71	72	73	74	75	76	77	78
			/ 1	12	Complete if	Complete if	13	10	''	70
					Col. 52 = "Yes":	Col. 52 = "No";				
					Otherwise Enter 0	1			•	
					Otherwise Enter U	Otherwise Enter 0				
						0 1 (000) (1)				
					000/ 15	Greater of 20% of Net				
					20% of Recoverable	Recoverable Net of				
					on Paid Losses &	Funds Held &				
			5		LAE Over 90 Days	Collateral, or 20% of				
			Provision for	Provision for Overdue	Past Due Amounts	Recoverable on Paid				
		20% of Recoverable on	Reinsurance with	Reinsurance from	Not in Dispute + 20%	Losses & LAE Over 90	Provision for Amounts	Provision for Amounts		
ID		Paid Losses & LAE Over	Unauthorized	Unauthorized Reinsurers	of Amounts in	Days Past Due	Ceded to Authorized and	Ceded to Unauthorized	Provision for Amounts	
Number	Name of	90 Days Past Due Amounts	Reinsurers Due to	and Amounts in Dispute	Dispute	(Greater of Col 26 *	Reciprocal Jurisdiction	Reinsurers	Ceded to Certified	Total Provision for
From	Reinsurer	Not in Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or	Reinsurers	(Cols. 71 + 72 Not in Excess	•	Reinsurance
Col. 1	From Col. 3	(Col. 47 * 20%)	(Col. 26)	Amount in Col. 16)	[Col. 45 * 20%])	[Cols. 40 + 41] * 20%)	(Cols. 73 + 74)	of Col. 15)	(Cols. 64 + 69)	(Cols. 75 + 76 +77)
22-2005057	Everest Reinsurance Company		XXX	XXX				XXX	XXX	
47-0698507	Odyssey Reinsurance Company		XXX	XXX				XXX	XXX	
31-0542366	The Cincinnati Insurance Company		XXX	XXX				XXX	XXX	
13-5616275	Transatlantic Reinsurance Company		XXX	XXX				XXX	XXX	
13-2673100	General Reinsurance Corporation		XXX	XXX				XXX	XXX	
13-4924125	Munich Reinsurance Corporation  Munich Reinsurance America, Inc.		XXX	XXX				XXX	XXX	
13-4924125	Munici Reinsulance America, inc.									
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX				XXX	XXX	
AA-3194168	Aspen Bermuda Ltd.		XXX	XXX				XXX	XXX	
AA-3194139	AXIS Specialty Limited		XXX	XXX				XXX	XXX	
AA-3194139 AA-3194122	DaVinci Reins		XXX	XXX				XXX	XXX	
AA-3194122 AA-3194130	Endurance Speciality Ins Ltd.		XXX	XXX				XXX	XXX	
AA-3194130 AA-1340125	Hannover Rück SE		XXX	XXX				XXX	XXX	
	.		XXX	XXX				XXX	XXX	
AA-1126033 AA-1126623	Lloyd's Underwriter Syndicate No. 0033 HIS Lloyd's Underwriter Syndicate No. 0623 AFB		XXX	XXX				XXX	XXX	
AA-1120023 AA-1127183	Lloyd's Underwriter Syndicate No. 1084 CSL		XXX	XXX				XXX	XXX	
AA-1127163 AA-1127183	Lloyd's Underwriter Syndicate No. 1064 CSL Lloyd's Underwriter Syndicate No. 1183 TAL		XXX	XXX				XXX	XXX	
AA-1127163 AA-1120085	Lloyd's Underwriter Syndicate No. 1765 TAL  Lloyd's Underwriter Syndicate No. 1274 AUL		XXX	XXX				XXX	XXX	
AA-1120005 AA-1127414	Lloyd's Underwriter Syndicate No. 1274 AOL Lloyd's Underwriter Syndicate No. 1414 ASC		XXX	XXX				XXX	XXX	
AA-1127414 AA-1120102	Lloyd's Underwriter Syndicate No. 1414 ASC		XXX	XXX				XXX	XXX	
AA-1120102 AA-1120156	Lloyd's Underwriter Syndicate No. 1436 KWK		XXX	XXX				XXX	XXX	
AA-1120130	Lloyd's Underwriter Syndicate No. 1910 ARE		XXX	XXX				XXX	XXX	
AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE		XXX	XXX				XXX	XXX	
AA-1120084	Lloyd's Underwriter Syndicate No. 1910 AND		XXX	XXX				XXX	XXX	
AA-1128001	Lloyd's Underwriter Syndicate No. 1933 BAK		XXX	XXX				XXX	XXX	
AA-1128001 AA-1128010	Lloyd's Underwriter Syndicate No. 2001 AML		XXX	XXX				XXX	XXX	
AA-1128010 AA-1128623	Lloyd's Underwriter Syndicate No. 2010 MMX Lloyd's Underwriter Syndicate No. 2468 NEO		XXX	XXX				XXX	XXX	
AA-1120023	LIUYU S UTIUETWITET SYTUICALE INU. 2400 INEU	1		^^^	L	<b>1</b>	1			L

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Total Provision for Reinsurance)

		70			Provision for Over	due Authorized and				
			Provision for Unaut	horized Reinsurance	<b>}</b>	iction Reinsurance		Total Provision	for Reinsurance	
			71	72	73	74	75	76	77	78
			, · ·	12	Complete if	Complete if	10	10	1	10
					Col. 52 = "Yes":	Col. 52 = "No";				
					Otherwise Enter 0	Otherwise Enter 0				
				•	Otherwise Enter U	Otherwise Enter U				
				4		Greater of 20% of Net				
					20% of Recoverable	Recoverable Net of				
					on Paid Losses &	Funds Held &				
					LAE Over 90 Days	Collateral, or 20% of				
			Provision for	Provision for Overdue	Past Due Amounts	Recoverable on Paid				
		20% of Recoverable on	Reinsurance with	Reinsurance from	Not in Dispute + 20%	Losses & LAE Over 90	Provision for Amounts	Provision for Amounts		
ID		Paid Losses & LAE Over	Unauthorized	Unauthorized Reinsurers	of Amounts in	Days Past Due	Ceded to Authorized and	Ceded to Unauthorized	Provision for Amounts	
Number	Name of	90 Days Past Due Amounts	Reinsurers Due to	and Amounts in Dispute	Dispute	(Greater of Col 26 *	Reciprocal Jurisdiction	Reinsurers	Ceded to Certified	Total Provision for
From	Reinsurer	Not in Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or	Reinsurers	(Cols. 71 + 72 Not in Excess	Reinsurers	Reinsurance
Col. 1	From Col. 3	(Col. 47 * 20%)	(Col. 26)	Amount in Col. 16)	[Col. 45 * 20%])	[Cols. 40 + 41] * 20%)	(Cols. 73 + 74)	of Col. 15)	(Cols. 64 + 69)	(Cols. 75 + 76 +77)
AA-1128623	Lloyd's Underwriter Syndicate No. 2623 AFB		XXX	XXX				XXX	XXX	
AA-1128791	Lloyd's Underwriter Syndicate No. 2791 MAP		XXX	XXX				XXX	XXX	
AA-1129000	Lloyd's Underwriter Syndicate No. 3000 MKL		XXX	XXX				XXX	XXX	
AA-1120075	Lloyd's Underwriter Syndicate No. 4020 ARK		XXX	XXX				XXX	XXX	
AA-3190829	Markel Bermuda Limited		XXX	XXX				XXX	XXX	
AA-3190686	Partner Reinsurance Company Ltd.		XXX	XXX				XXX	XXX	
AA-3190339	Renaissance Reinsurance Ltd.		XXX	XXX				XXX	XXX	
AA-3190870	Validus Reinsurance, Ltd.		XXX	XXX				XXX	XXX	
1299999	Total Authorized - Other Non-U.S. Insurers#		XXX	XXX				XXX	XXX	
1499999	Total Authorized - Total Authorized Excluding Protected Cells		XXX	XXX				XXX	XXX	
AA-3194158	Allianz Risk Transfer Ltd.				XXX	XXX	XXX		XXX	
AA-3190978	AlphaCat Reinsurance Ltd.				XXX	XXX	XXX		XXX	
AA-3190005	Ascot Underwriting (Bermuda) Ltd o/b/o American International Reinsura				XXX	XXX	XXX		XXX	
AA-3190770	Chubb Tempest Reinsurance Ltd.				XXX	XXX	XXX		XXX	
AA-3191289	Fidelis Insurance Bermuda Limited		8		XXX	XXX	XXX		XXX	8
AA-3191190	Hamilton Re, Ltd.		1		XXX	XXX	XXX		XXX	
AA-3190875	Hiscox Insurance Company Ltd				XXX	XXX	XXX		XXX	
AA-1320031	SCOR Global P&C S.E Lirma S7300		244		XXX	XXX	XXX	244	XXX	244
AA-5320039	Peak Reinsurance				XXX	XXX	XXX		XXX	
AA-5324100	Taiping Reinsurance Company Ltd				XXX	XXX	XXX		XXX	
AA-1460019	MS Amlin AG		11		XXX	XXX	XXX	1	XXX	1
AA-1460023	Tokio Millennium Re AG				XXX	XXX	XXX		XXX	
AA-3191295	Third Point Reinsurance (USA) Ltd.		2		XXX	XXX	XXX	2	XXX	2
AA-5340660	New India Assurance Company Limited - Lirma N2118		1		XXX	XXX	XXX	1	XXX	<u> </u>
AA-1120175	Fidelis Underwriting Limited - Lirma F0012		8		XXX	XXX	XXX	8	XXX	8
AA-1460100	SATEC Srl o/b/o Neue Ruckversicherungs-Gesellschaft AG/New Reinsur	1	1		XXX	XXX	XXX	1	XXX	1

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Total Provision for Reinsurance)

		70			D 11 ( C	dua Authorian I			<del> </del>	
		70	Deputation for 11	periment Deineur		due Authorized and		Total David 1	for Dainauronas	
			Provision for Unauth			iction Reinsurance	75	Total Provision		70
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col 26 * 20% or [Cols. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 +77)
AA-3191388 AA-3191315	Vermeer Reinsurance Ltd. XL Bermuda Ltd		2		XXX XXX	XXX XXX	XXX XXX	2	XXX XXX	
2699999	Total Unauthorized - Other non-U.S. Insurers#		268		XXX	XXX	XXX	268	XXX	268
2799999	Total Unauthorized - Protected Cells				XXX	XXX	XXX		XXX	
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells		268		XXX	XXX	XXX	268	XXX	268
CR-3194126 CR-3190770 CR-3194122 CR-3194130 CR-3190875 CR-3190339 CR-3191315 CR-1340125 CR-3194126 4099999 4199999	Arch Reinsurance, Ltd. Chubb Tempest Reinsurance Ltd. DaVinci Reins thru Renaissance U/W Endurance Speciality Ins Ltd. Hiscox Insurance Company Ltd Partner Reinsurance Company Ltd. Renaissance Reinsurance Ltd. XL Bermuda Ltd Hannover Rück SE Arch Reinsurance Ltd  Total Certified - Other Non-U.S. Insurers# Total Certified - Protected Cells  Total Certified - Total Certified Excluding Protected Cells	XXX XXX XXX XXX XXX XXX XXX XXX XXX XX	XXX XXX XXX XXX XXX XXX XXX XXX XXX XX	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 XX	XXX XXX XXX XXX XXX XXX XXX XXX	XXX XXX XXX XXX XXX XXX XXX XXX XXX XX	3 10 7 8 8 8 2 7 4 9 7	3 10 7 8 8 8 2 7 4 9 7
5799999	Total Authorized, Unauthorized and Certified Excluding Protected Cells		268					268	65	333
9999999	Totals		268					268	65	333

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

			anks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)	
1	2	3	4	5
Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
1	1	26007993	UBS AG	
1		26001591	Standard Chartered Bank	
2		21000089	Citibank, N.A.	63
3		21000089	Citibank, N.A.	
4			Gildalik, N.A.	
Ö		26005092	Wells Fargo Bank, N.A.	8
0		26008044	Commerzbank	61
0		21000089	Citibank, N.A.	46
9	1	26007728	National Australia Bank Limited	6
10	1	26009632 26002574	MUFG Bank, LTD Barclays Bank PLC	16
1:4		981390502	Barciays Bank PLC	3
10		26007728	Lloyds Bank Corporate PLC	3 3
!			National Australia Bank Limited	
1:4		26007689	BNP Paribas	2
10	1,	26008044	Commerzbank	3
111	1	21000089	Citibank, N.A.	6
12	1	21000089	Citibank, N.A.	
0		0	I	
0		0		
0		0	I	
0		0	I	
0		0	I	
9999999 Total	I			3,09
			I	
,				
			I	
			1	
			1	
			1	
			1	
	1	]		
	1			
9999999 Total				3,09

#### Interrogatories for Schedule F, Part 3 (000 Omitted)

A.	Report the five largest provisional commission rates include	led in the cedant's reinsurance treaties. The con	nmission rate to be reported is by contract with	ceded premium in exces
	1	2	3	
	Name of Reinsurer	Commission Rate	Ceded Premium	
1.	*			
2.	÷			
3.	*			
4.	*			
5.	·			
	F, Part 3, Line 9999999, Column 15, the amount of ceded	premium, and indicate whether the recoverable	s are due from an affiliated insurer.	
	Name of Reinsurer			4
	Name of Remsurer	Total Recoverables	Ceded Premium	4 Affiliated
6.	Everest Reinsurance Company		Ceded Premium 2,908	4 Affiliated Yes[] No[X]
6. 7.		Total Recoverables 2,071 1,407		
	Everest Reinsurance Company	2,071	2,908	Yes[] No[X]
7.	Everest Reinsurance Company Chubb Tempest Reinsurance Ltd.	2,071 1,407	2,908 1,501	Yes[] No[X] Yes[] No[X]
7. 8.	Everest Reinsurance Company Chubb Tempest Reinsurance Ltd. SCOR Global P&C S.E Lirma S7300	2,071 1,407 1,338 1,268	2,908 1,501 1,135	Yes[] No[X] Yes[] No[X] Yes[] No[X]

NOT Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

#### Restatement of Balance Sheet to Identify Net Credit for Reinsurance

		1	2	3
		As Reported	Restatement	Restated
		(Net of Ceded)	Adjustments	(Gross of Ceded)
ASSET	TS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	57,717,169		57,717,169
2.		6,631,449		6,631,449
3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	1,506,148	(1,506,148)	
4.	Funds held by or deposited with reinsured companies (Line 16.2)			
5.	Other assets	335		335
6.	Net amount recoverable from reinsurers		9,095,970	9,095,970
7.				
8.	Totals (Line 28)	65,855,101	7,589,822	73,444,923
LIABIL	LITIES (Page 3)			
9.	Losses and loss adjustment expenses (Lines 1 through 3)	15,457,906	7,562,066	23,019,972
10.	Taxes, expenses, and other obligations (Lines 4 through 8)	1,929,117		1,929,117
11.		24,801,277	14,464,539	39,265,816
12.		1,240,814		1,240,814
13.				
14.		14,103,783	(14,103,783)	
15.				
16.				
17.		333,000	(333,000)	
18.		1,983,550		1,983,550
19.		59,849,447	7,589,822	67,439,269
20.	Protected cell liabilities (Line 27)			
21.	, , , , , , , , , , , , , , , , , , , ,	6,005,654	XXX	6,005,654
22.	Totals (Line 38)	65,855,101	7,589,822	73,444,923

or pooling arrangements? Yes [ ] No [X]

If yes, give full explanation:

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance

NONE Schedule H - Part 1

NONE Schedule H - Part 2, 3 and 4

NONE Schedule H - Part 5

## SCHEDULE P – ANALYSIS OF LOSSES AND LOSS EXPENSES SCHEDULE P – PART 1 – SUMMARY

(\$000 omitted)

	Pr	emiums Earne	ed			Lo	ss and Loss E	xpense Payme	nts			12
Years in	1	2	3			Defense	and Cost	Adjus	sting	10	11	
Which				Loss Pa	yments	Containmer	nt Payments	and Other	Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2011	78,866	31,803	47,063	23,785				4,356		60	28,141	XXX
3. 2012	92,027	35,147	56,880	30,780				9,729		65	40,509	XXX
4. 2013	112,737	37,394	75,343	29,262				10,371		78	39,633	XXX
5. 2014	129,302	39,896	89,406	34,586				12,059		147	46,645	XXX
6. 2015	133,859	42,907	90,952	52,680				16,791		513	69,471	XXX
7. 2016	127,762	43,361	84,401	59,783				17,232		360	77,015	XXX
8. 2017	116,941	40,103	76,838	66,285	16,911			51,435	19,327	236	81,482	XXX
9. 2018	104,488	35,249	69,239	21,358				7,358		182	28,716	XXX
10. 2019	90,423	30,798	59,625	32,611				8,810		105	41,421	XXX
11. 2020	82,159	29,067	53,092	20,149				5,743		196	25,892	XXX
12. Totals	XXX	XXX	XXX	371,279	16,911			143,884	19,327	1,942	478,925	XXX

		Losses	Unpaid		Defer	se and Cost	Containment L	Jnpaid	Adjusti	ing and	23	24	25
	Case	Basis	Bulk +	BNR	Case	Basis	Bulk +	IBNR	Other	Unpaid			Number of
	13	14	15	16	17	18	19	20	21	22		Total Net	Claims
											Salvage	Losses	Outstanding
	Direct		Direct		Direct		Direct		Direct		and	and	Direct
	and		and		and		and		and		Subrogation	Expenses	and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1. Prior													XXX
2. 2011			13						8			21	XXX
3. 2012			22						55			77	XXX
4. 2013			29						47			76	XXX
5. 2014			39						50			89	XXX
6. 2015	100		35						79			214	XXX
7. 2016	39		69						91			199	XXX
8. 2017	1,467	1,359	2,336	2,097					4,494	4,106		735	XXX
9. 2018	407		303						288			998	XXX
10. 2019	693		1,145						736			2,574	XXX
11. 2020	2,864		5,616						1,995			10,475	XXX
12. Totals	5,570	1,359	9,607	2,097					7,843	4,106		15,458	XXX

		To	otal Losses and	l	Loss and L	oss Expense Po	ercentage			34	Net Bala	nce Sheet
		Loss	Expenses Incu	rred	(Incurre	ed/Premiums Ea	arned)	Nontabula	ar Discount	Inter-	Reserves A	fter Discount
		26	27	28	29	30	31	32	33	Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2011	28,162		28,162	35.709		59.839				13	8
3.	2012	40,586		40,586	44.102		71.354				22	55
4.	2013	39,709		39,709	35.223		52.704				29	47
5.	2014	46,734		46,734	36.143		52.272				39	50
6.	2015	69,685		69,685	52.059		76.617				135	79
7.	2016	77,214		77,214	60.436		91.485				108	91
8.	2017	126,017	43,800	82,217	107.761	109.219	107.000				347	388
9.	2018	29,714		29,714	28.438		42.915				710	288
10.	2019	43,995		43,995	48.655		73.786				1,838	736
11.	2020	36,367		36,367	44.264		68.498				8,480	1,995
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	11,721	3,737

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

## SCHEDULE P - PART 2 - SUMMARY

	INCUR	RED NET LOS	SES AND DEF	ENSE AND C	OST CONTAIN	MENT EXPEN	SES REPORT	ED AT YEAR E	ND (\$000 OM	ITTED)	DEVEL	OPMENT
Years in	1	2	3	4	5	6	7	8	9	10	11	12
Which												
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior	13,478	10,410	8,916	6,606	6,379	6,330	6,220	6,221	6,217	6,217		(4)
2. 2011	28,959	24,468	24,114	24,076	23,904	23,828	23,811	23,789	23,784	23,798	14	9
3. 2012	XXX	36,188	30,079	31,538	31,702	31,040	30,917	30,815	30,796	30,802	6	(13)
4. 2013	XXX	XXX	37,865	30,629	30,106	29,366	29,622	29,283	29,271	29,291	20	8
5. 2014	XXX	XXX	XXX	38,975	36,276	35,662	35,280	34,777	34,618	34,625		(152)
6. 2015	XXX	XXX	XXX	XXX	54,296	55,345	53,958	53,166	52,693	52,815	122	(351)
7. 2016	XXX	XXX	XXX	XXX	XXX	62,811	61,402	60,423	60,001	59,891	(110)	(532)
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX	56,342	51,717	50,602	49,721	(881)	(1,996)
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,486	22,252	22,068	(184)	(3,418)
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35,542	34,449	(1,093)	XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	28,629	XXX	XXX
									12. Totals		(2,099)	(6,449)

## SCHEDULE P - PART 3 - SUMMARY

	CUMULAT	VE PAID NET	LOSSES AND	DEFENSE AN	D COST CON	TAINMENT EX	PENSES REP	ORTED AT YE	AR END (\$000	OMITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1. Prior	000	4,916	5,772	6,172	6,183	6,177	6,184	6,217	6,217	6,217	XXX	XXX
2. 2011	18,769	22,731	23,103	23,655	23,731	23,749	23,749	23,753	23,756	23,785	XXX	XXX
3. 2012	XXX	22,287	27,464	28,870	29,427	30,659	30,720	30,781	30,780	30,780	XXX	XXX
4. 2013	XXX	XXX	22,801	27,577	28,274	28,793	29,255	29,255	29,262	29,262	XXX	XXX
5. 2014	XXX	XXX	XXX	26,657	32,770	33,952	34,341	34,564	34,586	34,586	XXX	XXX
6. 2015	XXX	XXX	XXX	XXX	41,868	51,330	52,195	52,540	52,579	52,680	XXX	XXX
7. 2016	XXX	XXX	XXX	XXX	XXX	51,685	58,075	59,281	59,607	59,783	XXX	XXX
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX	45,519	49,288	49,710	49,374	XXX	XXX
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,233	20,262	21,358	XXX	XXX
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,285	32,611	XXX	XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,149	XXX	XXX

## SCHEDULE P - PART 4 - SUMMARY

	BULK A	AND IBNR RESER	RVES ON NET LO	SSES AND DEF	ENSE AND COST	CONTAINMENT	EXPENSES REF	PORTED AT YEA	R END (\$000 OM	ITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	6,887	3,454	2,632	425	187	149	29			
2. 2011	7,466	923	432	341	167	79	62	5		1
3. 2012	XXX	9,191	1,086	423	229	152	79	17	3	2
4. 2013	XXX	XXX	12,592	1,231	556	375	365	26	9	2
5. 2014	XXX	XXX	XXX	8,416	1,739	958	679	105	11	3
6. 2015	XXX	XXX	XXX	XXX	7,741	2,593	1,352	518	113	3
7. 2016	XXX	XXX	XXX	XXX	XXX	6,967	2,067	760	216	6
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX	7,309	1,698	480	23
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,607	970	30
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,393	1,14
11. 2020	xxx	xxx	xxx	XXX	XXX	XXX	xxx	xxx	xxx	5,616

### SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

#### (\$000 omitted)

	Pr	emiums Earn	ed			Lo	ss and Loss E	xpense Payme	ents			12
Years in	1 1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	ayments	Containmer	nt Payments	and Other	Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	-7+8-9)	Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2011	56,042	22,943	33,099	19,125				3,311		26	22,436	2,937
3. 2012	64,771	24,792	39,979	19,633				5,920		63	25,553	3,815
4. 2013	79,685	26,176	53,509	19,941				6,988		21	26,929	4,121
5. 2014	90,161	27,927	62,234	23,759				8,020		114	31,779	3,850
6. 2015	93,338	30,035	63,303	33,836				8,549		403	42,385	6,009
7. 2016	87,877	30,484	57,393	35,645				10,263		90	45,908	6,388
8. 2017	78,293	27,854	50,439	40,229	9,560			32,856	12,173	124	51,352	13,766
9. 2018	67,830	23,453	44,377	14,238				5,295		114	19,533	3,146
10. 2019	57,130	19,571	37,559	19,844				5,485		83	25,329	3,716
11. 2020	50,868	18,799	32,069	11,088				3,194		196	14,282	2,188
12. Totals	XXX	XXX	XXX	237,338	9,560			89,881	12,173	1,234	305,486	XXX

			Losses	Unpaid		Defen	se and Cost (	Containment I	Unpaid	Adjust	ing and	23	24	25
		Case	Basis	Bulk +	· IBNR	Case	Basis	Bulk +	- IBNR	Other	Unpaid			Number of
		13	14	15	16	17	18	19	20	21	22		Total Net	Claims
												Salvage	Losses	Outstanding
		Direct		Direct		Direct		Direct		Direct		and	and	Direct
		and		and		and		and		and		Subrogation	Expenses	and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior													
2.	2011			8						5			13	
3.	2012			14						34			48	
4	2013			18						29			47	
5.	2014			24						31			55	
6.	2015	100		22						72			194	1
7.	2016	20		43						33			96	2
8	2017	934	868	1,553	1,385					2,921	2,621		534	140
9.	2018	325		188						169			682	19
10.	2019	652		711						407			1,770	147
11.	2020	2,519		3,486						1,248			7,253	473
12.	Totals	4,550	868	6,067	1,385					4,949	2,621		10,692	782

		Te	otal Losses and	d	Loss and L	oss Expense F	Percentage			34	Net Bala	nce Sheet
		Loss	Expenses Incu	ırred	(Incurr	ed/Premiums E	arned)	Nontabula	r Discount	Inter-	Reserves A	fter Discount
		26	27	28	29	30	31	32	33	Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2.	2011	22,449		22,449	40.057		67.824				8	5
3.	2012	25,601		25,601	39.525		64.036				14	34
4.	2013	26,976		26,976	33.853		50.414				18	29
5.	2014	31,834		31,834	35.308		51.152				24	31
6.	2015	42,579		42,579	45.618		67.262				122	72
7.	2016	46,004		46,004	52.350		80.156				63	33
8.	2017	78,493	26,607	51,886	100.255	95.523	102.869				234	300
9.	2018	20,215		20,215	29.802		45.553				513	169
10.	2019	27,099		27,099	47.434		72.150	[		l	1,363	407
11.	2020	21,535		21,535	42.335		67.152				6,005	1,248
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	8,364	2,328

NONE Schedule P - Part 1B Private Passenger

NONE Schedule P - Part 1C Commercial Auto

NONE Schedule P - Part 1D Workers Compensation

NONE Schedule P - Part 1E Commercial Multiple Peril

NONE Schedule P - Part 1F - Section 1 Med. Prof. Liab. Occurence

NONE Schedule P - Part 1F - Section 2 Med. Prof. Liab. Claims-Made

NONE Schedule P - Part 1G Special Liability

NONE Schedule P - Part 1H - Section 1 Other Liab. Occurence

NONE Schedule P - Part 1H - Section 2 Other Liab. Claims-Made

# SCHEDULE P – PART 1I – SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 omitted)

	Pr	remiums Earn	ed			Lo	ss and Loss E	xpense Paymo	ents			12
Years in	1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	Loss Payments C		nt Payments	and Other	Payments			Number of
Premiums				4	4 5		7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	-7+8-9)	Assumed
1. Prior	XXX	XXX	XXX	852	808			1,821	1,354		511	XXX
2. 2019	33,293	11,227	22,066	12,767				3,325		22	16,092	XXX
3. 2020	31,291	10,268	21,023	9,061				2,549			11,610	XXX
4. Totals	XXX	XXX	XXX	22,680	808			7,695	1,354	22	28,213	XXX

		Losses	Unpaid		Defens	se and Cost (	Containment	Unpaid	Adjust	ng and	23	24	25
	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	- IBNR	Other	Unpaid			Number of
	13	14	15	16	17	18	19	20	21	22		Total Net	Claims
											Salvage	Losses	Outstanding
	Direct		Direct		Direct		Direct		Direct		and	and	Direct
	and		and		and		and		and		Subrogation	Expenses	and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1. Prior	634	491	976	712					1,818	1,485		740	129
2. 2019	41		434						329			804	29
3. 2020	345		2,130						747			3,222	70
4. Totals	1,020	491	3,540	712					2,894	1,485		4,766	228

		Т	otal Losses an	d	Loss and Loss Expense Percentage				34	Net Balance Sheet		
		Loss	Expenses Inci	urred	(Incurr	ed/Premiums E	arned)	Nontabula	r Discount	Inter-	Reserves A	fter Discount
		26	27	28	29	30	31	32	33	Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	407	333
2.	2019	16,896		16,896	50.749		76.570				475	329
3.	2020	14,832		14,832	47.400		70.551				2,475	747
4.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	3,357	1,409

NONE Schedule P - Part 1J Auto Physical Damage

NONE Schedule P - Part 1K Fidelity/Surety

NONE Schedule P - Part 1L Other

NONE Schedule P - Part 1M International

**NONE** Schedule P - Part 1N Nonproportional Assumed Prop.

**NONE** Schedule P - Part 10 Nonproportional Assumed Liab.

NONE Schedule P - Part 1P Nonproportional Assumed Fin. Lines

NONE Schedule P - Part 1R - Section 1 Prod. Liab. Occurence

NONE Schedule P - Part 1R - Section 2 Prod. Liab. Claims-Made

NONE Schedule P - Part 1S Financial Guaranty/Mortgage Guaranty

NONE Schedule P - Part 1T - Warranty

#### SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in	INCURRE	D NET LOSSE	ES AND DEFE	NSE AND CO	ST CONTAIN	MENT EXPEN	ISES REPOR	TED AT YEAR	R END (\$000 C	MITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior	11,170	8,742	7,671	5,760	5,591	5,564	5,482	5,493	5,489	5,489		(4)
2. 2011	23,097	19,749	19,453	19,327	19,197	19,142	19,129	19,127	19,124	19,133	9	6
3. 2012	XXX	24,869	19,541	19,920	20,003	19,763	19,710	19,662	19,648	19,647	(1)	(15)
4. 2013	XXX	XXX	26,457	20,519	20,279	19,816	20,176	19,958	19,947	19,959	12	1
5. 2014	XXX	XXX	XXX	26,525	24,813	24,406	24,192	23,893	23,767	23,783	16	(110)
6. 2015	XXX	XXX	XXX	XXX	35,126	35,450	34,579	34,147	33,818	33,958	140	(189)
7. 2016	XXX	XXX	XXX	XXX	XXX	37,804	36,788	36,131	35,827	35,708	(119)	(423)
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX	35,094	32,136	31,341	30,903	(438)	(1,233)
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,726	14,789	14,751	(38)	(1,975)
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,895	21,207	(688)	XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,093	XXX	XXX
								12. Totals			(1,107)	(3,942)

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

Years in	INCURRE	D NET LOSS	ES AND DEF	ENSE AND CO	OST CONTAIN	IMENT EXPE	NSES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior												
2. 2011												
3. 2012	XXX											
4. 2013	XXX	XXX										
5. 2014	XXX	XXX	XXX									
6. 2015	XXX	XXX	XXX	XXX			NRIL					
7. 2016	XXX	XXX	XXX	XXX	XXX		JINE					
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
								12. Totals				

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

Years in	INCURRE	D NET LOSS	ES AND DEF	ENSE AND CO	OST CONTAIN	IMENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior												
2. 2011												
3. 2012	XXX											
4. 2013	XXX	XXX										
5. 2014	XXX	XXX	XXX					L				
6. 2015	XXX	XXX	XXX	XXX			<b>1                                    </b>					
7. 2016	XXX	XXX	XXX	XXX	XXX		) IN F					
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
					•	•		12. Totals				

## SCHEDULE P – PART 2D – WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in	INCURRE	D NET LOSS	ES AND DEFI	ENSE AND CO	OST CONTAIN	IMENT EXPEN	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior												
2. 2011												
3. 2012	XXX											
4. 2013	XXX	XXX						L				
5. 2014	XXX	XXX	XXX				NRIE					
6. 2015	XXX	XXX	XXX	XXX			JINF					
7. 2016	XXX	XXX	XXX	XXX	XXX							
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
								12. Totals	•			

#### SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

Years in	INCURRE	D NET LOSS	ES AND DEFE	ENSE AND CO	OST CONTAIN	IMENT EXPEN	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior												
2. 2011												
3. 2012	XXX											
4. 2013	XXX	XXX										
5. 2014	XXX	XXX	XXX									
6. 2015	XXX	XXX	XXX	XXX		NI	) NI F					
7. 2016	XXX	XXX	XXX	XXX	XXX		/					
8. 2017	XXX	XXX	XXX	XXX	XXX	$\overline{xxx}$		<del>-</del>				
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
					-	•		12. Totals	•			

NONE Schedule P - Part 2F - Sec. 1 and 2, 2G, 2H Sec. 1 and 2

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

Years in	INCURRE	D NET LOSS	ES AND DEFE	ENSE AND CO	OST CONTAIN	IMENT EXPEN	ISES REPOR	TED AT YEAR	R END (\$000 C	MITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,255	2,335	1,748	(587)	(2,507)
2. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,647	13,242	(405)	XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,536	XXX	XXX
	4. Totals											(2.507)

#### SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

Years in	INCURRE	D NET LOSS	ES AND DEFE	ENSE AND CO	OST CONTAIN	MENT EXPEN	ISES REPOR	TED AT YEAF	R END (\$000 (	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX					
2. 2019	XXX	XXX	XXX	XXX	XXX			XXX				XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

#### SCHEDULE P - PART 2K - FIDELITY, SURETY

Years in	INCURRE	D NET LOSS	ES AND DEFE	ENSE AND CO	OST CONTAIN	IMENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 (	OMITTED)	DEVELOPMENT	
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX					
2. 2019	XXX	XXX	XXX	XXX	XXX		) Nk F	XXX				XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
		4 Totals										

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

Years in	INCURRE	D NET LOSS	ES AND DEFE	ENSE AND CO	OST CONTAIN	MENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX					
2. 2019	XXX	XXX	XXX	XXX	XXX		) Nk F	XXX				XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
	4. Totals									•		

#### SCHEDULE P - PART 2M - INTERNATIONAL

Years in	INCURRE	D NET LOSS	ES AND DEFI	ENSE AND CO	ST CONTAIN	MENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Year	Year
1. Prior												
2. 2011												
3. 2012	XXX											
4. 2013	XXX	XXX										
5. 2014	XXX	XXX	XXX									
6. 2015	XXX	XXX	XXX	XXX		N(	)NF					
7. 2016	XXX	XXX	XXX	XXX	XXX							
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
								12. Totals				

NONE Schedule P - Part 2N, 2O, 2P

NONE Schedule P - Part 2R Sec. 1 and 2, 2S, 2T

#### SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

	CUMUL	ATIVE PAID NE	T LOSSES AN	D DEFENSE AN	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 ON	(ITTED)	11	12
Years in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Which											Claims	Claims Closed
Losses Were											Closed With	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Loss Payment	Payment
1. Prior	000	4,326	5,060	5,460	5,455	5,449	5,456	5,489	5,489	5,489		
2. 2011	15,176	18,275	18,620	19,016	19,080	19,089	19,089	19,093	19,096	19,125	1,811	1,099
3. 2012	XXX	14,138	17,452	18,489	18,829	19,554	19,593	19,634	19,633	19,633	2,018	1,585
4. 2013	XXX	XXX	14,926	18,542	19,010	19,494	19,939	19,939	19,941	19,941	2,160	1,793
5. 2014	XXX	XXX	XXX	17,684	22,096	23,185	23,514	23,737	23,759	23,759	1,922	1,755
6. 2015	XXX	XXX	XXX	XXX	26,317	32,630	33,445	33,706	33,745	33,836	3,289	2,682
7. 2016	XXX	XXX	XXX	XXX	XXX	30,018	34,446	35,365	35,565	35,645	3,698	2,636
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX	27,726	30,420	30,852	30,669	4,407	8,976
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,380	13,233	14,238	1,222	1,826
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,294	19,844	1,460	1,927
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,088	606	1,077

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

		CUMUL	ATIVE PAID N	T LOSSES AN	D DEFENSE AN	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 ON	(ITTED)	11	12
١	rears in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
	Which											Claims	Claims Closed
Los	sses Were											Closed With	Without Loss
I	ncurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Loss Payment	Payment
1.	Prior	000											
2.	2011	1											
3.	2012	XXX	1										
4.	2013	XXX	XXX										
5.	2014	XXX	XXX	XXX									
6.	2015	XXX	XXX	XXX	XXX			7 1 1					
7.	2016	XXX	XXX	XXX	XXX	XXX	IV	JINI					
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

		CUMUI	ATIVE PAID N	ET LOSSES AN	ID DEFENSE A	ND COST CON	TAINMENT EXF	PENSES REPO	RTED AT YEAR	R END (\$000 ON	/ITTED)	11	12
`	Years in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
	Which	Ī	Ī									Claims	Claims Closed
Los	sses Were	Ī	İ		İ					İ		Closed With	Without Loss
- 1	ncurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Loss Payment	Payment
1.	Prior	000											
2.	2011	1	1	1						1			
3.	2012	XXX	1	1						1			
4.	2013	XXX	XXX	1				1		1	1		
5.	2014	XXX	XXX	XXX			· · · · · · · · · -	L		1	1		
6.	2015	XXX	XXX	XXX	XXX					1	1		
7.	2016	XXX	XXX	XXX	XXX	XXX	N			1	1		
8.	2017	XXX	XXX	XXX	XXX	XXX	x XX			1			
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1			
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1		

## SCHEDULE P - PART 3D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

	CUMUL	ATIVE PAID NE	T LOSSES AN	D DEFENSE AN	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 ON	/ITTED)	11	12
Years in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Which											Claims	Claims Closed
Losses Were									I		Closed With	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Loss Payment	Payment
1. Prior	000											
2. 2011									1			
3. 2012	XXX								1			
4. 2013	XXX	XXX										
5. 2014	XXX	XXX	XXX				7 1 1					
6. 2015	XXX	XXX	XXX	XXX			JINI					
7. 2016	XXX	XXX	XXX	XXX	XXX							
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

#### SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

	CUMUL	ATIVE PAID NE	T LOSSES AN	D DEFENSE AN	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 ON	(ITTED)	11	12
Years in	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Which											Claims	Claims Closed
Losses Were											Closed With	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Loss Payment	Payment
1. Prior	000											
2. 2011									1			
3. 2012	XXX								1			
4. 2013	XXX	XXX							1			
5. 2014	XXX	XXX	XXX									
6. 2015	XXX	XXX	XXX	XXX		NI			1			
7. 2016	XXX	XXX	XXX	XXX	XXX	146	/ I T I		1			
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX			1			
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1			
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1			
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE Schedule P - Part 3F Sec. 1 and 2, 3G, 3H Sec. 1 and 2

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

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE A	ND COST CON	TAINMENT EXF	PENSES REPO	RTED AT YEAR	END (\$000 ON	IITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	1,297	1,341	XXX	XXX
2. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,991	12,767	XXX	XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,061	xxx	XXX

#### SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE AI	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 ON	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	. X:	000				
2. 2019	XXX	XXX	XXX	XXX	XXX	. XX	JMF	XXX				
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

#### SCHEDULE P - PART 3K - FIDELITY/SURETY

	CUMUI	LATIVE PAID N	ET LOSSES AN	D DEFENSE A	ND COST CON	TAINMENT EXF	PENSES REPO	RTED AT YEAR	END (\$000 ON	IITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	. XXX	000			XXX	XXX
2. 2019	XXX	XXX	XXX	XXX	XXX	. <b>X</b> X X	) N :	XXX			XXX	XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX L	XXX	XXX		XXX	XXX

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

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE AI	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 OM	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	X. X. I.	000			XXX	XXX
2. 2019	XXX	XXX	XXX	XXX	XXX	. X ×	) N F	XXX			XXX	XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		xxx	xxx

#### SCHEDULE P - PART 3M - INTERNATIONAL

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE A	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 ON	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1. Prior	000										XXX	XXX
2. 2011											XXX	XXX
3. 2012	XXX										XXX	XXX
4. 2013	XXX	XXX									XXX	XXX
5. 2014	XXX	XXX	XXX			. N.I.	N. N. I. F				XXX	XXX
6. 2015	XXX	XXX	XXX	XXX		N(	)N				XXX	XXX
7. 2016	XXX	XXX	XXX	XXX	XXX	116					XXX	XXX
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	xxx

NONE Schedule P - Part 3N, 3O, 3P

NONE Schedule P - Part 3R Sec. 1 and 2, 3S, 3T

#### SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

	BULK AN	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	NSE AND COST	T CONTAINMEN	T EXPENSES RE	PORTED AT YE	AR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	5,559	2,763	2,099	291	127	111	19			
2. 2011	5,603	693	324	231	111	53	40	3		8
3. 2012	XXX	6,896	815	287	152	102	51	11	2	14
4. 2013	XXX	XXX	9,449	835	369	252	235	17	6	18
5. 2014	XXX	XXX	XXX	5,709	1,153	644	438	68	7	24
6. 2015	XXX	XXX	XXX	XXX	5,133	1,744	872	335	72	22
7. 2016	XXX	XXX	XXX	XXX	XXX	4,687	1,333	492	138	43
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX	4,713	1,099	173	168
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,276	621	188
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,091	711
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,486

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

	BULK ANI	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	NSE AND COST	CONTAINMEN	T EXPENSES RE	PORTED AT YE	AR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
	2011	2012	2010	2014	2013	2010	2017	2010	2013	2020
1. Prior 2. 2011										
3. 2012	XXX									
4. 2013	XXX	XXX								
5. 2014	XXX	XXX	XXX							
6. 2015	XXX	XXX	XXX	XXX		KIL				
7. 2016	XXX	XXX	XXX	XXX	XX					
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

	BULK AN	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	NSE AND COST	CONTAINMEN	T EXPENSES RE	PORTED AT YE	EAR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior										
2. 2011										
3. 2012	XXX									
4. 2013	XXX	XXX								
5. 2014	XXX	XXX	XXX							
6. 2015	XXX	XXX	XXX	XXX		4.41.				
7. 2016	XXX	XXX	XXX	XXX	· · X X . · ·					
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

## SCHEDULE P – PART 4D – WORKERS' COMPENSATION (EXLCUDING EXCESS WORKERS' COMPENSATION)

	BULK AN	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	NSE AND COS	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	AR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were		2012	2010	2011	2045	2012	2017		2010	
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior										
2. 2011										
3. 2012	XXX	[								
4. 2013	XXX	XXX								
5. 2014	XXX	XXX	XXX							
6. 2015	XXX	XXX	XXX	XXX						
7. 2016	XXX	XXX	XXX	XXX	XXX					
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

#### SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

		BULK AN	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	ENSE AND COST	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	AR END (\$000 (	OMITTED)
		1	2	3	4	5	6	7	8	9	10
Years Which Losses V Incurre	ch Were	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prio	or										
2. 201	11										
3. 201	12	XXX									
4. 201	13	XXX	XXX								
5. 201	14	XXX	XXX	XXX							
6. 201	15	XXX	XXX	XXX	XXX						
7. 201	16	XXX	XXX	XXX	XXX	$\mathbf{x}$					
8. 201	17	XXX	XXX	XXX	XXX	XXX	XXX				
9. 201	18	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 201	19	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 202	20	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE Schedule P - Part 4F Sec. 1 and 2, 4G, 4H Sec. 1 and 2

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

	BULK ANI	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	ENSE AND COST	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	AR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,435	783	264
2. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,302	434
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,130

#### SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

	BULK AN	D IBNR RESERV	ES ON NET LO	SSES AND DEFE	ENSE AND COST	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	EAR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	XXX	XXX	XXX	XXX	XIX	- XXK	XXX			
2. 2019	XXX	XXX	XXX	XXX		)	XXX	XXX		
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

### SCHEDULE P - PART 4K - FIDELITY/SURETY

	BULK AN	D IBNR RESERV	ES ON NET LOS	SSES AND DEFE	ENSE AND COST	CONTAINMEN	T EXPENSES RE	EPORTED AT YE	AR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2019	XXX	XXX	XXX	XXX		X X	XXX	XXX		
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

	BULK AN	D IBNR RESER\	ES ON NET LO	SSES AND DEFE	ENSE AND COST	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	EAR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	XXX	XXX	XXX	XXX	XIX	. XXX	XXX			
2. 2019	XXX	XXX	XXX	XXX		NX T	XXX	XXX		
3. 2020	XXX	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX	

#### SCHEDULE P - PART 4M - INTERNATIONAL

	BULK AN	D IBNR RESER\	/ES ON NET LO	SSES AND DEF	ENSE AND COST	T CONTAINMEN	T EXPENSES RI	EPORTED AT YE	EAR END (\$000	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in Which Losses Were										
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior										
2. 2011										
3. 2012	XXX									
4. 2013	XXX	XXX								
5. 2014	XXX	XXX	XXX							
6. 2015	XXX	XXX	XXX	XXX						
7. 2016	XXX	XXX	XXX	XXX	XXX					
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE Schedule P - Part 4N, 4O, 4P

NONE Schedule P - Part 4R Sec. 1 and 2, 4S, 4T

## SCHEDULE P – PART 5A – HOMEOWNERS/FARMOWNERS SECTION 1

Years in		CUMUL	ATIVE NUMBER	R OF CLAIMS CI	LOSED WITH LC	SS PAYMENT D	DIRECT AND ASS	SUMED AT YEAR	R END	
Which	1	2	3	4	5	6	7	8	9	10
Premiums										
Were Earned and Losses										
Were Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	758	418	38	426	4	2	1			
2. 2011	1,144	1,756	1,786	1,799	1,807	1,810	1,810	1,810	1,811	1,811
3. 2012	XXX	1,506	1,901	1,959	1,977	1,998	2,000	2,003	2,016	2,018
4. 2013	XXX	XXX	1,665	2,081	2,120	2,151	2,156	2,158	2,160	2,160
5. 2014	XXX	XXX	XXX	1,492	1,841	1,892	1,905	1,912	1,921	1,922
6. 2015	XXX	XXX	XXX	XXX	2,683	3,227	3,264	3,277	3,289	3,289
7. 2016	XXX	XXX	XXX	XXX	XXX	3,045	3,563	3,670	3,690	3,698
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX	3,724	4,284	4,386	4,407
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	978	1,209	1,222
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,283	1,460
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	606

## **SECTION 2**

Y	ears in			NUMBI	ER OF CLAIMS (	OUTSTANDING I	DIRECT AND AS	SUMED AT YEA	R END		
,	Which	1	2	3	4	5	6	7	8	9	10
Pr	emiums										
Wei	e Earned										
and	d Losses										
Wer	e Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	904	489	447	15	11	7	7	5		
2.	2011	578	53	38	32	29	27	26	27	30	
3.	2012	XXX	539	284	265	248	229	229	228	214	
4.	2013	XXX	XXX	467	225	207	178	172	170	168	
5.	2014	XXX	XXX	XXX	349	240	204	189	183	174	
6.	2015	XXX	XXX	XXX	XXX	391	87	62	48	37	1
7.	2016	XXX	XXX	XXX	XXX	XXX	448	154	69	57	2
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	638	273	248	140
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	214	76	19
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	262	147
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	473

## **SECTION 3**

Years in			CUMULATIV	E NUMBER OF	CLAIMS REPOR	TED DIRECT AN	ID ASSUMED AT	YEAR END		
Which	1	2	3	4	5	6	7	8	9	10
Premiums										
Were Earned										
and Losses										
Were Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	249	38	6	5	2					
2. 2011	2,669	2,901	2,919	2,928	2,933	2,934	2,934	2,934	2,936	2,93
3. 2012	XXX	3,423	3,765	3,805	3,809	3,811	3,813	3,815	3,815	3,81
4. 2013	XXX	XXX	3,727	4,076	4,107	4,115	4,118	4,119	4,121	4,12
5. 2014	XXX	XXX	XXX	3,412	3,810	3,834	3,842	3,847	3,848	3,85
6. 2015	XXX	XXX	XXX	XXX	5,431	5,971	5,993	6,001	6,006	6,00
7. 2016	XXX	XXX	XXX	XXX	XXX	5,821	6,331	6,363	6,375	6,38
8. 2017	XXX	XXX	XXX	XXX	XXX	XXX	12,827	13,470	13,549	13,76
9. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,762	3,091	3,14
10. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,253	3,71
11. 2020	XXX	XXX	XXX	xxx	XXX	xxx	XXX	XXX	XXX	2,18

NONE Schedule P - Part 5B - Section 1-3

NONE Schedule P - Part 5C - Section 1-3

NONE Schedule P - Part 5D - Section 1-3

NONE Schedule P - Part 5E - Section 1-3

NONE Schedule P - Part 5F - Section 1A-3A

NONE Schedule P - Part 5F - Section 1B-3B

NONE Schedule P - Part 5H - Section 1A-3A

NONE Schedule P - Part 5H - Section 1B-3B

NONE Schedule P - Part 5R - Section 1A-3A

NONE Schedule P - Part 5R - Section 1B-3B

NONE Schedule P - Part 5T - Warranty

NONE Schedule P - Part 6C Sec. 1 and 2, 6D Sec. 1 and 2

NONE Schedule P - Part 6E Sec. 1 and 2, 6H Sec. 1A and 2A

NONE Schedule P - Part 6H Sec. 1B and 2B, 6M Sec. 1B and 2B

NONE Schedule P - Part 6N Sec. 1 and 2, 60 Sec. 1 and 2

NONE Schedule P - Part 6R Sec. 1A, 2A and 1B, 2B

NONE Schedule P - Part 7A

**NONE** Schedule P - Part 7A (Continued)

NONE Schedule P - Part 7B

NONE Schedule P - Part 7B (Continued)

### COLLEGE E DINTERDOGATORICO

	SCHEDU	ILE P INTERROGAT	ORIES						
1.	The following questions relate to yet-to-be-issued Extended Repor provisions in Medical Professional Liability Claims Made insurance								
1.1	Does the company issue Medical Professional Liability Claims Madendorsement, or "ERE") benefits in the event of Death, Disability,	·		Yes[]No[X]					
	If the answer to question 1.1 is "no", leave the following questions	blank. If the answer to question 1.1 is "y	es", please answer the following questions	ť.					
1.2	What is the total amount of the reserve for that provision (DDR Res	serve), as reported, explicitly or not, else	where in this statement (in dollars)?	\$					
1.3	Does the company report any DDR reserve as Unearned Premium	Reserve per SSAP #65?		Yes[]No[X]					
1.4	Does the company report any DDR reserve as loss or loss adjustr	nent expense reserve?		Yes[]No[X]					
1.5	If the company reports DDR reserve as Unearned Premium Reservent 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines	the Underwriting and Investment Exhibit,	Yes[] No[]N/A[						
1.6	If the company reports DDR reserve as loss or loss adjustment expreserves are reported in Schedule P:	wing table corresponding to where these							
		e Included in dical Professional Liability ses and Expenses Unpaid							
	Years in Which Premiums Were Earned and Losses Were Incurred								
	1.601 Prior 1.602 2011 1.603 2012 1.604 2013	601 Prior 602 2011 603 2012							
	1.608 2017	6 2015 17 2016							
	1.609     2018       1.610     2019       1.611     2020       1.612     Totals								
2.	The definition of allocated loss adjustment expenses (ALAE) and, to January 1, 1998. This change in definition applies to both paid and Containment" and "Adjusting and Other") reported in compliance w	d unpaid expenses. Are these expenses		Yes[] No[X]					
3.	The Adjusting and Other expense payments and reserves should be of claims reported, closed and outstanding in those years. When a the Adjusting and Other expense should be allocated in the same payments and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count informations reasonable method determined by the company and described in I	allocating Adjusting and Other expense be percentage used for the loss amounts ar ing to the reinsurance contract. For Adju ation is not available, Adjusting and Othe	netween companies in a group or a pool, and the claim counts. For reinsurers, sting and Other expense incurred by a expense should be allocated by a	Yes [X] No[]					
4.	Do any lines in Schedule P include reserves that are reported gros net of such discounts on Page 10?	s of any discount to present value of futu	ure payments, and that are reported	Yes[] No[X]					
	If yes, proper disclosure must be made in the Notes to Financial St in Schedule P - Part 1, Columns 32 and 33.	tatements, as specified in the Instruction	s. Also, the discounts must be reported						
	Schedule P must be completed gross of non-tabular discounting. V upon request.	Vork papers relating to discount calculati	ons must be available for examination						
	Discounting is allowed only if expressly permitted by the state insu	rance department to which this Annual S	statement is being filed.						
5.	What were the net premiums in force at the end of the year for: (in thousands of dollars)		Fidelity Surety	\$ \$					
6.	Claim count information is reported per claim or per claimant. (indicate countries of the c	cate which).		Per Claim					
	If not the same in all years, explain in Interrogatory 7.								
7.1	The information provided in Schedule P will be used by many persother things. Are there any especially significant events, coverage, when making such analyses?			Yes[X] No[]					
7.2	An extended statement may be attached LAE is reported in adjusting and other only due to legacy system lin	mitations.							

## SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN Allocated By States and Territories

		1 Active	and Members Return Premium	i, Including Policy thip Fees Less as and Premiums Not Taken	4 Dividends Paid or Credited to Policyholders	5 Direct Losses Paid	6 Direct	7 Direct	8 Finance and Service Charges Not	9 Direct Premium Written for Federal Purchasing
	States, Etc.	Status (a)	Direct Premiums Written		on Direct Business	(Deducting Salvage)	Losses	Losses	Included in Premiums	Groups (Included in Col. 2)
1.	Alabama AL	N.								
2. 3.	Alaska AK Arizona AZ	N								
4.	Arkansas AR	!N								
5.	California CA	N								
6.	Colorado CO	N.								
7. 8.	Connecticut CT Delaware DE	N N								
9.	District of Columbia DC	N								
10.	Florida FL	N								
11. 12.	Georgia GA Hawaii HI	N N								
12. 13.	Idaho ID									
14.	Illinois IL	N N								
15.	Indiana IN	N								
16. 17.	lowa IA Kansas KS	N N								
17.	Kentucky KY	N								
19.	Louisiana LA	N								
20.	Maine ME	N								
21. 22.	Maryland MD Massachusetts MA	N N								
23.	Michigan MI	N								
24.	Minnesota MN	N								
25.	Mississippi MS	N								
26. 27.	Missouri MO Montana MT	N N								
28.	Nebraska NE	N								
29.	Nevada NV	N								
30.	New Hampshire NH New Jersey NJ	N N								
31. 32.	New Jersey NJ New Mexico NM									
33.	New York NY	N								
34.	North Carolina NC	N								
35. 36.	North Dakota ND Ohio OH	N								
30. 37.	Oklahoma OK									
38.	Oregon OR	N								
39.	Pennsylvania PA	N								
40. 41.	Rhode Island RI South Carolina SC	N N								
42.	South Dakota SD	<u>N</u>								
43.	Tennessee TN	N								
44.	Texas TX	L. L.	79,477,018	82,158,825		28,401,542	25,554,374	15,177,214	161,543	
45. 46.	Utah UT Vermont VT	N N								
40. 47.	Vermont VI Virginia VA	N N								
48.	Washington WA	N								
49. 50.	West Virginia WV Wisconsin WI	N N								
50. 51.	Wyoming WY	N								
52.	American Samoa AS	N	1							
53.	Guam GU	N								
54. 55.	Puerto Rico PR U.S. Virgin Islands VI	N N								
56.	Northern Mariana Islands MP									
57.	Canada CAN	N								
58.	Aggregate Other Alien OT	XXX	70 477 040	00.450.005		00 404 540	05.554.074	45 477 044	104.540	
59.	Totals	(a) 1	79,477,018	82,158,825		28,401,542	25,554,374	15,177,214	161,543	
	DETAILS OF WRITE-INS									
58001.		XXX								
58002. 58003.		XXX				NE				
58998.	Summary of remaining write-ins									
	for Line 58 from overflow page	XXX								
	Lotale (Linge 58001 through	1	1			1	I	I		
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX								

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

L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG  E – Eligible - Reporting entities eligble or approved to write surplus lines in the state	· · · · <u> </u>
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile	
R - Registered - Non-domiciled RRGs	
Q - Qualified - Qualified or accredited reinsurer	
N – None of the above - Not allowed to write business in the state (other than their state of domicile - See DSLI)	56

The Texas FAIR plan Association only writes polices in Texas	

## NONE Schedule T - Part 2

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

Texas Windstorm Insurance Association

Fed ID 74-6189303

NAIC 30040

Texas FAIR Plan Association

Fed ID 43-1982873

NAIC 11543

## **SCHEDULE Y**

#### PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1       2       3       4       5       6       7       8       9       10       11       12       Type of Control       Type of Control       Cownership,       Cownership,       Cownership,       Board,       ontrol is	14	Is an SCA	16	
Securities (Ownership,	is		Is an SCA	
	is		Is an SCA	
NAIC Exchange if Board,	is Ownership		Is an SCA	
2.00.00,	Ownership			1
Com- Publicly Names of Relationship to Management,	Ownership		Filing	1
	· · · · · · · · · · · · · · · · · ·	188 4 0 4 8		
Group pany ID Federal Traded (U.S. or Parent, Subsidiaries Domiciliary Reporting Directly Controlled by Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code Group Name Code Number RSSD CIK International) Or Affiliates Location Entity (Name of Entity / Person) Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
4766 L LI1543 L43-1982873 L LITEX SEVICE CONTRACT LEVEL LITEX LOTH LUNAFFLIATED SERVICE CONTRACT			N	N
4766 30040 74-6189303 Texas Windstorm Insurance Association TEX OTH UNAFFLIATED SERVICE CONTRACT			N	N
<u>,                                    </u>				

Asterik	Explanation
	Control tolures Association
1	Contract between Associations Contract between Associations
	Online of Dewood Nosociations

### **SCHEDULE Y**

#### PART 2 – SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10 11	12	13
	2	Names of Insurers and	*	J	Purchases, Sales or Exchanges of Loans, Securities, Real Estate,	Income/ (Disbursements) Incurred in Connection with Guarantees or	Management Agreements	Income/ (Disbursements)	Any Other Material Activity Not in the Ordinary	12	Reinsurance Recoverable/ (Payable) on Losses and/or
NAIC Company Code	ID Number	Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Mortgage Loans or Other Investments	Undertakings for the Benefit of any Affiliate(s)	and Service Contracts	Incurred Under Reinsurance Agreements	Course of the Insurer's Business	Totals	Reserve Credit Taken/ (Liability)
11543 30040		Texas FAIR Plan Association Texas Windstorm Insurance Association					(14,314,490) 14,314,490			(14,314,490) 14,314,490	
											· · · · · · · · · · · · · · · · · · ·
											· · · · · · · · · · · · · · · · · · ·
8											
											· · · · · · · · · · · · · · · · · · ·
9999999	Control Totals								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?	YES
2.		See Explanation
		YES
3.		See Explanation
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	See Explanation
5	APRIL FILING  Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
		YES
6.		YES
1.		11.5
Ω	MAY FILING  Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	See Explanation
8.	JUNE FILING	See Explanation
9.		See Explanation
	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	See Explanation
11.	AUGUST FILING  Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES
supp inte	following supplemental reports are required to be filed as part of your annual statement filing if your company is enganged in the type of busin plement. However, in the event that your company does not transact the type of business for which the special report must be filed, your resport rogatory 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 that what is required of your company that ever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.	ess covered by the nse of NO to the specific
	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplemental A to Schedule T (Medical Professional Liablity Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	YES
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27.	Will an approval from the reporting entity's state of domicle for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
28.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1?	NO
	APRIL FILING	
29.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
35.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April?	NO NO
36	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if require	NO

be filed with the state of domicile and the NAIC by April 1?

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

or. Will (NE	e Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?  AUGUST FILING	NO
38. Will Ma	anagement's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
00. Yill Mc		
Explanation 2:	Texas FAIR Plan Association has no employees. TFPA reimburses costs of personnel employed by the Texas Windstorm Insurance perform work for TFPA.	Association that
Explanation 4:	Not required.	
Explanation 8:	The Texas FAIR Plan Association annual statement is not combined with any other entity.	
Explanation 9:	The Texas FAIR Plan Association is not requred to file until June 30.	
Explanation 10:	The Texas FAIR Plan Association is not requred to file until June 30.	
	The Texas FART har Association is not required to line unit solite 50.	
	Not and Carlin	
Explanation 13:	Not applicable.	
Explanation 14:	Not applicable.	
Explanation 15:	Not applicable.	
Explanation 16:	Not applicable.	
	VII 166VII VII	
Explanation 17:	Not applicable.	
Explanation 19:	Not applicable.	
Explanation 22:	No exceptions.	
Explanation 23:	Not applicable.	
Explanation 20.	Not applicable.	
Explanation 24:	Not applicable.	
Explanation 25:	Not applicable.	
Explanation 26:	Not applicable.	
Explanation 27:	Not applicable.	
Explanation 21.	·····	
Explanation 28:	Not applicable.	
Explanation 29:	Not applicable.	
Explanation 30:	Not applicable.	
Explanation 31:	Not applicable	
_λριαπαποπ 31.	Not applicable.	
Explanation 32:	Not applicable.	

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Explanation 33:	Not applicable.	
Explanation 34:	Not applicable.	
Explanation 35:	Not applicable.	
Explanation 36:	Not applicable.	
Explanation 37:	Not applicable.	
Explanation 38:	Not applicable.	
Bar Code:		
	11543202046000000	11543202039000000
	11543202020100000	11543202022000000
	11543202022100000	1154320204200000
	115432020400000	1154320203600000
	11543202045500000	1154320204900000
	11543202038500000	11543202036500000
	11545202056500000	1154520205050000
		1154520205000000
		11543202022400000
		11543202022600000
	11543202055500000	1154320202300000
	11543202030600000	11543202021000000
	11543202021600000	11543202021700000
	11543202055000000 11543202021200000	11543202021100000

## **OVERFLOW PAGE FOR WRITE-INS**

## Page 11 - Continuation

## **UNDERWRITING AND INVESTMENT EXHIBIT**

#### **PART 3 - EXPENSES**

	1	2	3	4
REMAINING WRITE-INS AGGREGATED AT LINE 24	Loss Adjustment	Other Underwriting	Investment	
FOR OTHER LINES OF BUSINESS	Expenses	Expenses	Expenses	Total
2404. Disaster Recovery Expense	40,770	95,131		135,901
2497. Totals (Lines 2404 through 2496)				
(Page 11, Line 24)	40,770	95,131		135,901

## **SUMMARY INVESTMENT SCHEDULE**

	Gross Inve			Admitted Assets a	•	
	Holdin	ĭ	_	the Annual S		_
	1	2	3	4 Securities	5	6
		Percentage of Column 1		Lending Reinvested Collateral	Total (Col. 3 + 4)	Percentage of Column 5
Investment Categories	Amount	Line 13	Amount	Amount	Amount	Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. Governments						
1.02 All other governments						
1.03 U.S. states, territories and possessions, etc. guaranteed						
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed						
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed						
1.06 Industrial and miscellaneous						
1.07 Hybrid securities						
1.08 Parent, subsidiaries and affiliates						
1.09 SVO identified funds						
1.10 Unaffiliated bank loans						
1.11 Total long-term bonds						
Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)						
2.02 Parent, subsidiaries and affiliates						
2.03 Total preferred stocks						
Common stocks (Schedule D, Part 2, Section 2):						
·						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)						
3.02 Industrial and miscellaneous Other (Unaffiliated)						
3.03 Parent, subsidiaries and affiliates Publicly traded						
3.04 Parent, subsidiaries and affiliates Other						
3.05 Mutual funds						
3.06 Unit investment trusts						
3.07 Closed-end funds						
3.08 Total common stocks						
Mortgage loans (Schedule B):						
4.01 Farm mortgages						
4.02 Residential mortgages						
4.03 Commercial mortgages						
4.04 Mezzanine real estate loans						
4.05 Total valuation allowance						
4.06 Total mortgage loans						
5. Real estate (Schedule A):						
5.01 Properties occupied by company						
5.02 Properties held for production of income						
5.03 Properties held for sale						
5.04 Total real estate						
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)	40,367,948	69.94	40,367,948		40,367,948	69.94
6.02 Cash equivalents (Schedule E, Part 2)	17,349,221	30.06	17,349,221		17,349,221	30.06
6.03 Short-term investments (Schedule DA)						
COA Tatal analy analysis and about town investments	57,717,169	100.00	57,717,169		57,717,169	100.00
7.0		100.00	07,717,100		01,111,100	100.00
0 D ' I' (0 L L L DD)						
Other invested assets (Schedule BA)						
10. Receivables for securities						
11. Securities Lending (Schedule DL, Part 1)				X X X	X X X	XXX
12. Other invested assets (Page 2, Line 11)						
13. Total invested assets	57,717,169	100.00	57,717,169		57,717,169	100.00

NONE Schedule A and B Verification

NONE Schedule BA and D Verification

NONE Schedule D - Summary

NONE Schedule D - Part 1A - Sect 1 (3 pgs)

NONE Schedule D - Part 1A - Sect 2 (2 pgs)

NONE Schedule DA Verification

NONE Schedule DB - Part A and B Verification

NONE Schedule DB - Part C - Section 1

NONE Schedule DB - Part C - Section 2

NONE Schedule DB - Verification

### **SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS**

(Cash Equivalents)

		1	2	3	4
		Total	Bonds	Money Market Mutual Funds	Other (a)
1.	Book/adjusted carrying value, December 31 of prior year	21,747,902		21,747,902	
2.	Cost of cash equivalents acquired				
3.	Accrual of discount				
4.					
5.	Total gain (loss) on disposals				
6.	Deduct consideration received on disposals			4,398,681	
7.	Dadical assessing of assessing				
8.	Total Conformation of the				
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)	17,349,221		17,349,221	
11.	Deduct total nonadmitted amounts				
12.	Statement value at end of current period (Line 10 minus Line 11)	17,349,221		17,349,221	

<sup>(</sup>a) Indicate the category of such investments, for example, joint ventures, transportation equipment:

NONE Schedule A - Part 1

NONE Schedule A - Part 2

NONE Schedule A - Part 3

NONE Schedule B - Part 1

NONE Schedule B - Part 2

NONE Schedule B - Part 3

NONE Schedule BA - Part 1

NONE Schedule BA - Part 2

NONE Schedule BA - Part 3

NONE Schedule D - Part 1

NONE Schedule D - Part 2 - Section 1

NONE Schedule D - Part 2 - Section 2

NONE Schedule D - Part 3

NONE Schedule D - Part 4

NONE Schedule D - Part 5

NONE Schedule D - Part 6 - Section 1 and 2

NONE Schedule DA - Part 1

NONE Schedule DB - Part A - Section 1

NONE Schedule DB - Part A - Section 2

NONE Schedule DB - Part B - Section 1

NONE Schedule DB - Part B - Section 2

NONE Schedule DB - Part D - Section 1

NONE Schedule DB - Part D - Section 2

NONE Schedule DB - Part E

NONE Schedule DL - Part 1

NONE Schedule DL - Part 2

## **SCHEDULE E - PART 1 - CASH**

1 Depository	2 Code	Rate of Interest	4 Amount of Interest Received During Year	5 Amount of Interest Accrued December 31 of Current Year	6 Balance	7
ODEN DEDOCITORIES						
OPEN DEPOSITORIES  Bank of America, N.A. Austin, TX  Bank of America, N.A Certificate of Deposit Due March 31,2020  Bank of America, N.A Certificate of Deposit Due July 27, 2020  Bank of America, N.A Certificate of Deposit Due July 29, 2020  Citibank, N.A. Dallas, TX		0.200 0.300 0.200	2,500		11,869,090 208,581	
Citibank, N.A IMMA Dallas, TX JP Morgan Chase Bank, N.A. San Antonio, TX		0.100	40,819		9,219,435 19,070,842	
0199998 Deposits in ( 0) depositories that do not exceed the allowable limit in any one depository						
(See Instructions) - open depositories	XXX	XXX				XXX
0199999 Totals - Open Depositories	XXX	XXX	47,986		40,367,948	XXX
SUSPENDED DEPOSITORIES						
0299998 Deposits in ( 0) depositories that do not exceed the allowable limit in any one depository (See Instructions) - suspended depositories	XXX	xxx				xxx
0299999 Totals - Suspended Depositories	XXX	XXX				XXX
0399999 Total Cash on Deposit	XXX	XXX	47,986		40,367,948	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX		XXX
0599999 Total Cash	XXX	XXX	47,986		40,367,948	XXX
UUUUUUU I UKAI UKAII	1 ^ ^ ^	_ ^^^	41,300	L	40,307,340	_ ^ ^ ^ _

#### TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

_								
	1. January	38,981,371	4. April	40,166,240	7. July	39,054,588	10. October	43,819,437
	2. February	39,558,759	5. May	41,915,107	8. August	33,912,618	11. November	42,039,559
	3 March	40 568 689	6 June	54 416 659	9. September	34.566.504	12. December	40 367 948

### **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

#### Show Investments Owned December 31 of Current Year

	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
4812C2-23-9 JP Mo	organ US Treasury Plus Money Market Fund - Capital Shares 4110		12/31/2020	0.030	X X X	13,349,221	229	
4812C2-23-9 JP Mc 4812C2-73-4 JP Mc	organ US Treasury Plus Money Market Fund - Capital Shares 4110 organ US Treasury Plus Money Market Fund - Institutionial Shares 3918		12/31/2020	0.030	XXX	4,000,000	106	101,318
8599999 Exempt Money Market I	Mutual Funds – as Identified by SVO					17,349,221	335	101,318
8899999 Total Cash Equivalents						17,349,221	335	101,318
8899999 Total Cash Equivalents	3					17,349,221	335	101,318

Book/Adjusted Carrying	Value by NAIC Designation	Category Footnote:

1A \$	1B \$	1C \$
2A \$	2B \$	2C \$
3A \$	3B \$	3C \$
4A \$	4B \$	4C \$
5A \$	5B \$	5C \$
6\$		

## NONE Schedule E - Part 3