

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, 2024

PROPERTY AND CASUALTY

2024



11543202420100100

ANNUAL STATEMENT

For the Year Ended December 31, 2024
OF THE CONDITION AND AFFAIRS OF THE

Texas FAIR Plan Association

NAIC Group Code 4766 (Current Period) 4766 (Prior Period) NAIC Company Code 11543 Employer's ID Number 43-1982873
Organized under the Laws of Texas, State of Domicile or Port of Entry TX
Country of Domicile US
Incorporated/Organized December 31, 2002 Commenced Business December 31, 2002
Statutory Home Office 4801 Southwest Parkway Building 1, Suite 200, Austin, TX, US 78735
Main Administrative Office 4801 Southwest Parkway Building 1, Suite 200, Austin, TX, US 78735
Mail Address PO Box 99080, Austin, TX, US 78709-9080
Primary Location of Books and Records 4801 Southwest Parkway Building 1, Suite 200, Austin, TX, US 78735
Internet Web Site Address https://www.texasfairplan.org
Statutory Statement Contact Allen David Fulkerson, 512-899-4988, afulkerson@twia.org

OFFICERS

Wendy Mueller

Table with 2 columns: Name, Title. Rows include David Patrick Durden (General Manager), Ryan Bridges # (Vice Chairman), Edward James Sherlock (Secretary/Treasurer), Stuart Keith Harbour (Chief Financial Officer).

Vice Presidents of TFPA

Table with 4 columns: Name, Title, Name, Title. Rows include Michael Ledwik (VP Underwriting), Michael Eleftheriades # (Interim VP IT), Jessica Crass (VP Legal & Compliance), David Scott Williams (VP Claims), Michelle Friesenhahn # (VP People and Business Operations), James Murphy (Chief Actuary and VP Enterprise Analytics).

TFPA Governing Committee

Table with 4 columns: Name, Title, Name, Title. Rows include Wendy Mueller, Ryan Bridges #, John Miletto, Georgia Rutherford Neblett, Timothy Lawrence McCarthy, Danny Pringle, Edward James Sherlock, Frank Baumann, Jr, Mark Solomon, Pamela Hurley #.

State of Texas

County of Travis

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Signature of David Durden

(Signature)

David Patrick Durden

(Printed Name)

1.

General Manager

(Title)

Signature of Stuart Keith Harbour

(Signature)

Stuart Keith Harbour

(Printed Name)

2.

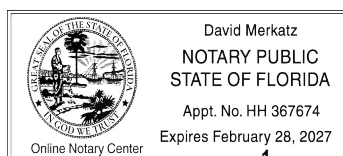
Chief Financial Officer

(Title)

Subscribed and sworn to (or affirmed) before me this on this 5th day of February, 2025, by David Durden, Stuart Harbour

Signature of David Merkatz
David Merkatz

- a. Is this an original filing? [X] Yes [] No
b. If no: 1. State the amendment number
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 (\$ 29,523,798, Schedule E - Part 1), cash equivalents (\$ 32,651,731, Schedule E - Part 2), and short-term investments (\$ 0, Schedule DA)	62,175,529		62,175,529	52,886,813
6. Contract loans (including \$ 0 premium notes)				
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)	62,175,529		62,175,529	52,886,813
13. Title plants less \$ 0 charged off (for Title insurers only)				
14. Investment income due and accrued	101,621		101,621	137,814
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	5,423,476	324,584	5,098,892	2,963,336
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums)	20,320,281		20,320,281	8,680,655
15.3 Accrued retrospective premiums (\$ 0) and contracts subject to redetermination (\$ 0)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	12,324,610		12,324,610	50,901
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 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
21. Furniture and equipment, including health care delivery assets (\$ 0)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates				
24. Health care (\$ 0) and other amounts receivable				
25. Aggregate write-ins for other-than-invested assets	14,614,275	335,311	14,278,964	
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	114,959,792	659,895	114,299,897	64,719,519
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	114,959,792	659,895	114,299,897	64,719,519

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. Assessment Receivable	14,259,241		14,259,241	
2502. Due from Agents	175,552	175,552		
2503. Prepaid Assets	106,587	106,587		
2598. Summary of remaining write-ins for Line 25 from overflow page	72,895	53,172	19,723	
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	14,614,275	335,311	14,278,964	

NONE

LIABILITIES, SURPLUS AND OTHER FUNDS

	1	2
	Current Year	Prior Year
1. Losses (Part 2A, Line 35, Column 8)	23,210,865	13,146,920
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)	3,152,330	3,458,163
4. Commissions payable, contingent commissions and other similar charges	2,235,777	1,099,765
5. Other expenses (excluding taxes, licenses and fees)	2,904,972	1,974,437
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	2,381,667	785,070
7.1 Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))		
7.2 Net deferred tax liability		
8. Borrowed money \$ 0 and interest thereon \$ 0		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 45,402,603 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)	82,804,573	37,297,646
10. Advance premium	3,199,908	1,334,778
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	49,431,426	21,033,466
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	636,150	
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated	5,498	36,289
16. Provision for reinsurance (including \$ 0 certified) (Schedule F, Part 3 Column 78)	48,000	
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	2,602,686	1,087,719
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ 0 and interest thereon \$ 0		
25. Aggregate write-ins for liabilities	1,830,055	1,120,448
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	174,443,907	82,374,701
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	174,443,907	82,374,701
29. Aggregate write-ins for special surplus funds		
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other-than-special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)	(60,144,010)	(17,655,182)
36. 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)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	(60,144,010)	(17,655,182)
38. Totals (Page 2, Line 28, Col. 3)	114,299,897	64,719,519

DETAILS OF WRITE-IN LINES		
2501. Escheat liability	1,408,675	981,014
2502. Due to policyholders	421,380	139,434
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	1,830,055	1,120,448
2901.		
2902.		
2903.	NONE	
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.		
3202.		
3203.	NONE	
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		

STATEMENT OF INCOME

	1	2
	Current Year	Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4)	99,261,125	53,316,360
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)	101,526,064	39,877,446
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	18,837,991	9,961,558
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	41,660,930	23,916,740
5. Aggregate write-ins for underwriting deductions		
6. Total underwriting deductions (Lines 2 through 5)	162,024,985	73,755,744
7. Net income of protected cells		
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(62,763,860)	(20,439,384)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	1,986,365	1,303,248
10. Net realized capital gains (losses) less capital gains tax of \$ 0 (Exhibit of Capital Gains (Losses))		
11. Net investment gain (loss) (Lines 9 + 10)	1,986,365	1,303,248
OTHER INCOME		
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 0 amount charged off \$ 705,656)	(705,656)	(457,959)
13. Finance and service charges not included in premiums	948,298	565,610
14. Aggregate write-ins for miscellaneous income	17,655,182	
15. Total other income (Lines 12 through 14)	17,897,824	107,651
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	(42,879,671)	(19,028,485)
17. Dividends to policyholders		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	(42,879,671)	(19,028,485)
19. Federal and foreign income taxes incurred		
20. Net income (Line 18 minus Line 19) (to Line 22)	(42,879,671)	(19,028,485)
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	(17,655,182)	1,182,514
22. Net income (from Line 20)	(42,879,671)	(19,028,485)
23. Net transfers (to) from Protected Cell accounts		
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		
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	438,843	(809,211)
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	(48,000)	1,000,000
29. Change in surplus notes		
30. 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. Surplus adjustments:		
33.1 Paid in		
33.2 Transferred to capital (Stock Dividend)		
33.3 Transferred from capital		
34. Net remittances from or (to) Home Office		
35. Dividends to stockholders		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37. Aggregate write-ins for gains and losses in surplus		
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	(42,488,828)	(18,837,696)
39. Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 38) (Page 3, Line 37)	(60,144,010)	(17,655,182)

DETAILS OF WRITE-IN LINES		
0501.	NONE	
0502.		
0503.		
0598. Summary of remaining write-ins for Line 05 from overflow page		
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)		
1401. Member Assessment Income		17,655,182
1402.		
1403.		
1498. Summary of remaining write-ins for Line 14 from overflow page		
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)		17,655,182
3701.	NONE	
3702.		
3703.		
3798. Summary of remaining write-ins for Line 37 from overflow page		
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		

CASH FLOW

	1	2
Cash from Operations	Current Year	Prior Year
1. Premiums collected net of reinsurance	161,694,724	69,892,106
2. Net investment income	2,022,558	1,224,035
3. Miscellaneous income	3,638,583	107,653
4. Total (Lines 1 through 3)	167,355,865	71,223,794
5. Benefit and loss related payments	122,879,652	36,091,841
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	35,879,042	33,013,340
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)	158,758,694	69,105,181
11. Net cash from operations (Line 4 minus Line 10)	8,597,171	2,118,613
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. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)		
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)	691,545	149,312
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	691,545	149,312
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)	9,288,716	2,267,925
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	52,886,813	50,618,888
19.2 End of year (Line 18 plus Line 19.1)	62,175,529	52,886,813

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001		
20.0002		
20.0003		

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 – PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year- per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year- per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire	2,763,418	909,871	1,697,872	1,975,417
2.1 Allied lines	17,868,114	10,047,443	10,491,143	17,424,414
2.2 Multiple peril crop				
2.3 Federal Flood				
2.4 Private Crop				
2.5 Private flood				
3. Farmowners multiple peril				
4. Homeowners multiple peril	124,136,520	26,340,332	70,615,558	79,861,294
5.1 Commercial multiple peril (non-liability portion)				
5.2 Commercial multiple peril (liability portion)				
6. Mortgage guaranty				
8. Ocean marine				
9.1 Inland marine				
9.2 Pet insurance plans				
10. Financial guaranty				
11.1 Medical professional liability—occurrence				
11.2 Medical professional liability—claims-made				
12. Earthquake				
13.1 Comprehensive (hospital and medical) individual				
13.2 Comprehensive (hospital and medical)group				
14. Credit accident and health (group and individual)				
15.1 Vision Only				
15.2 Dental Only				
15.3 Disability Income				
15.4 Medical supplement				
15.5 Medicaid Title XIX				
15.6 Medicaid Title XVIII				
15.7 Long-Term Care				
15.8 Federal employees health benefits plan				
15.9 Other 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 Private passenger auto no-fault (personal injury protection)				
19.2 Other private passenger auto liability				
19.3 Commercial auto no-fault (personal injury protection)				
19.4 Other commercial auto liability				
21.1 Private passenger auto physical damage				
21.2 Commercial 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				
31. Reinsurance-nonproportional assumed property				
32. Reinsurance-nonproportional assumed liability				
33. Reinsurance-nonproportional assumed financial lines				
34. Aggregate write-ins for other lines of business				
35. TOTALS	144,768,052	37,297,646	82,804,573	99,261,125

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))				

NONE

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

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire	1,697,872				1,697,872
2.1 Allied lines	10,491,143				10,491,143
2.2 Multiple peril crop					
2.3 Federal Flood					
2.4 Private crop					
2.5 Private flood					
3. Farmowners multiple peril					
4. Homeowners multiple peril	70,615,558				70,615,558
5.1 Commercial multiple peril (non-liability portion)					
5.2 Commercial multiple peril (liability portion)					
6. Mortgage Guarantee					
8. Ocean marine					
9.1 Inland marine					
9.2 Pet insurance plans					
10. Financial guaranty					
11.1 Medical professional liability—occurrence					
11.2 Medical professional liability—claims-made					
12. Earthquake					
13.1 Comprehensive (hospital and medical) individual					
13.2 Comprehensive (hospital and medical) group					
14. Credit accident and health (group and individual)					
15.1 Vision only					
15.2 Dental only					
15.3 Disability income					
15.4 Medicare Supplement					
15.5 Medicaid title XIX					
15.6 Medicaid title XVIII					
15.7 Long Term Care					
15.8 Federal Employees health benefits plans					
15.9 Other 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 Private passenger auto no-fault (personal injury protection)					
19.2 Other private passenger auto liability					
19.3 Commercial auto no-fault (personal injury protection)					
19.4 Other commercial auto liability					
21.1 Private passenger auto physical damage					
21.2 Commercial 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					
31. Reinsurance-nonproportional assumed property					
32. Reinsurance-nonproportional assumed liability					
33. Reinsurance-nonproportional assumed financial lines					
34. Aggregate write-ins for other lines of business					
35. TOTALS	82,804,573				82,804,573
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Lines 35 through 37)					82,804,573

DETAILS OF WRITE-IN LINES					
3401.		NONE			
3402.					
3403.					
3498. Sum of remaining write-ins for Line 19.3 from overflow page					
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)					

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

UNDERWRITING AND INVESTMENT EXHIBIT PART 1B – PREMIUMS WRITTEN

Line of Business	1	Reinsurance Assumed		Reinsurance Ceded		6
	Direct Business (a)	2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	Net Premiums Written Cols. 1 + 2 + 3 - 4 - 5
1. Fire	6,201,814				3,438,396	2,763,418
2.1 Allied lines	55,370,744				37,502,630	17,868,114
2.2 Multiple peril crop						
2.3 Federal Flood						
2.4 Private Crop						
2.5 Private flood						
3. Farmowners multiple peril						
4. Homeowners multiple peril	175,703,993				51,567,473	124,136,520
5.1 Commercial multiple peril (non-liability portion)						
5.2 Commercial multiple peril (liability portion)						
6. Mortgage guaranty						
8. Ocean marine						
9.1 Inland marine						
9.2 Pet insurance plans						
10. Financial guaranty						
11.1 Medical professional liability—occurrence						
11.2 Medical professional liability—claims-made						
12. Earthquake						
13.1 Comprehensive (hospital and medical) individual						
13.2 Comprehensive (hospital and medical)group						
14. Credit accident and health (group and individual)						
15.1 Vision Only						
15.2 Dental Only						
15.3 Disability Income						
15.4 Medical supplement						
15.5 Medicaid Title XIX						
15.6 Medicaid Title XVIII						
15.7 Long-Term Care						
15.8 Federal employees health benefits plan						
15.9 Other 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 Private passenger auto no-fault (personal injury protection)						
19.2 Other private passenger auto liability						
19.3 Commercial auto no-fault (personal injury protection)						
19.4 Other commercial auto liability						
21.1 Private passenger auto physical damage						
21.2 Commercial 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						
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						
35. TOTALS	237,276,551				92,508,499	144,768,052

DETAILS OF WRITE-IN LINES						
3401.		NONE				
3402.		NONE				
3403.		NONE				
3498. Sum of remaining write-ins for Line 34 from overflow page		NONE				
3499. Totals (Lines 3401 through 3403 plus 3498 (Line 34 above))		NONE				

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

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

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	4,952,629			4,952,629	1,802,694	885,744	5,869,579	297,131
2.1 Allied lines	61,906,829		21,494,642	40,412,187	5,229,528	2,843,692	42,798,023	245,621
2.2 Multiple peril crop								
2.3 Federal flood								
2.4 Private crop								
2.5 Private flood								
3. Farmowners multiple peril								
4. Homeowners multiple peril	68,305,504		22,208,201	46,097,303	16,178,643	9,417,484	52,858,462	66,188
5.1 Commercial multiple peril (non-liability portion)								
5.2 Commercial multiple peril (liability portion)								
6. Mortgage guaranty								
8. Ocean marine								
9.1 Inland marine								
9.2 Pet insurance plans								
10. Financial guaranty								
11.1 Medical professional liability—occurrence								
11.2 Medical professional liability—claims-made								
12. Earthquake								
13.1 Comprehensive (hospital and medical)individual								
13.2 Comprehensive (hospital and medical)group								
14. Credit accident and health (group and individual)								
15.1 Vision only								
15.2 Dental only								
15.3 Disability income								
15.4 Medicare supplement								
15.5 Medicaid Title XIX								
15.6 Medicaid Title XIXVIII								
15.7 Long Term care								
15.8 Federal Employees health benefits plan								
15.9 Other 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 Private passenger auto no-fault(personal injury protection)								
19.2 Other private passenger liability								
19.3 Commercial auto no-fault (personal injury protection)								
19.4 Other commercial auto liability								
21.1 Private passenger auto physical damage								
21.2 Commercial 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								
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	135,164,962		43,702,843	91,462,119	23,210,865	13,146,920	101,526,064	102,282
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)								

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

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	1,081,556			1,081,556	721,138			1,802,694	148,690
2.1 Allied lines	121,783		205,547	(83,764)	7,343,675		2,030,383	5,229,528	992,904
2.2 Multiple peril crop									
2.3 Federal flood									
2.4 Private crop									
2.5 Private flood									
3. Farmowners multiple peril									
4. Homeowners multiple peril	10,317,510		4,381,126	5,936,384	14,165,668		3,923,409	16,178,643	2,010,736
5.1 Commercial multiple peril (non-liability portion)									
5.2 Commercial multiple peril (liability portion)									
6. Mortgage guaranty									
8. Ocean marine									
9.1 Inland marine									
9.2 Pet insurance plans									
10. Financial guaranty									
11.1 Medical professional liability—occurrence									
11.2 Medical professional liability—claims-made									
12. Earthquake									
13.1 Comprehensive (hospital and medical)individual								(a)	
13.2 Comprehensive (hospital and medical)group								(a)	
14. Credit accident and health (group and individual)									
15.1 Vision only								(a)	
15.2 Dental only								(a)	
15.3 Disability income								(a)	
15.4 Medicare supplement								(a)	
15.5 Medicaid Title XIX								(a)	
15.6 Medicaid Title XIVIII								(a)	
15.7 Long Term care								(a)	
15.8 Federal Employees health benefits plan								(a)	
15.9 Other health								(a)	
16. Workers' compensation									

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

Line of Business	Reported Losses				Incurred But Not Reported			8 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
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 Private passenger auto no-fault(personal injury protection)									
19.2 Other private passenger liability									
19.3 Commercial auto no-fault (personal injury protection)									
19.4 Other commercial auto liability									
21.1 Private passenger auto physical damage									
21.2 Commercial 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									
31. Reinsurance-nonproportional assumed property	X X X				X X X				
32. Reinsurance-nonproportional assumed liability	X X X				X X X				
33. Reinsurance-nonproportional assumed financial lines	X X X				X X X				
34. Aggregate write-ins for other lines of business									
35. TOTALS	11,520,849		4,586,673	6,934,176	22,230,481		5,953,792	23,210,865	3,152,330
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)									

NONE

(a) Including \$ 0 for present value of life indemnity claims reported in Lines 13 and 15.

10.1

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct	18,214,457			18,214,457
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	9,454,473			9,454,473
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	8,759,984			8,759,984
2. Commission and brokerage:				
2.1 Direct, excluding contingent		27,074,676		27,074,676
2.2 Reinsurance assumed, excluding contingent				
2.3 Reinsurance ceded, excluding contingent		7,734,051		7,734,051
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)		19,340,625		19,340,625
3. Allowances to manager and agents				
4. Advertising		12,836		12,836
5. Boards, bureaus and associations		115,378		115,378
6. Surveys and underwriting reports		1,919,589		1,919,589
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries	7,311,519	6,779,985		14,091,504
8.2 Payroll taxes	162,537	392,752		555,289
9. Employee relations and welfare	539,840	1,937,848		2,477,688
10. Insurance	21,137	74,073		95,210
11. Directors' fees				
12. Travel and travel items	6,624	93,272		99,896
13. Rent and rent items	107,543	377,508		485,051
14. Equipment	394,542	1,746,288		2,140,830
15. Cost or depreciation of EDP equipment and software				
16. Printing and stationery	74,887	204,734		279,621
17. Postage, telephone and telegraph, exchange and express	443,137	1,070,815		1,513,952
18. Legal and auditing	21,016	389,741		410,757
19. Totals (Lines 3 to 18)	9,082,782	15,114,819		24,197,601
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ 0		4,122,913		4,122,913
20.2 Insurance department licenses and fees				
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)		4,122,913		4,122,913
21. Real estate expenses				
22. Real estate taxes				
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses	995,225	3,082,573	91,500	4,169,298
25. Total expenses incurred	18,837,991	41,660,930	91,500	(a) 60,590,421
26. Less unpaid expenses—current year	3,152,330	7,447,416		10,599,746
27. Add unpaid expenses—prior year	3,458,163	3,859,272		7,317,435
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	19,143,824	38,072,786	91,500	57,308,110

DETAILS OF WRITE-IN LINES				
2401. IT systems Support & Product development	13,746	2,144,088		2,157,834
2402. Outside Professional Services	981,479	938,475		1,919,954
2403. Line of Credit Fees			91,500	91,500
2498. Sum of remaining write-ins for Line 24 from overflow page		10		10
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	995,225	3,082,573	91,500	4,169,298

(a) Includes management fees of \$ 22,973,351 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) 2,114,054	2,077,865
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income		
10. Total gross investment income	2,114,054	2,077,865
11. Investment expenses		(g) 91,500
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)		91,500
17. Net investment income (Line 10 minus Line 16)		1,986,365

DETAILS OF WRITE-IN LINES			
0901.	NONE		
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)			
1501.	NONE		
1502.			
1503.			
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 buildings; and excludes \$ 0 interest 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, excluding federal income taxes, attributable to segregated 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 assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 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)					
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)					

DETAILS OF WRITE-IN LINES					
0901.	NONE				
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 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. 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			
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)			
13. Title plants (for Title insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	324,584	127,198	(197,386)
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 Net deferred tax asset			
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software			
21. Furniture and equipment, including health care delivery assets			
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other-than-invested assets	335,311	971,540	636,229
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	659,895	1,098,738	438,843
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Lines 26 and 27)	659,895	1,098,738	438,843

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. Due from Agents	175,552	137,175	(38,377)
2502. Prepaid Assets	106,587	785,364	678,777
2503. Surcharge Receivable	53,172	49,001	(4,171)
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	335,311	971,540	636,229

NONE

NOTES TO FINANCIAL STATEMENTS

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 #	2024	2023
1. Company state basis (P 4, Line 20, Columns 1&3)	XXX	XXX	XXX	(\$42,879,671)	(\$19,028,485)
2. State Prescribed Practices that is an increase / (decrease) from NAIC SAP				-	-
3. State Permitted Practices that is an increase / (decrease) from NAIC SAP				-	-
4. NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	(\$42,879,671)	(\$19,028,485)

Surplus	SSAP #	F/S Page	F/S Line #	December 31, 2024	December 31, 2023
5. Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	(\$60,144,010)	(\$17,655,182)
6. State Prescribed Practices that is an increase / (decrease) from NAIC SAP				-	-
7. State Permitted Practices that is an increase / (decrease) from NAIC SAP				-	-
8. NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	(\$60,144,010)	(\$17,655,182)

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.

NOTES TO FINANCIAL STATEMENTS

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

NOTES TO FINANCIAL STATEMENTS

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

R. Share of Cash Pool by Asset Type

None

S. Aggregate Collateral Loans by Qualifying Investment Collateral

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

C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

<u>Interest Income Due and Accrued</u>	<u>Amount</u>
1. Gross	\$ 101,621
2. Nonadmitted	0
3. Admitted	101,621

D. The aggregate deferred interest.

	<u>Amount</u>
Aggregate Deferred Interest	\$ 0

NOTES TO FINANCIAL STATEMENTS

- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.

	<u>Amount</u>
Cumulative amounts of PIK interest included in the current principal balance	\$ 0

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 2024 and 2023 the Association incurred expenses under its service contract with TWIA in the amounts of \$22,973,351 and \$15,270,086 respectively (See Note 10E). As of December 31, 2024 and December 31, 2023, the Association held an intercompany payable of \$2,602,686 and \$1,087,719, 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

NOTES TO FINANCIAL STATEMENTS

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 obtained a \$30,000,000 line of credit with one of its primary financial institutions effective June 30, 2023. The facility replaced the previous \$30,000,000 line of credit and terminates on June 30, 2025. The Association pays the lender a 0.30% 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 July 2024, Hurricane Beryl struck the Texas Coast impacting policyholders of the Association. The ultimate gross loss and loss adjustment expenses from Hurricane Beryl are estimated to be approximately

NOTES TO FINANCIAL STATEMENTS

\$108,000,000 as of December 31, 2024. 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). The member assessment approved by the Commissioner on November 7, 2024 for \$17,655,182 was invoiced on December 13, 2024 and is currently in the course of collection. The approved assessment amount represents the 2023 Association deficit. There are no known collections issues and if additional assessments are needed the requests will be made in 2025.

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, 2024 for the fire assessment in the amount of \$118,000 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 \$53,172 and \$49,001 have been non-admitted as of December 31, 2024 and December 31, 2023 respectively. Policy surcharges collected were \$44,583 and \$560 for the periods ended December 31, 2024 and December 31, 2023, respectively.

2. Rollforward of Related Asset

Description	Amount
a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end	\$ 49,001
b. Decreases current year:	
Premium tax offsets applied	-
Premium tax offsets charged off	-
Policy surcharges collected	44,583
Policy surcharges charged off	-
c. Increases current year:	
Premium tax offsets accrued	-
Policy surcharges accrued	48,754
d. Assets recognized from paid and accrued premium tax offsets and policy surcharges at December 31, 2024	\$ 53,172

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 claims 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
X				

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

(f) Per Claim [X] (g) Per Claimant []

NOTES TO FINANCIAL STATEMENTS

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.

NOTES TO FINANCIAL STATEMENTS

<u>Type or Class of Financial Instrument</u>	<u>Aggregate Fair Value</u>	<u>Admitted Assets</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Net Asset Value (NAV)</u>	<u>Not Practicable (Carrying Value)</u>
Cash, cash equivalents and short-term investments	\$ 29,523,798	\$ 29,523,798	\$ 29,523,798	\$ -	\$ -	\$ -	\$ -
Exempt Money Market Mutual Funds – as Identified by SVO	\$ 32,651,731	\$ 32,651,731	\$ -	\$ -	\$ -	\$ 32,651,731	\$ -
Total Cash, Cash Equivalents and Short-Term Investments	\$ 62,175,529	\$ 62,175,529	\$ 29,523,798	\$ -	\$ -	\$ 32,651,731	\$ -

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, 2025, the date of issuance of these statutory financial statements. There are 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.

NOTES TO FINANCIAL STATEMENTS

Individual Reinsurers Who Are Not Members of a Group

ID Number	Reinsurer Name	Unsecured Amount
AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE	\$ 3,508,000
22-2005057	Everest Reinsurance Company (Blue Water)	2,410,000
RJ-3191289	Fidelis Insurance Bermuda Limited	1,434,000
RJ-3194122	DaVinci Reins thru Renaissance U/W	1,365,000
RJ-3190339	Renaissance Reinsurance Ltd.	1,365,000
RJ-3194126	Arch Reinsurance, Ltd.	1,045,000
RJ-3190770	Chubb Tempest Reinsurance Ltd.	954,000
AA-1120075	Lloyd's Underwriter Syndicate No. 4020 ARK	803,000
RJ-3190875	Hiscox Insurance Company Ltd (Bermuda)	705,000
75-1444207	Scor Reinsurance Company	665,000
31-0542366	The Cincinnati Insurance Company	579,000
AA-1126033	Lloyd's Underwriter Syndicate No. 0033 HIS	578,000
RJ-1340125	Hannover Re (Chard Re)	574,000
RJ-3194168	Aspen Bermuda Ltd.	570,000
RJ-3190686	Partner Reinsurance Company Ltd.	563,000
AA-1120171	Lloyd's Underwriter Syndicate No.1856 IQUW	551,000
AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML	443,000
RJ-3191190	Hamilton Re, Ltd.	378,000
AA-1128791	Lloyd's Underwriter Syndicate No. 2791 MAP	306,000
13-3138390	Navigators Insurance Company	290,000
RJ-3191352	Ascot Bermuda Ltd.	261,000
13-1675535	Swiss Reinsurance America Corporation	248,000
AA-1120084	Lloyd's Underwriter Syndicate No. 1955 BAR	205,000
AA-1126004	Lloyd's Syndicate No. 4444 CMA	203,000
AA-3194158	Allianz Risk Transfer (Bermuda) Ltd. (Nephila)	177,000
47-0698507	Odyssey Reinsurance Company	166,000
AA-1127301	Lloyd's Underwriter Syndicate No. 1301	156,000
13-4924125	Munich Reinsurance America, Inc.	143,000
47-0574325	Berkley Insurance Company	100,000
AA-1120071	Lloyd's Underwriter Syndicate No. 2007 NVA	81,000
13-5616275	Transatlantic Reinsurance Company	26,000
RJ-1340125	Hannover Ruck SE (Pillar)	2,000

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.

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

NOTES TO FINANCIAL STATEMENTS

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.

	Assumed		Ceded		Assumed Less Ceded	
	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity
a. Affiliates			45,402,603	3,867,026	(45,402,603)	(3,867,026)
b. All other						
c. Totals			45,402,603	3,867,026	(45,402,603)	(3,867,026)
d. Direct Unearned Premium Reserve			\$128,207,176			

2. 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 annual 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

NOTES TO FINANCIAL STATEMENTS

Note 25 – Changes in Incurred Losses and Loss Adjustment Expenses

A.

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 \$120,364,055 are lower by \$3,202,278 due to favorable development of prior year. Overall 2024 accident year results are related to Hurricane Beryl and other 2024 storm losses. 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, 2024 make a reasonable provision for Texas FAIR Plan Association.

Rollforward of unpaid losses and loss adjustment expenses	December 31, 2024	December 31, 2023
Balance as of January 1,	\$ 16,913,852	\$ 15,902,303
Less: Reinsurance Recoverable	308,769	3,044,699
Net Balance at January 1,	16,605,083	12,857,603
Incurred, net of reinsurance, related to:		
Current year	123,566,333	50,633,844
Prior years	(3,202,278)	(794,840)
Net Incurred	120,364,055	49,839,004
Paid, net of reinsurance, related to:		
Current year	(100,703,536)	(38,451,880)
Prior years	(9,902,407)	(7,639,644)
Net Paid Losses	(110,605,943)	(46,091,524)
Net Balance at end of period,	26,363,195	16,605,083
Plus: Reinsurance Recoverable	12,620,648	308,769
Balance at end of period,	\$ 38,983,843	\$ 16,913,852

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, 2024. 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, 2024 |
| (3) Was anticipated investment income utilized in calculation? | Yes () No (X) |

Note 31 – High Deductibles

Not applicable

NOTES TO FINANCIAL STATEMENTS

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

GENERAL INTERROGATORIES

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, 2 and 3
- 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 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. 12/31/2022
- 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. 12/31/2022
- 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). 10/21/2024
- 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? Yes [] No [X]
- 4.12 renewals? 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:
- 4.21 sales of new business? Yes [] No [X]
- 4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- If yes, complete and file the merger history data file with the NAIC.

GENERAL INTERROGATORIES

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 Name of Entity	2 NAIC Company Code	3 State of Domicile

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

6.2 If yes, give full information:

.....

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]

7.2 If yes,

7.21 State the percentage of foreign control. _____ %

7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]

8.2 If response to 8.1 is yes, please identify the name of the DIHC.

.....

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

8.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? Yes [] No [X]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

Calhoun Thomson & Matza LLP ; 9500 Arboretum Blvd #120, Austin, TX 78759

GENERAL INTERROGATORIES

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]

10.2 If response to 10.1 is yes, provide information related to this exemption:

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 [] No [X]

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 [X] No [] 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?
 James Colin Murphy, FCAS, MAAA, 4801 Southwest Parkway Building 1, Suite 200 Austin, TX, 78735, 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]

GENERAL INTERROGATORIES

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 prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e. Accountability for adherence to the code.

Yes No

14.11 If the response to 14.1 is no, please explain:

.....

14.2 Has the code of ethics for senior managers been amended?

Yes No

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

.....

14.3 Have any provisions of the code of ethics been waived for any of the specified officers?

Yes No

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

.....

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes No

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
.....
.....

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?

Yes No

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?

Yes No

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes No

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes No

GENERAL INTERROGATORIES

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers	\$ _____
20.12 To stockholders not officers	\$ _____
20.13 Trustees, supreme or grand (Fraternal only)	\$ _____

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers	\$ _____
20.22 To stockholders not officers	\$ _____
20.23 Trustees, supreme or grand (Fraternal only)	\$ _____

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]

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

21.21 Rented from others	\$ _____
21.22 Borrowed from others	\$ _____
21.23 Leased from others	\$ _____
21.24 Other	\$ _____

22.1 Does this statement include payments for assessments as described 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, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ _____

24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]

24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

1 Name of Third Party	2 Is the Third-Party Agent a Related Party (Yes/No)
.....
.....

INVESTMENT

25.01 Were all the stocks, bonds and other securities owned December 31 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 25.03) Yes [] No [X]

25.02 If no, give full and complete information, relating thereto:
TFPA does not hold any stocks, bonds, or other securities. TFPA holds only cash bank accounts, CD's and money market mutual funds

.....

.....

25.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
TFPA does not have a security lending program

.....

.....

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk Based Capital Instructions. \$ _____

25.05 For the reporting entity's securities lending program report amount of collateral for other programs. \$ _____

GENERAL INTERROGATORIES

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

25.09 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ _____

25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ _____

25.093 Total payable for securities lending reported on the liability page \$ _____

26.1 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 reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [] No [X]

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

- 26.21 Subject to repurchase agreements \$ _____
- 26.22 Subject to reverse repurchase agreements \$ _____
- 26.23 Subject to dollar repurchase agreements \$ _____
- 26.24 Subject to reverse dollar repurchase agreements \$ _____
- 26.25 Placed under option agreements \$ _____
- 26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$ _____
- 26.27 FHLB Capital Stock \$ _____
- 26.28 On deposit with states \$ _____
- 26.29 On deposit with other regulatory bodies \$ _____
- 26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$ _____
- 26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$ _____
- 26.32 Other \$ _____

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....
.....

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

GENERAL INTERROGATORIES

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
 If no, attach a description with this statement.

LINES 27.3 through 27.5 : FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [] No [X]

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41	Special accounting provision of SSAP No. 108	Yes [] No [X]
27.42	Permitted accounting practice	Yes [] No [X]
27.43	Other accounting guidance	Yes [] No [X]

27.5 By responding YES to 27.41 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.
- 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.

28.1 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]

28.2 If yes, state the amount thereof at December 31 of the current year. \$ _____

29. 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]

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

1 Name of Custodian(s)	2 Custodian's Address
.....
.....

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

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

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year? Yes [] No [X]

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

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

GENERAL INTERROGATORIES

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

1 Name Firm or Individual	2 Affiliation
David Durden	I
Stuart Harbour	I

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [] No [X]

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [] No [X]

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

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

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D – Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [] No [X]

30.2 If yes, complete the following schedule:

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

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

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

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds
31.2 Preferred stocks
31.3 Totals

GENERAL INTERROGATORIES

31.4 Describe the sources or methods utilized in determining the fair values:
TFPA does not have short-term bonds, long term bonds or preferred stocks

.....

32.1 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]

32.2 If the answer to 32.1 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]

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

33.2 If no, list exceptions:

34 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.
 b. Issuer or obligor is current on all contracted interest and principal payments.
 c. 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]

35 By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
 a. The security was either:
 i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
 ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
 b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
 c. The NAIC Designation and NAIC Designation Category were 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, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
 d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.
 Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? Yes [] No [X]

36. 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 [] No [X]

GENERAL INTERROGATORIES

37. 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 37.a - 37.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 N/A

38.1 Does the reporting entity directly hold cryptocurrencies? Yes No

38.2 If the response to 38.1 is yes, on what schedule are they reported? _____

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes No

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
 39.21 Held directly Yes No
 39.22 Immediately converted to U.S. dollars Yes No

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums
.....
.....

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or Rating Bureaus, if any? \$ 96,695

40.2 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 Name	2 Amount Paid
Insurance Services Office Inc	\$ 55,059
PIPSO	\$ 26,000
.....	\$

41.1 Amount of payments for legal expenses, if any? \$ 213,833

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

1 Name	2 Amount Paid
Perkins Law Group PLLC	\$ 82,800
.....	\$
.....	\$

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

42.2 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 Name	2 Amount Paid
.....	\$
.....	\$
.....	\$

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]

1.2 If yes, indicate premium earned on U.S. business only. \$ _____

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$ _____

1.31 Reason for excluding

.....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$ _____

1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$ _____

1.6 Individual policies:

Most current three years:

1.61 Total premium earned \$ _____

1.62 Total incurred claims \$ _____

1.63 Number of covered lives _____

All years prior to most current three years:

1.64 Total premium earned \$ _____

1.65 Total incurred claims \$ _____

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 _____

All years prior to most current three years:

1.74 Total premium earned \$ _____

1.75 Total incurred claims \$ _____

1.76 Number of covered lives _____

2. Health Test:

	1	2
	Current Year	Prior Year
2.1 Premium Numerator	\$ _____	\$ _____
2.2 Premium Denominator	\$ 99,261,125	\$ 53,316,361
2.3 Premium Ratio (2.1 / 2.2)	_____	_____
2.4 Reserve Numerator	\$ _____	\$ _____
2.5 Reserve Denominator	\$ 109,167,768	\$ 53,902,729
2.6 Reserve Ratio (2.4 / 2.5)	_____	_____

3.1 Did the reporting entity issue participating policies during the calendar year? Yes [] No [X]

3.2 If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year

3.21 Participating policies \$ _____

3.22 Non-participating policies \$ _____

4. For Mutual reporting entities and Reciprocal Exchanges only:

4.1 Does the reporting entity issue assessable policies? Yes [] No [X]

4.2 Does the reporting entity issue non-assessable policies? Yes [] No [X]

4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? _____ %

4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. \$ _____

5. For Reciprocal Exchanges Only:

5.1 Does the exchange appoint local agents? Yes [] No [X]

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation Yes [] No [] N/A [X]

5.22 As a direct expense of the exchange Yes [] No [] N/A [X]

5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?

.....

5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [X]

5.5 If yes, give full information

.....

6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:

Texas Fair Plan does not write Workers Compensation Insurance

.....

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

- 6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
 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 residential property exposure in and around Houston, Texas greater metropolitan area.
- 6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
 The XOL agreement provides the Assn. with two layers of coverage totaling \$518M 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 to provide recoveries of reinstatement premium due the reinsurers incurred in conjunction with only the first layer 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
- 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
- 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
- 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
- 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;
 (c) Aggregate stop loss reinsurance coverage;
 (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
 (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
 (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes No
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
 (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
 (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes No
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
 (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
 (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
 (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 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
- 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, Yes No
 (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes No
 (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

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [] No [] N/A [X]
- 11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force: Yes [] No [X]
- 11.2 If yes, give full information

- 12.1 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? \$ _____
- 12.3 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 | _____ % |
- 12.5 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]
- 13.3 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

- 16.1 Does the reporting entity write any warranty business? Yes [] No [X]
 If yes, disclose the following information for each of the following types of warranty coverage:
- | | | 1
Direct Losses
Incurred | 2
Direct Losses
Unpaid | 3
Direct Written
Premium | 4
Direct Premium
Unearned | 5
Direct Premium
Earned |
|------------------|----|--------------------------------|------------------------------|--------------------------------|---------------------------------|-------------------------------|
| 16.11 Home | \$ | _____ | \$ | _____ | \$ | _____ |
| 16.12 Products | \$ | _____ | \$ | _____ | \$ | _____ |
| 16.13 Automobile | \$ | _____ | \$ | _____ | \$ | _____ |
| 16.14 Other* | \$ | _____ | \$ | _____ | \$ | _____ |

* 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:
- | | |
|---|----------|
| 17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3
exempt from the statutory provision for unauthorized reinsurance | \$ _____ |
| 17.12 Unfunded portion of Interrogatory 17.11 | \$ _____ |
| 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 | \$ _____ |
| 17.14 Case reserves portion of Interrogatory 17.11 | \$ _____ |
| 17.15 Incurred but not reported portion of Interrogatory 17.11 | \$ _____ |
| 17.16 Unearned premium portion of Interrogatory 17.11 | \$ _____ |
| 17.17 Contingent commission portion of Interrogatory 17.11 | \$ _____ |
- 18.1 Do you act as a custodian for health savings accounts? Yes [] No [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 administered 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] N/A []

FIVE – YEAR HISTORICAL DATA

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

	1	2	3	4	5
	2024	2023	2022	2021	2020
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11, 16, 17, 18, & 19)					
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	61,572,558	38,344,493	28,802,975	28,787,852	30,667,109
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	175,703,993	75,115,704	48,077,901	46,860,260	48,809,909
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)	237,276,551	113,460,197	76,880,876	75,648,112	79,477,018
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11, 16, 17, 18, & 19)					
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	20,631,532	21,197,716	16,512,973	18,240,865	19,777,406
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	124,136,520	46,744,363	28,117,475	30,033,665	30,770,536
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)	144,768,052	67,942,079	44,630,448	48,274,530	50,547,942
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	(62,763,860)	(20,439,385)	(682,025)	(3,797,511)	(5,926,201)
14. Net investment gain (loss) (Line 11)	1,986,365	1,303,248	215,361	(161,574)	(27,816)
15. Total other income (Line 15)	17,897,824	107,653	183,180	(7,072)	21,300
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)					
18. Net income (Line 20)	(42,879,671)	(19,028,484)	(283,484)	(3,966,157)	(5,932,717)
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	114,299,897	64,719,520	57,640,691	57,098,390	65,855,101
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	5,098,892	2,963,336	1,436,703	1,353,801	1,501,139
20.2 Deferred and not yet due (Line 15.2)	20,320,281	8,680,655	5,224,011	4,914,793	5,130,310
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	174,443,907	82,374,701	56,458,177	55,143,217	59,849,447
22. Losses (Page 3, Line 1)	23,210,865	13,146,920	9,613,122	9,673,791	11,721,386
23. Loss adjustment expenses (Page 3, Line 3)	3,152,330	3,458,163	3,244,481	3,258,101	3,736,520
24. Unearned premiums (Page 3, Line 9)	82,804,573	37,297,646	22,671,927	23,661,595	24,801,277
25. Capital paid up (Page 3, Lines 30 & 31)					
26. Surplus as regards policyholders (Page 3, Line 37)	(60,144,010)	(17,655,182)	1,182,514	1,955,173	6,005,654
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	8,597,170	2,118,613	1,404,456	(8,608,747)	(8,440,390)
Risk-Based Capital Analysis					
28. Total adjusted capital	(60,144,010)	(17,655,182)	1,182,514	1,955,173	6,005,654
29. Authorized control level risk-based capital	28,654,922	23,863,654	18,299,190	18,250,637	24,615,071
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)					
33. Real estate (Lines 4.1, 4.2 & 4.3)					
34. Cash, cash equivalents and short-term investments (Line 5)	100.0	100.0	100.0	100.0	100.0
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)					
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47					
49. Total investment in parent included in Lines 42 to 47 above					
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
	2024	2023	2022	2021	2020
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)					
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	(42,488,828)	(18,837,696)	(772,659)	(4,050,481)	(6,127,397)
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11, 16, 17, 18, & 19)					
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	66,859,458	14,369,646	8,525,465	9,748,226	11,687,965
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	68,305,504	22,021,651	11,439,700	18,471,047	16,713,577
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	135,164,962	36,391,297	19,965,165	28,219,273	28,401,542
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11, 16, 17, 18, & 19)					
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	45,364,816	14,349,957	8,378,893	9,190,112	10,879,568
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	46,097,303	21,993,691	11,142,256	17,656,466	15,662,357
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)	91,462,119	36,343,648	19,521,149	26,846,578	26,541,925
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	100.0
67. Losses incurred (Line 2)	102.3	74.8	42.7	50.2	50.0
68. Loss expenses incurred (Line 3)	19.0	18.7	17.0	18.8	19.0
69. Other underwriting expenses incurred (Line 4)	42.0	44.9	41.8	38.7	42.2
70. Net underwriting gain (loss) (Line 8)	(63.2)	(38.3)	(1.5)	(7.7)	(11.2)
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)	16.4	35.0	42.3	39.7	44.3
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	121.3	93.5	59.7	68.9	69.0
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	(240.7)	(384.8)	3774.2	2469.1	841.7
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)	(2,743)	(1,596)	689	(3,297)	(2,099)
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)	15.5	(135.0)	35.2	(54.9)	(17.3)
Two Year Loss Development (\$000 omitted)					
76. 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)	(1,697)	538	(1,956)	(2,946)	(6,449)
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)	(143.5)	27.5	(32.6)	(24.3)	(42.7)

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 [] No []

requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

If no, please explain:

.....

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4766

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2024

NAIC Company Code 11543

	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	6,201,814	4,514,766		3,417,070	4,952,629	5,869,579	1,802,694		643	42,834	1,037,320	157,792
2.1 Allied Lines	55,370,744	44,286,658		28,884,766	61,906,829	66,473,220	7,465,458	331,364	513,586	819,906	9,189,098	1,397,816
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	175,703,993	120,324,655		95,905,340	68,305,504	83,271,124	24,483,178	794,383	1,300,638	1,517,507	16,848,258	2,562,904
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A & H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan Premium (b)												
15.9 Other Health (b)												
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												

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EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2024

NAIC Group Code 4766

NAIC Company Code 11543

	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums 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
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial 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												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTALS (a)	237,276,551	169,126,079		128,207,176	135,164,962	155,613,923	33,751,330	1,125,747	1,814,867	2,380,247	27,074,676	4,118,512
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 \$ 948,298
 (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.

Footnotes	Amounts
(a) Finance and service charges not included in Lines 1 to 35 \$	948,298
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products	

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EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4766

BUSINESS IN THE STATE OF TOTAL DURING THE YEAR 2024

NAIC Company Code 11543

	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	6,201,814	4,514,766		3,417,070	4,952,629	5,869,579	1,802,694		643	42,834	1,037,320	157,792
2.1 Allied lines	55,370,744	44,286,658		28,884,766	61,906,829	66,473,220	7,465,458	331,364	513,586	819,906	9,189,098	1,397,816
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop												
2.5 Private Flood												
3. Farmowners Multiple Peril												
4. Homeowners Multiple Peril	175,703,993	120,324,655		95,905,340	68,305,504	83,271,124	24,483,178	794,383	1,300,638	1,517,507	16,848,258	2,562,904
5.1 Commercial Multiple Peril (Non-Liability Portion)												
5.2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
8. Ocean Marine												
9.1 Inland Marine												
9.2 Pet insurance plans												
10. Financial Guaranty												
11.1 Medical Professional Liability - Occurrence												
11.2 Medical Professional Liability - Claims-Made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A & H (Group and Individual)												
15.1 Vision Only (b)												
15.2 Dental Only (b)												
15.3 Disability Income (b)												
15.4 Medicare Supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-Term Care (b)												
15.8 Federal Employees Health Benefits Plan Premium (b)												
15.9 Other Health (b)												
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												

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EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 4766

BUSINESS IN THE STATE OF TOTAL DURING THE YEAR 2024

NAIC Company Code 11543

	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums 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
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)												
19.2 Other Private Passenger Auto Liability												
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage												
21.2 Commercial 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												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business												
35. TOTALS (a)	237,276,551	169,126,079		128,207,176	135,164,962	155,613,923	33,751,330	1,125,747	1,814,867	2,380,247	27,074,676	4,118,512
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 \$ 948,298

(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.

19.GT

NONE **Schedule F - Part 1 Assumed Reinsurance**

NONE **Schedule F - Part 2 Premium Portfolio**

SCHEDULE F – PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 – [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Amount in Dispute Included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
47-0574325	32603	Berkley Insurance Company	DE		290	56	9	24	4	30	6	117		246		146		100	
31-0542366	10677	The Cincinnati Insurance Company	OH		2,166	336	55	145	23	187	39	913		1,698		1,106		592	13
22-2005057	26921	Everest Reinsurance Company (Blue Water)	DE		9,118	1,176	191	508	82	653	138	4,584		7,332		4,877		2,455	45
13-4924125	10227	Munich Reinsurance America, Inc.	DE		2,020	107	17	46	7	58	11	956		1,202		1,059		143	
13-3138390	42307	Navigators Insurance Company	NY		1,083	168	27	72	11	91	17	457		843		553		290	
47-0698507	23680	Odyssey Reinsurance Company	CT		1,577	112	18	48	8	63	14	732		995		823		172	6
75-1444207	30058	Scor Reinsurance Company	NY		3,027	392	64	169	26	213	41	1,315		2,220		1,555		665	
13-1675535	25364	Swiss Reinsurance America Corporation	NY		2,437	168	27	72	11	91	17	1,134		1,520		1,272		248	
13-5616275	19453	Transatlantic Reinsurance Company	NY		976	32	5	15	4	25	12	473		566		515		51	25
0999999	Total Authorized - Other U.S. Unaffiliated Insurers				22,694	2,547	413	1,099	176	1,411	295	10,681		16,622		11,906		4,716	89
AA-3194168	0	Aspen Bermuda Ltd.	BMU		(1)			1	1	5	6			13				13	16
AA-3194122	0	DaVinci Reins thru Renaissance U/W (2017)	BMU		(1)			1	2	6	7			16				16	20
AA-3194130	0	Endurance Speciality Ins Ltd. (2017)	BMU					1	3	9	11			24				24	32
AA-1340125	0	Hannover Rück SE (Pillar business) (2017)	DEU		6														
AA-3190829	0	Markel Bermuda Limited (2017)	BMU		4,001				1	4	4	2,001		2,010		2,380		(370)	13
AA-3190686	0	Partner Reinsurance Company Ltd. (2017)	BMU		(2)			1	3	9	11			24				24	32
AA-3190339	0	Renaissance Reinsurance Ltd. (2017)	BMU		(2)			1	3	9	11			24				24	31
AA-3190870	0	Validus Reinsurance, Ltd. (2017)	BMU		(2)			1	3	10	12			26				26	35
AA-1126033	0	Lloyd's Underwriter Syndicate No. 0033 HIS	GBR		1,735	308	50	133	22	174	40	713		1,440		840		600	22
AA-1126623	0	Lloyd's Underwriter Syndicate No. 0623 AFB	GBR								1			1				1	2
AA-1127183	0	Lloyd's Underwriter Syndicate No. 1084 CSL	GBR							1	1			2				2	4
AA-1127183	0	Lloyd's Underwriter Syndicate No. 1183 TAL	GBR		(1)				1	2	3			6				6	9
AA-1120085	0	Lloyd's Underwriter Syndicate No. 1274 AUL	GBR		143							71		71		76		(5)	
AA-1127301	0	Lloyd's Underwriter Syndicate No. 1301	GBR		630	84	14	36	6	46	9	273		468		312		156	
AA-1127414	0	Lloyd's Underwriter Syndicate No. 1414 ASC	GBR		252							126		126		127		(1)	
AA-1120102	0	Lloyd's Underwriter Syndicate No. 1458 RNR	GBR						1	4	4			9				9	13

SCHEDULE F – PART 3

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

22.1

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 – [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Amount in Dispute Included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
AA-1120171	0	Lloyd's Underwriter Syndicate No. 1856 IQUW	GBR		1,584	112	18	48	7	61	12	1,356		1,614		1,063		551	
AA-1120083	0	Lloyd's Underwriter Syndicate No. 1910 ARE	GBR		10,857	1,680	273	730	120	918	175	5,819		9,715		6,193		3,522	14
AA-1120084	0	Lloyd's Underwriter Syndicate No. 1955 BAR	GBR		845	112	18	48	8	62	13	366		627		419		208	3
AA-1128001	0	Lloyd's Underwriter Syndicate No. 2001 AML	GBR		2,376	252	41	110	20	147	39	1,059		1,668		1,190		478	35
AA-1120071	0	Lloyd's Underwriter Syndicate No. 2007 NVA	GBR		389	45	7	19	3	24	5	172		275		194		81	
AA-1128010	0	Lloyd's Underwriter Syndicate No. 2010 MMX	GBR						1	2	2			5				5	5
AA-1128623	0	Lloyd's Underwriter Syndicate No. 2468 NEO	GBR							1	1			2				2	3
AA-1128623	0	Lloyd's Underwriter Syndicate No. 2623 AFB	GBR		(1)				1	2	3			6				6	8
AA-1128791	0	Lloyd's Underwriter Syndicate No. 2791 MAP	GBR		1,510	168	27	72	11	91	17	670		1,056		750		306	
AA-1120075	0	Lloyd's Underwriter Syndicate No. 4020 ARK	GBR		1,599	112	18	48	8	63	14	1,558		1,821		1,012		809	6
AA-1126004	0	Lloyd's Syndicate No. 4444 CMA	GBR		917	112	18	48	7	61	12	402		660		457		203	
1299999	Total Authorized - Other Non-U.S. Insurers#				26,834	2,985	484	1,298	232	1,711	413	14,586		21,709		15,013		6,696	303
1499999	Total Authorized - Total Authorized Excluding Protected Cells				49,528	5,532	897	2,397	408	3,122	708	25,267		38,331		26,919		11,412	392
AA-3194158	0	Allianz Risk Transfer (Bermuda) Ltd. (Nephila bus	BMU		993	112	18	49	10	70	23	439		721		512		209	32
AA-3190978	0	AlphaCat Reinsurance Ltd. (2017)	BMU		4									9				9	13
AA-3190005	0	American International Reinsurance Company Ltd	BMU		(1)				1	4	4			37				37	48
AA-3190770	0	Chubb Tempest Reinsurance Ltd. (2017)	BMU		(1)		2		4	14	17								
AA-3191289	0	Fidelis Insurance Bermuda Limited (2017)	BMU		(1)			1	1	5	6			13				13	16
AA-3191190	0	Hamilton Re, Ltd. (2017)	BMU						1	2	2			5				5	6
AA-3190875	0	Hiscox Insurance Company Ltd (Bermuda) (2017)	BMU				2		4	13	16			35				35	44
AA-5324100	0	Taiping Reinsurance Company Ltd	HKG						1	5	6			12				12	18
AA-5420050	0	Korean Reinsurance Company	KOR		285							143		143		152		(9)	
AA-1460019	0	MS Amlin AG, Bermuda Branch, Hamilton (2017)	CHE		(1)				1	4	4			9				9	13
AA-1320158	0	SCOR Global P&C S.E. - Lima S7300	FRA		(2)			1	3	11	13			28				28	36
AA-1460023	0	Renaissance Re	CHE							1	2			3				3	5
AA-3191315	0	XL Bermuda Ltd (2017)	BMU		(1)				1	4	4			9				9	13

SCHEDULE F – PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 – [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commissions	15 Cols. 7 through 14 Totals	16 Amount in Dispute Included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
2699999	Total Unauthorized - Other non-U.S. Insurers#				1,275	112	18	55	27	133	97	582		1,024	664		360	244	
2799999	Total Unauthorized - Protected Cells																		
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells				1,275	112	18	55	27	133	97	582		1,024	664		360	244	
RJ-3191352	0	Ascot Bermuda Ltd.	BMU		1,003	140	23	60	9	76	15	431		754	493		261		
RJ-3194126	0	Arch Reinsurance, Ltd.	BMU		3,279	448	73	193	29	244	46	1,817		2,850	1,805		1,045		
RJ-3194168	0	Aspen Bermuda Ltd.	BMU		2,594	336	55	145	22	183	35	1,127		1,903	1,333		570		
RJ-3190770	0	Chubb Tempest Reinsurance Ltd.	BMU		4,135	560	91	241	37	305	58	1,784		3,076	2,122		954		
RJ-3194122	0	DaVinci Reins thru Renaissance U/W	BMU		4,891	784	128	338	52	427	81	2,049		3,859	2,494		1,365		
RJ-3191289	0	Fidelis Insurance Bermuda Limited	BMU		9,544	898	146	386	59	488	93	4,318		6,388	4,954		1,434		
RJ-3191190	0	Hamilton Re, Ltd.	BMU		1,730	224	36	96	15	122	23	751		1,267	889		378		
RJ-1340125	0	Hannover Re (Chard Re)	DEU		(392)							611		611	37		574		
RJ-1340125	0	Hannover Ruck SE (Pillar)	DEU		1,646	28	5	12	2	15	3	809		874	872		2		
RJ-3190875	0	Hiscox Insurance Company Ltd (Bermuda)	BMU		3,388	420	68	181	28	229	44	1,481		2,451	1,746		705		
RJ-3190686	0	Partner Reinsurance Company Ltd.	BMU		2,787	336	55	145	22	183	35	1,223		1,999	1,436		563		
RJ-3190339	0	Renaissance Reinsurance Ltd.	BMU		4,891	784	128	338	52	427	81	2,049		3,859	2,494		1,365		
RJ-3190870	0	Vermeer Reinsurance Ltd.	BMU		2,209							1,104		1,104	1,174		(70)		
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers#				41,705	4,958	808	2,135	327	2,699	514	19,554		30,995	21,849		9,146		
5599999	Total Reciprocal Jurisdiction - Protected Cells																		
5699999	Total Reciprocal Jurisdiction - Total Certified Excluding Protected Cells				41,705	4,958	808	2,135	327	2,699	514	19,554		30,995	21,849		9,146		
5799999	Total Authorized, Unauthorized and Certified Excluding Protected Cells				92,508	10,602	1,723	4,587	762	5,954	1,319	45,403		70,350	49,432		20,918	636	
9999999	Totals				92,508	10,602	1,723	4,587	762	5,954	1,319	45,403		70,350	49,432		20,918	636	

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols 17+18+20; But not in Excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29 - 30)	32 Total Collateral (Cols. 21 + 22 + 24. not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Col. 31 - 32)	34 Reinsurer Designation Equivalent	35 Credit Risk o Collateralized Recoverable (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
47-0574325	Berkley Insurance Company			0		146	100		246	295	146	149		149	2		3
31-0542366	The Cincinnati Insurance Company			0		1,119	579		1,698	2,038	1,119	919		919	2		19
22-2005057	Everest Reinsurance Company (Blue Water)			0		4,922	2,410		7,332	8,798	4,922	3,876		3,876	2		81
13-4924125	Munich Reinsurance America, Inc.			0		1,059	143		1,202	1,442	1,059	383		383	2		8
13-3138390	Navigators Insurance Company			0		553	290		843	1,012	553	459		459	2		10
47-0698507	Odyssey Reinsurance Company			0		829	166		995	1,194	829	365		365	3		10
75-1444207	Scor Reinsurance Company			0		1,555	665		2,220	2,664	1,555	1,109		1,109	3		31
13-1675535	Swiss Reinsurance America Corporation			0		1,272	248		1,520	1,824	1,272	552		552	2		12
13-5616275	Transatlantic Reinsurance Company			0		540	26		566	679	540	139		139	1		2
0999999	Total Authorized - Other U.S. Unaffiliated Insurers			XXX		11,995	4,627		16,622	19,946	11,995	7,951		7,951	XXX		177
AA-3194168	Aspen Bermuda Ltd.			0		13			13	16	16				3		
AA-3194122	DaVinci Reins thru Renaissance U/W (2017)			0		16			16	19	19				3		
AA-3194130	Endurance Speciality Ins Ltd. (2017)			0		24			24	29	29				2		
AA-1340125	Hannover Rück SE (Pillar business) (2017)			0		-			-	-	-				2		
AA-3190829	Markel Bermuda Limited (2017)			0		2,010			2,010	2,412	2,393	19		19	3		1
AA-3190686	Partner Reinsurance Company Ltd. (2017)			0		24			24	29	29				2		
AA-3190339	Renaissance Reinsurance Ltd. (2017)			0		24			24	29	29				2		
AA-3190870	Validus Reinsurance, Ltd. (2017)			0		26			26	31	31				2		
AA-1126033	Lloyd's Underwriter Syndicate No. 0033 HIS			0		862	578		1,440	1,728	862	866		866	3		24
AA-1126623	Lloyd's Underwriter Syndicate No. 0623 AFB			0		1			1	1	1				3		
AA-1127183	Lloyd's Underwriter Syndicate No. 1084 CSL			0		2			2	2	2				3		
AA-1127183	Lloyd's Underwriter Syndicate No. 1183 TAL			0		6			6	7	7				3		
AA-1120085	Lloyd's Underwriter Syndicate No. 1274 AUL			0		71			71	85	76	9		9	3		0
AA-1127301	Lloyd's Underwriter Syndicate No. 1301			0		312	156		468	562	312	250		250	3		7
AA-1127414	Lloyd's Underwriter Syndicate No. 1414 ASC			0		126			126	151	127	24		24	3		1
AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR			0		9			9	11	11				3		

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols 17+18+20; But not in Excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29 - 30)	32 Total Collateral (Cols. 21 + 22 + 24. not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Col. 31 - 32)	34 Reinsurer Designation Equivalent	35 Credit Risk o Collateralized Recoverable (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1120171	Lloyd's Underwriter Syndicate No.1856 IQUW			0		1,063	551		1,614	1,937	1,063	874		874	3		24
AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE			0		6,207	3,508		9,715	11,658	6,207	5,451		5,451	3		153
AA-1120084	Lloyd's Underwriter Syndicate No. 1955 BAR			0		422	205		627	752	422	330		330	3		9
AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML			0		1,225	443		1,668	2,002	1,225	777		777	3		22
AA-1120071	Lloyd's Underwriter Syndicate No. 2007 NVA			0		194	81		275	330	194	136		136	3		4
AA-1128010	Lloyd's Underwriter Syndicate No. 2010 MMX			0		5			5	6	5	1		1	3		0
AA-1128623	Lloyd's Underwriter Syndicate No. 2468 NEO			0		2			2	2	2				3		
AA-1128623	Lloyd's Underwriter Syndicate No. 2623 AFB			0		6			6	7	7				3		
AA-1128791	Lloyd's Underwriter Syndicate No. 2791 MAP			0		750	306		1,056	1,267	750	517		517	3		14
AA-1120075	Lloyd's Underwriter Syndicate No. 4020 ARK			0		1,018	803		1,821	2,185	1,018	1,167		1,167	3		33
AA-1126004	Lloyd's Syndicate No. 4444 CMA			0		457	203		660	792	457	335		335	3		9
1299999	Total Authorized - Other Non-U.S. Insurers#			XXX		14,875	6,834		21,709	26,050	15,294	10,756		10,756	XXX		301
1499999	Total Authorized - Total Authorized Excluding Protected Cells			XXX		26,870	11,461		38,331	45,996	27,289	18,707		18,707	XXX		478
AA-3194158	Allianz Risk Transfer (Bermuda) Ltd. (Nephila business)		129	1		673	48	48	673	808	544	264	129	135	2	3	3
AA-3190978	AlphaCat Reinsurance Ltd. (2017)			0		-			-						6		
AA-3190005	American International Reinsurance Company Ltd.(2017)			0		9			9	11	11				3		
AA-3190770	Chubb Tempest Reinsurance Ltd. (2017)			0		37			37	44	44				1		
AA-3191289	Fidelis Insurance Bermuda Limited (2017)			0		13			13	16	16				3		
AA-3191190	Hamilton Re, Ltd. (2017)			0		5			5	6	6				3		
AA-3190875	Hiscox Insurance Company Ltd (Bermuda) (2017)			0		35			35	42	42				3		
AA-5324100	Taiping Reinsurance Company Ltd			0		12			12	14	14				3		
AA-5420050	Korean Reinsurance Company			0		143			143	172	152	20		20	3		1
AA-1460019	MS Amlin AG, Bermuda Branch, Hamilton (2017)			0		9			9	11	11				2		
AA-1320158	SCOR Global P&C S.E. - Lima S7300			0		28			28	34	34				3		
AA-1460023	Renaissance Re			0		3			3	4	4				2		
AA-3191315	XL Bermuda Ltd (2017)			0		9			9	11	11				2		

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; But not in Excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29 - 30)	32 Total Collateral (Cols. 21 + 22 + 24. not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Col. 31 - 32)	34 Reinsurer Designation Equivalent	35 Credit Risk o Collateralized Recoverable (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
2699999	Total Unauthorized - Other non-U.S. Insurers#		129	XXX		976	48	48	976	1,173	889	284	129	155	XXX	3	3
2799999	Total Unauthorized - Protected Cells			XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells		129	XXX		976	48	48	976	1,173	889	284	129	155	XXX	3	3
RJ-3191352	Ascot Bermuda Ltd.			0		493	261		754	905	493	412		412	3		12
RJ-3194126	Arch Reinsurance, Ltd.			0		1,805	1,045		2,850	3,420	1,805	1,615		1,615	2		34
RJ-3194168	Aspen Bermuda Ltd.			0		1,333	570		1,903	2,284	1,333	951		951	3		27
RJ-3190770	Chubb Tempest Reinsurance Ltd.			0		2,122	954		3,076	3,691	2,122	1,569		1,569	1		25
RJ-3194122	DaVinci Reins thru Renaissance U/W			0		2,494	1,365		3,859	4,631	2,494	2,137		2,137	3		60
RJ-3191289	Fidelis Insurance Bermuda Limited			0		4,954	1,434		6,388	7,666	4,954	2,712		2,712	3		76
RJ-3191190	Hamilton Re, Ltd.			0		889	378		1,267	1,520	889	631		631	4		21
RJ-1340125	Hannover Re (Chard Re)			0		37	574		611	733	37	696		696	2		15
RJ-1340125	Hannover Ruck SE (Pillar)			0		872	2		874	1,049	872	177		177	2		4
RJ-3190875	Hiscox Insurance Company Ltd (Bermuda)			0		1,746	705		2,451	2,941	1,746	1,195		1,195	3		33
RJ-3190686	Partner Reinsurance Company Ltd.			0		1,436	563		1,999	2,399	1,436	963		963	2		20
RJ-3190339	Renaissance Reinsurance Ltd.			0		2,494	1,365		3,859	4,631	2,494	2,137		2,137	2		45
RJ-3190870	Vermeer Reinsurance Ltd.			0		1,104			1,104	1,325	1,174	151		151	3		4
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers#			XXX		21,779	9,216		30,995	37,195	21,849	15,346		15,346	XXX		375
5599999	Total Reciprocal Jurisdiction - Protected Cells			XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999	Total Reciprocal Jurisdiction - Total Certified Excluding Protected Cells			XXX		21,779	9,216		30,995	37,195	21,849	15,346		15,346	XXX		375
5799999	Total Authorized, Unauthorized and Certified Excluding Protected Cells		129	XXX		49,625	20,725	48	70,302	84,364	50,027	34,337	129	34,208	XXX	3	856
9999999	Totals		129	XXX		49,625	20,725	48	70,302	84,364	50,027	34,337	129	34,208	XXX	3	856

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue C 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/Cols. 46 + 48)	51 Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 4 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	Overdue				43 Total Due Cols. 37 + 42 (In total should Equal Cols. 7 + 8)										
			38 1- 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
47-0574325	Berkley Insurance Company	65					65		65								YES
31-0542366	The Cincinnati Insurance Company	391					391		391								YES
22-2005057	Everest Reinsurance Company (Blue Water)	1,367					1,367		1,367								YES
13-4924125	Munich Reinsurance America, Inc.	124					124		124								YES
13-3138390	Navigators Insurance Company	195					195		195								YES
47-0698507	Odyssey Reinsurance Company	130					130		130								YES
75-1444207	Scor Reinsurance Company	456					456		456								YES
13-1675535	Swiss Reinsurance America Corporation	195					195		195								YES
13-5616275	Transatlantic Reinsurance Company	37					37		37								YES
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	2,960					2,960		2,960								XXX
AA-3194168	Aspen Bermuda Ltd.																YES
AA-3194122	DaVinci Reins thru Renaissance U/W (2017)																YES
AA-3194130	Endurance Speciality Ins Ltd. (2017)																YES
AA-1340125	Hannover Rück SE (Pillar business) (2017)																YES
AA-3190829	Markel Bermuda Limited (2017)																YES
AA-3190686	Partner Reinsurance Company Ltd. (2017)																YES
AA-3190339	Renaissance Reinsurance Ltd. (2017)																YES
AA-3190870	Validus Reinsurance, Ltd. (2017)																YES
AA-1126033	Lloyd's Underwriter Syndicate No. 0033 HIS	358					358		358								YES
AA-1126623	Lloyd's Underwriter Syndicate No. 0623 AFB																YES
AA-1127183	Lloyd's Underwriter Syndicate No. 1084 CSL																YES
AA-1127183	Lloyd's Underwriter Syndicate No. 1183 TAL																YES
AA-1120085	Lloyd's Underwriter Syndicate No. 1274 AUL																YES
AA-1127301	Lloyd's Underwriter Syndicate No. 1301	98					98		98								YES
AA-1127414	Lloyd's Underwriter Syndicate No. 1414 ASC																YES
AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR																YES

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue C 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/Cols. 46 + 48)	51 Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 4 for Reinsurers with Values Less Than 20% in Col. 50	
		37 Current	Overdue				43 Total Due Cols. 37 + 42 (In total should Equal Cols. 7 + 8)											
			38 1- 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												42 Total Overdue Cols. 38 + 40 + 41
AA-1120171	Lloyd's Underwriter Syndicate No. 1856 IQUW	130					130		130								YES	
AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE	1,953					1,953		1,953									YES
AA-1120084	Lloyd's Underwriter Syndicate No. 1955 BAR	130					130		130									YES
AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML	293					293		293									YES
AA-1120071	Lloyd's Underwriter Syndicate No. 2007 NVA	52					52		52									YES
AA-1128010	Lloyd's Underwriter Syndicate No. 2010 MMX																	YES
AA-1128623	Lloyd's Underwriter Syndicate No. 2468 NEO																	YES
AA-1128623	Lloyd's Underwriter Syndicate No. 2623 AFB																	YES
AA-1128791	Lloyd's Underwriter Syndicate No. 2791 MAP	195					195		195									YES
AA-1120075	Lloyd's Underwriter Syndicate No. 4020 ARK	130					130		130									YES
AA-1126004	Lloyd's Syndicate No. 4444 CMA	130					130		130									YES
1299999	Total Authorized - Other Non-U.S. Insurers#	3,469					3,469		3,469									XXX
1499999	Total Authorized - Total Authorized Excluding Protected Cells	6,429					6,429		6,429									XXX
AA-3194158	Allianz Risk Transfer (Bermuda) Ltd. (Nephila business)	130					130		130									YES
AA-3190978	AlphaCat Reinsurance Ltd. (2017)																	YES
AA-3190005	American International Reinsurance Company Ltd.(2017)																	YES
AA-3190770	Chubb Tempest Reinsurance Ltd. (2017)																	YES
AA-3191289	Fidelis Insurance Bermuda Limited (2017)																	YES
AA-3191190	Hamilton Re, Ltd. (2017)																	YES
AA-3190875	Hiscox Insurance Company Ltd (Bermuda) (2017)																	YES
AA-5324100	Taiping Reinsurance Company Ltd																	YES
AA-5420050	Korean Reinsurance Company																	YES
AA-1460019	MS Amlin AG, Bermuda Branch, Hamilton (2017)																	YES
AA-1320158	SCOR Global P&C S.E. - Lirma S7300																	YES
AA-1460023	Renaissance Re																	YES
AA-3191315	XL Bermuda Ltd (2017)																	YES

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue C 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/Cols. 46 + 48)	51 Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 4 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	Overdue				43 Total Due Cols. 37 + 42 (In total should Equal Cols. 7 + 8)										
			38 1- 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
2699999	Total Unauthorized - Other non-U.S. Insurers#	130					130		130							XXX	
2799999	Total Unauthorized - Protected Cells															XXX	
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells	130					130		130							XXX	
RJ-3191352	Ascot Bermuda Ltd.	163					163		163							YES	
RJ-3194126	Arch Reinsurance, Ltd.	521					521		521							YES	
RJ-3194168	Aspen Bermuda Ltd.	391					391		391							YES	
RJ-3190770	Chubb Tempest Reinsurance Ltd.	651					651		651							YES	
RJ-3194122	DaVinci Reins thru Renaissance U/W	912					912		912							YES	
RJ-3191289	Fidelis Insurance Bermuda Limited	1,044					1,044		1,044							YES	
RJ-3191190	Hamilton Re, Ltd.	260					260		260							YES	
RJ-1340125	Hannover Re (Chard Re)															YES	
RJ-1340125	Hannover Ruck SE (Pillar)	33					33		33							YES	
RJ-3190875	Hiscox Insurance Company Ltd (Bermuda)	488					488		488							YES	
RJ-3190686	Partner Reinsurance Company Ltd.	391					391		391							YES	
RJ-3190339	Renaissance Reinsurance Ltd.	912					912		912							YES	
RJ-3190870	Vermeer Reinsurance Ltd.															YES	
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers#	5,766					5,766		5,766							XXX	
5599999	Total Reciprocal Jurisdiction - Protected Cells															XXX	
5699999	Total Reciprocal Jurisdiction - Total Certified Excluding Protected Ce	5,766					5,766		5,766							XXX	
5799999	Total Authorized, Unauthorized and Certified Excluding Protected C	12,325					12,325		12,325							XXX	
9999999	Totals	12,325					12,325		12,325							XXX	

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	54 Certified Reinsurer Rating (1 through 6)	55 Effective D of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophic Recoverables Qualifying for Collateral Deferral	58 Net Recoverable Subject to Collateral Requirement for Full Credit (Col. 19 - Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20 + Col. 21 + Col.22 + Col. 24)/ Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collate Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amounts of Credit Allowed for Net Recoverables (Col. 57 +[Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Du to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losse % LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20)	Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ced to Certified Reinsurers (Grea of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63	
														66 Total Collater Provided (Col. 20 + Col. 21 + Col. 22 Col.24; not to Exceed Col 6	67 Net Unsecured Recoverable fo Which Credit is Allowed (Col. 63 -Col. 6	68 20% of Amount in Col. 67		
47-0574325	Berkley Insurance Company	XXX	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	XXX
22-2005057	Everest Reinsurance Company (Blue Water)	XXX	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	XXX
13-3138390	Navigators Insurance Company	XXX	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	XXX
75-1444207	Scor Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-1675535	Swiss Reinsurance America Corporation	XXX	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	XXX
0999999	Total Authorized - Other U.S. Unaffiliated Insurers				XXX	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	XXX	XXX
AA-3194122	DaVinci Reins thru Renaissance U/W (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194130	Endurance Speciality Ins Ltd. (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340125	Hannover Rück SE (Pillar business) (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190829	Markel Bermuda Limited (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190686	Partner Reinsurance Company Ltd. (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190339	Renaissance Reinsurance Ltd. (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190870	Validus Reinsurance, Ltd. (2017)	XXX	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	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	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	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	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	XXX	XXX
AA-1127301	Lloyd's Underwriter Syndicate No. 1301	XXX	XXX	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	XXX
AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	54 Certified Reinsurer Rating (1 through 6)	55 Effective D of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophic Recoverables Qualifying for Collateral Deferral	58 Net Recoverable Subject to Collateral Requirement for Full Credit (Col. 19 - Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20 + Col. 21 + Col.22 + Col. 24)/ Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collate Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amounts of Credit Allowed for Net Recoverables (Col. 57 +[Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Du to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losse % LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20)	Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ced to Certified Reinsurers (Grea of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63
														66 Total Collater Provided (Col. 20 + Col. 21 + Col. 22 Col.24; not to Exceed Col 6	67 Net Unsecured Recoverable fo Which Credit is Allowed (Col. 63 -Col. 6	68 20% of Amount in Col. 67	
AA-1120171	Lloyd's Underwriter Syndicate No.1856 IQUW	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120084	Lloyd's Underwriter Syndicate No. 1955 BAR	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-1120071	Lloyd's Underwriter Syndicate No. 2007 NVA	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
AA-1128623	Lloyd's Underwriter Syndicate No. 2623 AFB	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128791	Lloyd's Underwriter Syndicate No. 2791 MAP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120075	Lloyd's Underwriter Syndicate No. 4020 ARK	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126004	Lloyd's Syndicate No. 4444 CMA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1299999	Total Authorized - Other Non-U.S. Insurers#				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1499999	Total Authorized - Total Authorized Excluding Protected Cells				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194158	Allianz Risk Transfer (Bermuda) Ltd. (Nephila business)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190978	AlphaCat Reinsurance Ltd. (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190005	American International Reinsurance Company Ltd.(2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190770	Chubb Tempest Reinsurance Ltd. (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191289	Fidelis Insurance Bermuda Limited (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191190	Hamilton Re, Ltd. (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190875	Hiscox Insurance Company Ltd (Bermuda) (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5324100	Taiping Reinsurance Company Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5420050	Korean Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460019	MS Amlin AG, Bermuda Branch, Hamilton (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1320158	SCOR Global P&C S.E. - Lirma S7300	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460023	Renaissance Re	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191315	XL Bermuda Ltd (2017)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	54 Certified Reinsurer Rating (1 through 6)	55 Effective D of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophic Recoverables Qualifying for Collateral Deferral	58 Net Recoverable Subject to Collateral Requirement for Full Credit (Col. 19 - Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20 + Col. 21 + Col.22 + Col. 24)/ Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amounts of Credit Allowed for Net Recoverables (Col. 57 +[Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20)	Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Gross of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
														66 Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 Col.24; not to Exceed Col. 6	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 -Col. 6	68 20% of Amount in Col. 67	
2699999	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
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191352	Ascot Bermuda Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3194126	Arch Reinsurance, Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3194168	Aspen Bermuda Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190770	Chubb Tempest Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3194122	DaVinci Reins thru Renaissance U/W	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191289	Fidelis Insurance Bermuda Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191190	Hamilton Re, Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1340125	Hannover Re (Chard Re)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1340125	Hannover Ruck SE (Pillar)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190875	Hiscox Insurance Company Ltd (Bermuda)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190686	Partner Reinsurance Company Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190339	Renaissance Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190870	Vermeer Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers#				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5599999	Total Reciprocal Jurisdiction - Protected Cells				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999	Total Reciprocal Jurisdiction - Total Certified Excluding Protected Cell				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999	Total Authorized, Unauthorized and Certified Excluding Protected Cells							XXX	XXX								
9999999	Totals							XXX	XXX								

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 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%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 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%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
47-0574325	Berkley Insurance Company		XXX	XXX				XXX	XXX	
31-0542366	The Cincinnati Insurance Company		XXX	XXX				XXX	XXX	
22-2005057	Everest Reinsurance Company (Blue Water)		XXX	XXX				XXX	XXX	
13-4924125	Munich Reinsurance America, Inc.		XXX	XXX				XXX	XXX	
13-3138390	Navigators Insurance Company		XXX	XXX				XXX	XXX	
47-0698507	Odyssey Reinsurance Company		XXX	XXX				XXX	XXX	
75-1444207	Scor Reinsurance Company		XXX	XXX				XXX	XXX	
13-1675535	Swiss Reinsurance America Corporation		XXX	XXX				XXX	XXX	
13-5616275	Transatlantic Reinsurance Company		XXX	XXX				XXX	XXX	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX				XXX	XXX	
AA-3194168	Aspen Bermuda Ltd.		XXX	XXX				XXX	XXX	
AA-3194122	DaVinci Reins thru Renaissance U/W (2017)		XXX	XXX				XXX	XXX	
AA-3194130	Endurance Speciality Ins Ltd. (2017)		XXX	XXX				XXX	XXX	
AA-1340125	Hannover Rück SE (Pillar business) (2017)		XXX	XXX				XXX	XXX	
AA-3190829	Markel Bermuda Limited (2017)		XXX	XXX				XXX	XXX	
AA-3190686	Partner Reinsurance Company Ltd. (2017)		XXX	XXX				XXX	XXX	
AA-3190339	Renaissance Reinsurance Ltd. (2017)		XXX	XXX				XXX	XXX	
AA-3190870	Validus Reinsurance, Ltd. (2017)		XXX	XXX				XXX	XXX	
AA-1126033	Lloyd's Underwriter Syndicate No. 0033 HIS		XXX	XXX				XXX	XXX	
AA-1126623	Lloyd's Underwriter Syndicate No. 0623 AFB		XXX	XXX				XXX	XXX	
AA-1127183	Lloyd's Underwriter Syndicate No. 1084 CSL		XXX	XXX				XXX	XXX	
AA-1127183	Lloyd's Underwriter Syndicate No. 1183 TAL		XXX	XXX				XXX	XXX	
AA-1120085	Lloyd's Underwriter Syndicate No. 1274 AUL		XXX	XXX				XXX	XXX	
AA-1127301	Lloyd's Underwriter Syndicate No. 1301		XXX	XXX				XXX	XXX	
AA-1127414	Lloyd's Underwriter Syndicate No. 1414 ASC		XXX	XXX				XXX	XXX	
AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR		XXX	XXX				XXX	XXX	

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 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%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 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%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
AA-1120171	Lloyd's Underwriter Syndicate No. 1856 IQUW		XXX	XXX					XXX	XXX	
AA-1120083	Lloyd's Underwriter Syndicate No. 1910 ARE		XXX	XXX					XXX	XXX	
AA-1120084	Lloyd's Underwriter Syndicate No. 1955 BAR		XXX	XXX					XXX	XXX	
AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML		XXX	XXX					XXX	XXX	
AA-1120071	Lloyd's Underwriter Syndicate No. 2007 NVA		XXX	XXX					XXX	XXX	
AA-1128010	Lloyd's Underwriter Syndicate No. 2010 MMX		XXX	XXX					XXX	XXX	
AA-1128623	Lloyd's Underwriter Syndicate No. 2468 NEO		XXX	XXX					XXX	XXX	
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-1120075	Lloyd's Underwriter Syndicate No. 4020 ARK		XXX	XXX					XXX	XXX	
AA-1126004	Lloyd's Syndicate No. 4444 CMA		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 (Bermuda) Ltd. (Nephila business)			48	XXX	XXX	XXX	48	XXX	XXX	48
AA-3190978	AlphaCat Reinsurance Ltd. (2017)				XXX	XXX	XXX		XXX	XXX	
AA-3190005	American International Reinsurance Company Ltd.(2017)				XXX	XXX	XXX		XXX	XXX	
AA-3190770	Chubb Tempest Reinsurance Ltd. (2017)				XXX	XXX	XXX		XXX	XXX	
AA-3191289	Fidelis Insurance Bermuda Limited (2017)				XXX	XXX	XXX		XXX	XXX	
AA-3191190	Hamilton Re. Ltd. (2017)				XXX	XXX	XXX		XXX	XXX	
AA-3190875	Hiscox Insurance Company Ltd (Bermuda) (2017)				XXX	XXX	XXX		XXX	XXX	
AA-5324100	Taiping Reinsurance Company Ltd				XXX	XXX	XXX		XXX	XXX	
AA-5420050	Korean Reinsurance Company				XXX	XXX	XXX		XXX	XXX	
AA-1460019	MS Amlin AG, Bermuda Branch, Hamilton (2017)				XXX	XXX	XXX		XXX	XXX	
AA-1320158	SCOR Global P&C S.E. - Lima S7300				XXX	XXX	XXX		XXX	XXX	
AA-1460023	Renaissance Re				XXX	XXX	XXX		XXX	XXX	
AA-3191315	XL Bermuda Ltd (2017)				XXX	XXX	XXX		XXX	XXX	

SCHEDULE F – PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 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%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 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%)	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 +77)
2699999	Total Unauthorized - Other non-U.S. Insurers#		48		XXX	XXX	XXX	48	XXX	48
2799999	Total Unauthorized - Protected Cells				XXX	XXX	XXX		XXX	
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells		48		XXX	XXX	XXX	48	XXX	48
RJ-3191352	Ascot Bermuda Ltd.		XXX	XXX				XXX	XXX	
RJ-3194126	Arch Reinsurance, Ltd.		XXX	XXX				XXX	XXX	
RJ-3194168	Aspen Bermuda Ltd.		XXX	XXX				XXX	XXX	
RJ-3190770	Chubb Tempest Reinsurance Ltd.		XXX	XXX				XXX	XXX	
RJ-3194122	DaVinci Reins thru Renaissance U/W		XXX	XXX				XXX	XXX	
RJ-3191289	Fidelis Insurance Bermuda Limited		XXX	XXX				XXX	XXX	
RJ-3191190	Hamilton Re, Ltd.		XXX	XXX				XXX	XXX	
RJ-1340125	Hannover Re (Chard Re)		XXX	XXX				XXX	XXX	
RJ-1340125	Hannover Ruck SE (Pillar)		XXX	XXX				XXX	XXX	
RJ-3190875	Hiscox Insurance Company Ltd (Bermuda)		XXX	XXX				XXX	XXX	
RJ-3190686	Partner Reinsurance Company Ltd.		XXX	XXX				XXX	XXX	
RJ-3190339	Renaissance Reinsurance Ltd.		XXX	XXX				XXX	XXX	
RJ-3190870	Vermeer Reinsurance Ltd.		XXX	XXX				XXX	XXX	
5499999	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers#		XXX	XXX				XXX	XXX	
5599999	Total Reciprocal Jurisdiction - Protected Cells		XXX	XXX				XXX	XXX	
5699999	Total Reciprocal Jurisdiction - Total Certified Excluding Protected Cells		XXX	XXX				XXX	XXX	
5799999	Total Authorized, Unauthorized and Certified Excluding Protected Cells		48					48		48
9999999	Totals		48					48		48

SCHEDULE F – PART 4

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

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
1	1	26007993	UBS AG	129
9999999 Total				129
<div style="position: absolute; left: -20px; top: 50%; transform: translateY(-50%); font-size: 24px; font-weight: bold;">27</div>				
9999999 Total				129

SCHEDULE F – PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.
2.
3.
4.
5.

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

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premium	Affiliated
6.	Lloyd's Underwriter Syndicate No. 1910 ARE	9,715	10,857	Yes [] No [X]
7.	Fidelis Insurance Bermuda Limited	6,401	9,543	Yes [] No [X]
8.	Everest Reinsurance Company	7,332	9,118	Yes [] No [X]
9.	DaVinci Reins	3,875	4,890	Yes [] No [X]
10.	Renaissance Reinsurance Ltd.	3,883	4,889	Yes [] No [X]

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

SCHEDULE F – PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	62,175,529		62,175,529
2. Premiums and considerations (Line 15)	25,419,173		25,419,173
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	12,324,610	(12,324,610)	
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	14,380,585		14,380,585
6. Net amount recoverable from reinsurers		20,280,285	20,280,285
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	114,299,897	7,955,675	122,255,572
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	26,363,195	12,620,648	38,983,843
10. Taxes, expenses, and other obligations (Lines 4 through 8)	7,522,416		7,522,416
11. Unearned premiums (Line 9)	82,804,573	45,402,603	128,207,176
12. Advance premiums (Line 10)	3,199,908		3,199,908
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	49,431,426	(49,431,426)	
15. Funds held by company under reinsurance treaties (Line 13)	636,150	(636,150)	
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)	48,000		48,000
18. Other liabilities	4,460,067		4,460,067
19. Total liabilities excluding protected cell business (Line 26)	174,465,735	7,955,675	182,421,410
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	(60,165,838)	X X X	(60,165,838)
22. Totals (Line 38)	114,299,897	7,955,675	122,255,572

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

If yes, give full explanation:

.....

.....

.....

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)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1–2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	X X X	X X X	X X X								X X X	
2. 2015	133,859	42,907	90,952	52,760		77		16,847		513	69,684	X X X
3. 2016	127,762	43,361	84,401	59,939		127		17,325		360	77,391	X X X
4. 2017	116,941	40,103	76,838	68,191	18,610	1,050	369	53,850	21,349	237	82,763	X X X
5. 2018	104,488	35,249	69,239	21,775		40		7,556		182	29,371	X X X
6. 2019	90,423	30,798	59,625	33,595		844		9,612		290	44,051	X X X
7. 2020	82,159	29,067	53,092	25,482		1,138		8,048		334	34,668	X X X
8. 2021	77,565	28,151	49,414	26,014		595		8,121		89	34,730	X X X
9. 2022	75,433	29,812	45,621	19,654		381		5,644		57	25,679	X X X
10. 2023	92,201	38,885	53,316	36,920		375		8,257		76	45,552	X X X
11. 2024	169,127	69,865	99,262	128,276	43,867	144	55	24,179	7,971	131	100,706	X X X
12. Totals	X X X	X X X	X X X	472,606	62,477	4,771	424	159,439	29,320	2,269	544,595	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior													
2. 2015													
3. 2016													
4. 2017	23	23	184	184	60	60	56	56	166	166			4
5. 2018									1			1	
6. 2019			6		52		1					59	9
7. 2020	130		19		71		4		3			227	36
8. 2021	175		34		91		4		15			319	37
9. 2022	87		367		89		19		55			617	52
10. 2023	834		1,124		237		64		228			2,487	186
11. 2024	10,272	4,564	20,496	5,771	954	522	678	276	2,384	1,001		22,650	2,622
12. Totals	11,521	4,587	22,230	5,955	1,554	582	826	332	2,852	1,167		26,360	X X X

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	X X X	X X X	X X X	X X X	X X X	X X X			X X X		
2. 2015	69,684		69,684	52,058		76,616					
3. 2016	77,391		77,391	60,574		91,694					
4. 2017	123,580	40,817	82,763	105,677	101,780	107,711					
5. 2018	29,372		29,372	28,110		42,421					1
6. 2019	44,110		44,110	48,782		73,979					6
7. 2020	34,895		34,895	42,473		65,726					78
8. 2021	35,049		35,049	45,187		70,929					110
9. 2022	26,296		26,296	34,860		57,640					163
10. 2023	48,039		48,039	52,102		90,102					529
11. 2024	187,383	64,027	123,356	110,794	91,644	124,273					2,217
12. Totals	X X X	X X X	X X X	X X X	X X X	X X X			X X X		23,209

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT		
	1	2	3	4	5	6	7	8	9	10	11	12	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year	
1. Prior	7,982	5,841	5,465	4,500	4,301	4,348	4,269	4,246	4,266	4,246	(20)		
2. 2015	54,296	55,345	53,958	53,166	52,693	52,815	52,874	52,870	52,840	52,837	(3)	(33)	
3. 2016	XXX	62,811	61,402	60,423	60,001	59,891	59,848	60,062	60,072	60,066	(6)	4	
4. 2017	XXX	XXX	56,342	51,717	50,602	49,721	49,460	49,657	49,497	50,262	765	605	
5. 2018	XXX	XXX	XXX	25,486	22,252	22,068	22,080	21,928	21,836	21,815	(21)	(113)	
6. 2019	XXX	XXX	XXX	XXX	35,542	34,449	33,914	34,361	34,551	34,498	(53)	137	
7. 2020	XXX	XXX	XXX	XXX	XXX	28,629	26,179	26,841	26,918	26,844	(74)	3	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	28,099	27,447	27,281	26,913	(368)	(534)	
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,363	20,918	20,597	(321)	(1,766)	
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	42,196	39,554	(2,642)	XXX	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	105,765	XXX	XXX	
											12. Totals	(2,743)	(1,697)

SCHEDULE P – PART 3 – SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000	2,945	3,864	4,185	4,216	4,245	4,246	4,246	4,246	4,246	XXX	XXX
2. 2015	41,868	51,330	52,195	52,540	52,579	52,680	52,680	52,691	52,836	52,837	XXX	XXX
3. 2016	XXX	51,685	58,075	59,281	59,607	59,783	59,814	60,035	60,066	60,066	XXX	XXX
4. 2017	XXX	XXX	45,519	49,288	49,710	49,374	49,381	49,403	49,437	50,262	XXX	XXX
5. 2018	XXX	XXX	XXX	17,233	20,262	21,358	21,618	21,813	21,815	21,815	XXX	XXX
6. 2019	XXX	XXX	XXX	XXX	27,285	32,611	33,388	33,915	34,285	34,439	XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX	20,149	24,534	25,544	26,362	26,620	XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	21,387	25,319	26,186	26,609	XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,077	19,089	20,035	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,368	37,295	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	84,498	XXX	XXX

SCHEDULE P – PART 4 – SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior	2,878	1,713	1,214	153	23	103	23			20	
2. 2015	7,741	2,593	1,352	518	113	35	19			2	
3. 2016	XXX	6,967	2,067	760	216	69	22	4		3	
4. 2017	XXX	XXX	7,309	1,698	480	239	69	183		24	
5. 2018	XXX	XXX	XXX	6,607	970	303	98	108		21	
6. 2019	XXX	XXX	XXX	XXX	6,393	1,145	208	93		50	7
7. 2020	XXX	XXX	XXX	XXX	XXX	5,616	922	182		125	23
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	5,076	1,304		531	38
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,362		977	386
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		7,245	1,188
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	15,127

SCHEDULE P – PART 1A – HOMEOWNERS/FARMOWNERS

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	X X X	X X X	X X X								X X X	
2. 2015	93,338	30,035	63,303	33,916		77		8,605		403	42,598	6,010
3. 2016	87,877	30,484	57,393	35,781		92		10,332		90	46,205	6,394
4. 2017	78,293	27,854	50,439	41,433	10,535	503	131	34,195	13,246	124	52,219	13,780
5. 2018	67,830	23,453	44,377	14,635		16		5,433		114	20,084	3,156
6. 2019	57,130	19,571	37,559	20,651		451		5,993		267	27,095	3,775
7. 2020	50,868	18,799	32,069	14,246		887		4,378		333	19,511	2,522
8. 2021	47,891	17,435	30,456	17,060		274		5,179		86	22,513	3,951
9. 2022	46,941	18,394	28,547	11,142		165		3,151		55	14,458	1,717
10. 2023	58,987	24,167	34,820	22,854		271		4,748		44	27,873	2,454
11. 2024	120,326	40,463	79,863	63,397	22,372	96	30	12,533	4,239	40	49,385	7,987
12. Totals	X X X	X X X	X X X	275,115	32,907	2,832	161	94,547	17,485	1,556	321,941	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Direct and Assumed			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Direct and Assumed					
1. Prior													
2. 2015													
3. 2016													
4. 2017			121	121	55	55	37	37	110	110			3
5. 2018									1			1	
6. 2019			4		46		1					51	8
7. 2020	130		12		47		3		3			195	18
8. 2021	175		21		61		3		15			275	21
9. 2022	87		231		40		12		37			407	38
10. 2023	825		707		165		40		148			1,885	130
11. 2024	9,101	4,381	13,068	3,803	573	319	435	182	1,573	691		15,374	2,417
12. Totals	10,318	4,381	14,164	3,924	987	374	531	219	1,887	801		18,188	2,635

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	X X X	X X X	X X X	X X X	X X X	X X X			X X X		
2. 2015	42,598		42,598	45,638		67,292					
3. 2016	46,205		46,205	52,579		80,506					
4. 2017	76,454	24,235	52,219	97,651	87,007	103,529					
5. 2018	20,085		20,085	29,611		45,260					1
6. 2019	27,146		27,146	47,516		72,276					47
7. 2020	19,706		19,706	38,739		61,449					53
8. 2021	22,788		22,788	47,583		74,823					79
9. 2022	14,865		14,865	31,667		52,072					89
10. 2023	29,758		29,758	50,448		85,462					353
11. 2024	100,776	36,017	64,759	83,752	89,012	81,088					1,389
12. Totals	X X X	X X X	X X X	X X X	X X X	X X X			X X X		16,177

- 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 11 – SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1-2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	X X X	X X X	X X X									X X X
2. 2015	40,521	12,872	27,649	18,844					8,242	110	27,086	X X X
3. 2016	39,885	12,877	27,008	24,158		35		6,993		270	31,186	X X X
4. 2017	38,648	12,249	26,399	26,758	8,075	547	238	19,655	8,103	113	30,544	X X X
5. 2018	36,658	11,796	24,862	7,140		24		2,123		68	9,287	X X X
6. 2019	33,293	11,227	22,066	12,944		393		3,619		23	16,956	X X X
7. 2020	31,291	10,268	21,023	11,236		251		3,670		1	15,157	X X X
8. 2021	29,674	10,716	18,958	8,954		321		2,942		3	12,217	X X X
9. 2022	28,492	11,418	17,074	8,512		216		2,493		2	11,221	X X X
10. 2023	33,214	14,718	18,496	14,066		104		3,509		32	17,679	X X X
11. 2024	48,801	29,402	19,399	64,879	21,495	48	25	11,646	3,732	91	51,321	X X X
12. Totals	X X X	X X X	X X X	197,491	29,570	1,939	263	64,892	11,835	713	222,654	X X X

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior													
2. 2015													
3. 2016													
4. 2017	23	23	63	63	5	5	19	19	56	56			1
5. 2018													
6. 2019			2		6							8	1
7. 2020			7		24		1					32	18
8. 2021			13		30		1					44	16
9. 2022			136		49		7		18			210	14
10. 2023	9		417		72		24		80			602	56
11. 2024	1,171	183	7,428	1,968	381	203	243	94	811	310		7,276	205
12. Totals	1,203	206	8,066	2,031	567	208	295	113	965	366		8,172	311

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	X X X	X X X	X X X	X X X	X X X	X X X			X X X		
2. 2015	27,086		27,086	66.844		97.964					
3. 2016	31,186		31,186	78.190		115.469					
4. 2017	47,126	16,582	30,544	121.936	135.374	115.701					
5. 2018	9,287		9,287	25.334		37.354					
6. 2019	16,964		16,964	50.954		76.878					2
7. 2020	15,189		15,189	48.541		72.249					7
8. 2021	12,261		12,261	41.319		64.675					13
9. 2022	11,431		11,431	40.120		66.950					136
10. 2023	18,281		18,281	55.040		98.838					426
11. 2024	86,607	28,010	58,597	177.470	95.266	302.062					6,448
12. Totals	X X X	X X X	X X X	X X X	X X X	X X X			X X X		7,032

- 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 1O 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**
- NONE** **Schedule P - Part 1U - Pet Insurance Plans**

SCHEDULE P – PART 2A – HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior	5,413	4,221	4,219	3,663	3,505	3,541	3,492	3,478	3,490	3,478	(12)	
2. 2015	35,126	35,450	34,579	34,147	33,818	33,958	34,022	34,026	33,995	33,993	(2)	(33)
3. 2016	XXX	37,804	36,788	36,131	35,827	35,708	35,674	35,846	35,878	35,873	(5)	27
4. 2017	XXX	XXX	35,094	32,136	31,341	30,903	30,724	30,794	30,707	31,270	563	476
5. 2018	XXX	XXX	XXX	16,726	14,789	14,751	14,873	14,723	14,664	14,651	(13)	(72)
6. 2019	XXX	XXX	XXX	XXX	21,895	21,207	20,923	21,161	21,173	21,153	(20)	(8)
7. 2020	XXX	XXX	XXX	XXX	XXX	17,093	15,011	15,301	15,337	15,325	(12)	24
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	18,465	17,784	17,791	17,594	(197)	(190)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,999	11,898	11,677	(221)	(1,322)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,557	24,862	(1,695)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55,583	XXX	XXX
12. Totals											(1,614)	(1,098)

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
NONE												
12. Totals												

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
NONE												
12. Totals												

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
NONE												
12. Totals												

SCHEDULE P – PART 2E – COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
NONE												
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 Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior	789	582	414	210	177	168	162	153	157	153	(4)	
2. 2015	19,170	19,895	19,379	19,019	18,875	18,857	18,852	18,844	18,845	18,844	(1)	
3. 2016	XXX	25,007	24,614	24,292	24,174	24,183	24,174	24,216	24,194	24,193	(1)	(23)
4. 2017	XXX	XXX	21,248	19,581	19,261	18,818	18,736	18,863	18,790	18,992	202	129
5. 2018	XXX	XXX	XXX	8,760	7,463	7,317	7,207	7,205	7,172	7,164	(8)	(41)
6. 2019	XXX	XXX	XXX	XXX	13,647	13,242	12,991	13,200	13,378	13,345	(33)	145
7. 2020	XXX	XXX	XXX	XXX	XXX	11,536	11,168	11,540	11,581	11,519	(62)	(21)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	9,634	9,663	9,490	9,319	(171)	(344)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,364	9,020	8,920	(100)	(444)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15,639	14,692	(947)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50,182	XXX	XXX
12. Totals											(1,125)	(599)

SCHEDULE P – PART 2J – AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P – PART 2K – FIDELITY, SURETY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P – PART 2M – INTERNATIONAL

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	One Year	Two Year
1. Prior												
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	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, 2U**

SCHEDULE P – PART 3A – HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000	2,301	3,121	3,422	3,448	3,477	3,478	3,478	3,478	3,478		
2. 2015	26,317	32,630	33,445	33,706	33,745	33,836	33,836	33,847	33,992	33,993	3,290	2,683
3. 2016	XXX	30,018	34,446	35,365	35,565	35,645	35,656	35,844	35,873	35,873	3,704	2,638
4. 2017	XXX	XXX	27,726	30,420	30,852	30,669	30,673	30,648	30,664	31,270	4,504	9,030
5. 2018	XXX	XXX	XXX	11,380	13,233	14,238	14,492	14,649	14,651	14,651	1,240	1,837
6. 2019	XXX	XXX	XXX	XXX	16,294	19,844	20,560	20,821	20,951	21,102	1,571	2,014
7. 2020	XXX	XXX	XXX	XXX	XXX	11,088	13,669	14,350	14,920	15,133	1,123	1,349
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	14,090	16,449	17,003	17,334	1,596	2,334
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,334	10,585	11,307	781	898
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,077	23,125	1,084	1,240
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41,091	3,035	2,535

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000											
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000											
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

SCHEDULE P – PART 3D – WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000											
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

SCHEDULE P – PART 3E – COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000											
2. 2015												
3. 2016	XXX											
4. 2017	XXX	XXX										
5. 2018	XXX	XXX	XXX									
6. 2019	XXX	XXX	XXX	XXX								
7. 2020	XXX	XXX	XXX	XXX	XXX							
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

NONE

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)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000	93	153	153	153	153	153	153	153	153	X X X	X X X
2. 2015	15,551	18,700	18,750	18,834	18,834	18,844	18,844	18,844	18,844	18,844	X X X	X X X
3. 2016	X X X	21,667	23,629	23,916	24,042	24,138	24,158	24,191	24,193	24,193	X X X	X X X
4. 2017	X X X	X X X	17,793	18,868	18,858	18,705	18,708	18,755	18,773	18,992	X X X	X X X
5. 2018	X X X	X X X	X X X	5,853	7,029	7,120	7,126	7,164	7,164	7,164	X X X	X X X
6. 2019	X X X	X X X	X X X	X X X	10,991	12,767	12,828	13,094	13,334	13,337	X X X	X X X
7. 2020	X X X	X X X	X X X	X X X	X X X	9,061	10,865	11,194	11,442	11,487	X X X	X X X
8. 2021	X X X	X X X	X X X	X X X	X X X	X X X	7,297	8,870	9,183	9,275	X X X	X X X
9. 2022	X X X	X X X	X X X	X X X	X X X	X X X	X X X	6,743	8,504	8,728	X X X	X X X
10. 2023	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	12,291	14,170	X X X	X X X
11. 2024	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	43,407	X X X	X X X

SCHEDULE P – PART 3J – AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000											
2. 2015												
3. 2016	X X X											
4. 2017	X X X	X X X										
5. 2018	X X X	X X X	X X X									
6. 2019	X X X	X X X	X X X	X X X								
7. 2020	X X X	X X X	X X X	X X X	X X X							
8. 2021	X X X	X X X	X X X	X X X	X X X	X X X						
9. 2022	X X X	X X X	X X X	X X X	X X X	X X X	X X X					
10. 2023	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X				
11. 2024	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X			

SCHEDULE P – PART 3K – FIDELITY/SURETY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior	000										X X X	X X X
2. 2015											X X X	X X X
3. 2016	X X X										X X X	X X X
4. 2017	X X X	X X X									X X X	X X X
5. 2018	X X X	X X X	X X X								X X X	X X X
6. 2019	X X X	X X X	X X X	X X X							X X X	X X X
7. 2020	X X X	X X X	X X X	X X X	X X X						X X X	X X X
8. 2021	X X X	X X X	X X X	X X X	X X X	X X X					X X X	X X X
9. 2022	X X X	X X X	X X X	X X X	X X X	X X X	X X X				X X X	X X X
10. 2023	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X			X X X	X X X
11. 2024	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X		X X X	X X X

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior	000										XXX	XXX
2. 2015											XXX	XXX
3. 2016	XXX										XXX	XXX
4. 2017	XXX	XXX									XXX	XXX
5. 2018	XXX	XXX	XXX								XXX	XXX
6. 2019	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P – PART 3M – INTERNATIONAL

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior	000										XXX	XXX
2. 2015											XXX	XXX
3. 2016	XXX										XXX	XXX
4. 2017	XXX	XXX									XXX	XXX
5. 2018	XXX	XXX	XXX								XXX	XXX
6. 2019	XXX	XXX	XXX	XXX							XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2024	XXX	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, 3U**

SCHEDULE P – PART 4A – HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	1,912	1,162	783	99	15	64	14			12
2. 2015	5,133	1,744	872	335	72	22	11			1
3. 2016	XXX	4,687	1,333	492	138	43	13	2		2
4. 2017	XXX	XXX	4,713	1,099	173	168	41	105		12
5. 2018	XXX	XXX	XXX	4,276	621	188	58	67		13
6. 2019	XXX	XXX	XXX	XXX	4,091	711	124	57		31
7. 2020	XXX	XXX	XXX	XXX	XXX	3,486	549	113		78
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	3,022	808		330
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,196		594
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,408	747
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,518

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P – PART 4E – COMMERCIAL MULTIPLE PERIL

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX						
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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)

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior	966	551	431	54	8	39	9			8
2. 2015	2,608	849	480	183	41	13	8			1
3. 2016	XXX	2,280	734	268	78	26	9	2		1
4. 2017	XXX	XXX	2,596	599	307	71	28	78		12
5. 2018	XXX	XXX	XXX	2,331	349	115	40	41		8
6. 2019	XXX	XXX	XXX	XXX	2,302	434	84	36		19
7. 2020	XXX	XXX	XXX	XXX	XXX	2,130	373	69		47
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	2,054	496		201
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,166		383
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		2,837
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,609

SCHEDULE P – PART 4J – AUTO PHYSICAL DAMAGE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P – PART 4K – FIDELITY/SURETY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 4M – INTERNATIONAL

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX						
7. 2020	XXX	XXX	XXX	XXX	XXX					
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P – PART 4N – REINSURANCE NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX	NONE					
7. 2020	XXX	XXX	XXX	XXX		XXX				
8. 2021	XXX	XXX	XXX	XXX		XXX	XXX			
9. 2022	XXX	XXX	XXX	XXX		XXX	XXX	XXX		
10. 2023	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	
11. 2024	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX

SCHEDULE P – PART 4O – REINSURANCE NONPROPORTIONAL ASSUMED LIABILITY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX	NONE					
7. 2020	XXX	XXX	XXX	XXX		XXX				
8. 2021	XXX	XXX	XXX	XXX		XXX	XXX			
9. 2022	XXX	XXX	XXX	XXX		XXX	XXX	XXX		
10. 2023	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	
11. 2024	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX

SCHEDULE P – PART 4P – REINSURANCE NONPROPORTIONAL ASSUMED FINANCIAL LINES

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior										
2. 2015										
3. 2016	XXX									
4. 2017	XXX	XXX								
5. 2018	XXX	XXX	XXX							
6. 2019	XXX	XXX	XXX	XXX	NONE					
7. 2020	XXX	XXX	XXX	XXX		XXX				
8. 2021	XXX	XXX	XXX	XXX		XXX	XXX			
9. 2022	XXX	XXX	XXX	XXX		XXX	XXX	XXX		
10. 2023	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	
11. 2024	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX

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

SCHEDULE P – PART 5A – HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior	418	108	21	12	25	3	1			
2. 2015	2,683	3,227	3,264	3,277	3,289	3,289	3,289	3,289	3,289	3,290
3. 2016	XXX	3,045	3,563	3,670	3,690	3,698	3,702	3,703	3,703	3,704
4. 2017	XXX	XXX	3,724	4,284	4,386	4,407	4,493	4,496	4,502	4,504
5. 2018	XXX	XXX	XXX	978	1,209	1,222	1,239	1,239	1,240	1,240
6. 2019	XXX	XXX	XXX	XXX	1,283	1,460	1,561	1,563	1,570	1,571
7. 2020	XXX	XXX	XXX	XXX	XXX	606	1,097	1,104	1,123	1,123
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1,376	1,490	1,595	1,596
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	423	763	781
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	793	1,084
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,035

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior	735	645	623	613	586					
2. 2015	391	87	62	48	37	1	1	1	1	
3. 2016	XXX	448	154	69	57	2	1		1	
4. 2017	XXX	XXX	638	273	248	140	42	7	5	3
5. 2018	XXX	XXX	XXX	214	76	19	6	1		
6. 2019	XXX	XXX	XXX	XXX	262	147	31	16	9	8
7. 2020	XXX	XXX	XXX	XXX	XXX	473	118	32	18	18
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	379	84	21	21
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	311	71	38
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	500	130
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,417

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior	440	35	14	8	5	5	1			
2. 2015	5,431	5,971	5,993	6,001	6,006	6,009	6,010	6,010	6,010	6,010
3. 2016	XXX	5,821	6,331	6,363	6,375	6,388	6,393	6,393	6,394	6,394
4. 2017	XXX	XXX	12,827	13,470	13,549	13,766	13,774	13,774	13,780	13,780
5. 2018	XXX	XXX	XXX	2,762	3,091	3,146	3,153	3,153	3,156	3,156
6. 2019	XXX	XXX	XXX	XXX	3,253	3,716	3,769	3,769	3,774	3,775
7. 2020	XXX	XXX	XXX	XXX	XXX	2,188	2,498	2,498	2,521	2,522
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	3,882	3,882	3,950	3,951
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,442	1,707	1,717
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,259	2,454
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,987

- 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, 6O 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)**

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? 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 "yes", please answer the following questions:

1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere 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 adjustment expense reserve? Yes [] No [X]

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A [X]

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2015		
1.603 2016		
1.604 2017		
1.605 2018		
1.606 2019		
1.607 2020		
1.608 2021		
1.609 2022		
1.610 2023		
1.611 2024		
1.612 Totals		

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [] No [X]

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5. What were the net premiums in force at the end of the year for: 5.1 Fidelity \$ _____
5.2 Surety \$ _____
 (in thousands of dollars)

6. Claim count information is reported per claim or per claimant. (indicate 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 persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [X] No []

7.2 An extended statement may be attached
 LAE was historically reported in adjusting and other due to legacy system limitations. Beginning in calendar year 2022, DCC calendar year paid have been reported in the annual statement and going forward. Inception to date paid info will accumulate over time.

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

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premium Written for Federal Purchasing Groups (Included in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N							
2. Alaska	AK	N							
3. Arizona	AZ	N							
4. Arkansas	AR	N							
5. California	CA	N							
6. Colorado	CO	N							
7. Connecticut	CT	N							
8. Delaware	DE	N							
9. District of Columbia	DC	N							
10. Florida	FL	N							
11. Georgia	GA	N							
12. Hawaii	HI	N							
13. Idaho	ID	N							
14. Illinois	IL	N							
15. Indiana	IN	N							
16. Iowa	IA	N							
17. Kansas	KS	N							
18. Kentucky	KY	N							
19. Louisiana	LA	N							
20. Maine	ME	N							
21. Maryland	MD	N							
22. Massachusetts	MA	N							
23. Michigan	MI	N							
24. Minnesota	MN	N							
25. Mississippi	MS	N							
26. Missouri	MO	N							
27. Montana	MT	N							
28. Nebraska	NE	N							
29. Nevada	NV	N							
30. New Hampshire	NH	N							
31. New Jersey	NJ	N							
32. New Mexico	NM	N							
33. New York	NY	N							
34. North Carolina	NC	N							
35. North Dakota	ND	N							
36. Ohio	OH	N							
37. Oklahoma	OK	N							
38. Oregon	OR	N							
39. Pennsylvania	PA	N							
40. Rhode Island	RI	N							
41. South Carolina	SC	N							
42. South Dakota	SD	N							
43. Tennessee	TN	N							
44. Texas	TX	L	237,276,551	169,126,079	135,164,962	155,613,923	33,751,330	948,298	
45. Utah	UT	N							
46. Vermont	VT	N							
47. Virginia	VA	N							
48. Washington	WA	N							
49. West Virginia	WV	N							
50. Wisconsin	WI	N							
51. Wyoming	WY	N							
52. American Samoa	AS	N							
53. Guam	GU	N							
54. Puerto Rico	PR	N							
55. U.S. Virgin Islands	VI	N							
56. Northern Mariana Islands	MP	N							
57. Canada	CAN	N							
58. Aggregate Other Alien	OT	X X X							
59. Totals	(a) 1		237,276,551	169,126,079	135,164,962	155,613,923	33,751,330	948,298	

DETAILS OF WRITE-INS									
58001.		X X X							
58002.		X X X							
58003.		X X X							
58998.	Summary of remaining write-ins for Line 58 from overflow page	X X X							
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	X X X							

NONE

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

- (a) Active Status Counts
- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG 1
 - 2. R - Registered - Non-domiciled RRGs
 - 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state
 - 4. Q - Qualified - Qualified or accredited reinsurer
 - 5. D - Domestic Surplus Lines Insurer (DSL) - Reporting entities authorized to write surplus lines in the state of domicile
 - 6. N - None of the above - Not allowed to write business in the state (other than their state of domicile - See DSLI) 56

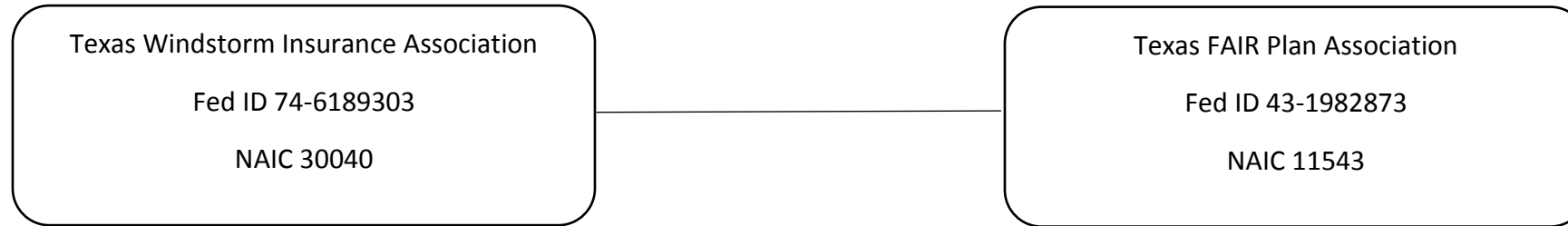
Explanation of basis of allocation of premiums by states, etc.

The Texas FAIR Plan Association only writes policies in Texas.

NONE Schedule T - Part 2

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



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
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
11543 30040	43-1982873 74-6189303	Texas FAIR Plan Association Texas Windstorm Insurance Association					(22,973,351) 22,973,351				(22,973,351) 22,973,351	
9999999	Control Totals								XXX			

NONE Schedule Y - Part 3

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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.

	Responses
MARCH FILING	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	See Explanation
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	See Explanation
APRIL FILING	
5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6. Will Management's Discussion and Analysis be filed by April 1?	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
MAY FILING	
8. Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	See Explanation
JUNE FILING	
9. Will an audited financial report be filed by June 1?	See Explanation
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	See Explanation

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14. Will Supplemental A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16. Will the Premiums Attributed to Protected Cells be filed by March 1?	NO
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1?	NO
28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	NO
29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	NO
APRIL FILING	
30. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
31. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
32. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) 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 Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April?	NO
36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

AUGUST FILING

38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? NO

Explanation 2: Texas FAIR Plan Association has no employees. TFPA reimburses costs of personnel employed by the Texas Windstorm Insurance Association that perform work for TFPA.

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 required to file until June 30.

Explanation 10: The Texas FAIR Plan Association is not required to file until June 30.

Explanation 11: Not applicable.

Explanation 13: Not applicable.

Explanation 14: Not applicable.

Explanation 15: Not applicable.

Explanation 16: Not applicable.

Explanation 17: Not applicable.

Explanation 18: Not applicable.

Explanation 21: There were no exceptions to the Reinsurance Supplement.

Explanation 22: Not applicable.

Explanation 23: Not applicable.

Explanation 24: Not applicable.

Explanation 25: Not applicable.

Explanation 26: Not applicable.

Explanation 27: Not applicable.

Explanation 28: Not applicable.

Explanation 29: Not applicable.

Explanation 30: Not applicable.

Explanation 31: Not applicable.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- Explanation 32: Not applicable.
- 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:



1154320244600000



1154320243900000



11543202420100000



11543202422000000



11543202422100000



11543202442000000



11543202424000000



11543202436000000



11543202445500000



11543202449000000



11543202438500000



11543202440100000



11543202436500000



11543202440000000



11543202450000000



11543202450500000



11543202422400000



11543202422500000



11543202422600000



11543202455500000



115432024000000



115432024000000



11543202423000000



11543202430100000



11543202421000000



11543202421600000



11543202421700000



11543202429000000



11543202456000000



11543202456500000

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES



11543202422300000

OVERFLOW PAGE FOR WRITE-INS

Page 2 - Continuation

ASSETS

	Current Year			Prior Year
	1	2	3	4
REMAINING WRITE-INS AGGREGATED AT LINE 25 FOR OTHER THAN INVESTED ASSETS	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
2504. Surcharge Receivable	53,172	53,172		
2505. Accounts Receivable - Misc	19,723		19,723	
2597. Totals (Lines 2504 through 2596) (Page 2, Line 2598)	72,895	53,172	19,723	

OVERFLOW PAGE FOR WRITE-INS

Page 11 - Continuation

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

REMAINING WRITE-INS AGGREGATED AT LINE 24 FOR OTHER LINES OF BUSINESS	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
2404. Miscellaneous Expense		10		10
2497. Totals (Lines 2404 through 2496) (Page 11, Line 24)		10		10

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 13	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage of Column 5 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 Unaffiliated certificates of deposit						
1.12 Total long-term bonds						
2. 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						
3. 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 Exchange traded funds						
3.09 Total common stocks						
4. 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)	29,523,798	47.48	29,523,798		29,523,798	47.48
6.02 Cash equivalents (Schedule E, Part 2)	32,651,731	52.52	32,651,731		32,651,731	52.52
6.03 Short-term investments (Schedule DA)						
6.04 Total cash, cash equivalents and short-term investments	62,175,529	100.00	62,175,529		62,175,529	100.00
7. Contract loans						
8. Derivatives (Schedule DB)						
9. Other invested assets (Schedule BA)						
10. Receivables for securities						
11. Securities Lending (Schedule DL, Part 1)				X X X	X X X	X X X
12. Other invested assets (Page 2, Line 11)						
13. Total invested assets	62,175,529	100.00	62,175,529		62,175,529	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	30,975,864		30,975,864	
2. Cost of cash equivalents acquired	6,972,384		6,972,384	
3. Accrual of discount				
4. Unrealized valuation increase/(decrease)				
5. Total gain (loss) on disposals				
6. Deduct consideration received on disposals	5,296,517		5,296,517	
7. Deduct amortization of premium				
8. Total foreign exchange change in book/adjusted carrying value				
9. Deduct current year's other-than-temporary impairment recognized				
10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	32,651,731		32,651,731	
11. Deduct total nonadmitted amounts				
12. Statement value at end of current period (Line 10 minus Line 11)	32,651,731		32,651,731	

(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	2	3	4	5	6	7
Depository	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
OPEN DEPOSITORIES						
Bank of America, N.A. Austin, TX					6,215,382	
Citibank, N.A. Dallas, TX					208,148	
Citibank, N.A. - IMMA Dallas, TX		0.750	1,684		110,910	
JP Morgan Chase Bank, N.A. San Antonio, TX		2.950	666,581		22,989,358	
0199998 Deposits in () depositories that do not exceed the allowable limit in any one depository (See Instructions) - open depositories	X X X	X X X				X X X
0199999 Totals - Open Depositories	X X X	X X X	668,265		29,523,798	X X X
SUSPENDED DEPOSITORIES						
0299998 Deposits in () depositories that do not exceed the allowable limit in any one depository (See Instructions) - suspended depositories	X X X	X X X				X X X
0299999 Totals - Suspended Depositories	X X X	X X X				X X X
0399999 Total Cash on Deposit	X X X	X X X	668,265		29,523,798	X X X
0499999 Cash in Company's Office	X X X	X X X	X X X	X X X		X X X
0599999 Total Cash	X X X	X X X	668,265		29,523,798	X X X

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

1. January	17,545,847	4. April	20,675,873	7. July	17,467,805	10. October	21,529,861
2. February	23,656,071	5. May	19,378,740	8. August	9,703,553	11. November	25,929,306
3. March	25,968,784	6. June	17,243,411	9. September	19,918,403	12. December	29,523,798

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due & Accrued	9 Amount Received During Year
31607A-80-2	FIMM Treasury Only Portfolio Institutional Class		12/02/2024	4.358	X X X	10,059,498	37,958	497,179
38142B-50-0	Goldman Sachs Fin'l SQ Treas Instruments - Inst Shares - Fund 506		12/02/2024	4.331	X X X	5,078,837	19,010	492,003
4812C2-23-9	JP Morgan US Treasury Plus Money Market Fund - Capital Shares 4110		12/31/2024	4.379	X X X	17,513,396	44,653	456,606
8209999999	Exempt Money Market Mutual Funds – as Identified by SVO					32,651,731	101,621	1,445,788
8609999999	Total Cash Equivalents					32,651,731	101,621	1,445,788

E28

1. Book/Adjusted Carrying Value by NAIC Designation Category Footnote:							
Line Number							
1A	1A \$		1B \$		1C \$		1D \$
1B	2A \$		2B \$		2C \$		1E \$
1C	3A \$		3B \$		3C \$		1F \$
1D	4A \$		4B \$		4C \$		1G \$
1E	5A \$		5B \$		5C \$		
1F	6 \$						

NONE Schedule E - Part 3