## **ANNUAL STATEMENT**

#### OF THE

	Texas Windstorm Insurance Association			
of	Austin			
STATE OF	Texas			

## **TO THE**

**Insurance Department** 

**OF THE** 

**State of Texas** 

FOR THE YEAR ENDED

**December 31, 2019** 



#### **ANNUAL STATEMENT**

For the Year Ended December 31, 2019 OF THE CONDITION AND AFFAIRS OF THE

, , , , , , , , , , , , , , , , , , ,	Texas Windsto	orm Insurance Association	<u>1</u>	·
NAIC Group Code 4766		any Code 30040	Employer's ID Number	74-6189303
(Current Period)	(Prior Period)			
Organized under the Laws of Texas		, State of Domicile or Port of	Entry TX	<del></del> -
Country of Domicile USA Incorporated/Organized	June 1, 1971	Commence	ed Business	June 1, 1971
Statutory Home Office 5700 S. Mopac		Commence	Austin, TX, US 78749	June 1, 1971
Oracle of Monage of the Company	(Street and Number)	,,,,	(City or Town, State, Cou	untry and Zip Code)
Main Administrative Office 5700 S	. Mopac Bldg A			
Augstin	TV 110 - 70740	(Street and Number	•	
Austin,	TX, US 78749 (City or Town, State, Country and Zig	Code) (Area	512-899-4900 a Code) (Telephone Number)	
Mail Address P.O. Box 99090		,	Austin, TX, US 78709	·
	(Street and Number or P.O. Box)		(City or Town, State, Cou	
Primary Location of Books and Records	5700 S. Mopac Bldg A (Street and Number)	Austin, (City or Town	TX, US 78749 n, State, Country and Zip Code) (Are	512-899-4900 ea Code) (Telephone Number)
Internet Web Site Address		. ,		
Statutory Statement Contact Allen D	avid Fulkerson		512-899-4988	, , , , , , , , , , , , , , , , , , , ,
	(Name)	(Area	a Code) (Telephone Number)	(Extension)
atukers	son@twia.org (E-Mail Address)		512-899- (Fax Nu	
		OFFICERS	·	•
	•	OI I IOLIKO		
		Ob -f #		
		yan Shofner #	Title	
1. John Willia	<b>Name</b> am Polak	General Manager	Title	
2. Chandra F	ranklin Womack #	Vice Chairman		
3. Corise Mo		Secretary-Treasur		· · · · · · · · · · · · · · · · · · ·
4. Jerome To	onra Fadden	Chief Financial Of	.iicer	· · · · · · · · · · · · · · · · · · ·
	VIC	E-PRESIDENTS		
Name	Title	N	lame .	Title
David Patrick Durden	VP Legal	David Scott Williams	VP Claims	
Camron Malik Jennifer Taylor Armstrong	VP IT VP Communications&Legislative Affairs	Juanita Deloris Lester		d Administration
Jenniler taylor Armstrong	VP Communications&Legislative Alians	Denise Ingerson Larzale	ere VP Underv	villing
· · · · · · · · · · · · · · · · · · ·				
<del></del>		<u> </u>		
	· · · · · · · · · · · · · · · · · · ·		<del></del>	
		ORS OR TRUSTEES		
Karen Guard	Corise Morrison #	Tony Schrader		el Frank Gerik
Bryan Shofner	Georgia Rutherford Neblett	Chandra Franklin Woma	ack	
				· ,
		·	<u> </u>	<del></del>
	·			
			<del></del>	<del></del>
State of Texas				
County of Travis	SS			
The officers of this reporting entity being duly sw	vorn each denose and say that they are the de	scribed officers of said reporting entity	v and that on the reporting period sta	ted above all of the herein described
assets were the absolute property of the said re				
explanations therein contained, annexed or refer	red to, is a full and true statement of all the asse	ets and liabilities and of the condition a	nd affairs of the said reporting entity as	s of the reporting period stated above,
and of its income and deductions therefrom for the	e period ended, and have been completed in a	ccordance with the NAIC Annual State	ment Instructions and Accounting Pra	ctices and Procedures manual except
to the extent that: (1) state law may differ; or, (2 knowledge and belief, respectively. Furthermore,				
(except for fermatting differences due to electroni				
(X)		(1/11/11)		
		17/1/1/		
(Signature)	/ / ¬	(Signature)	<del></del>	(Signature)
John William Polak (Printed Name)	<del></del>	Jerome Tonra Fadden (Printed Name)	<del></del> ,	Drinted Name\
(Printed Name)		(Printed Name) 2.	(	(Printed Name) 3.
$\smile$				
General Manager	<u> </u>	Chief Financial Officer	<u> </u>	
(Title)	att. III	(Title)		(Title)
Subscribed and swom to (or affirmed) before me a 26th day of Februara	the state of the s			
- vayor restrans	, 2020, by		a. Is this an original filing?	[X]Yes []No
(An Koell			b. If no: 1. State the amendn	
/	·	•	2. Date filed	
will.			3. Number of pages	attached
AMY NOTORY BUNK	COEHL			
Comm Evision	State of Texas es 03-06-2023			
I TORRESTOR	0 00-00-2023			

Notary ID 130144253

## **ASSETS**

		Current Year			Prior Year	
		1	2	3	4	
		Negadaittad		Net Admitted		
		Assets	Nonadmitted Assets	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 (\$ 209,839,812, Schedule E - Part 1), cash equivalents (\$ 304,771,310,					
	Schedule E - Part 2), and short-term investments (\$ 0, Schedule DA)	514,611,122		514,611,122	656,127,358	
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)	514,611,122		514,611,122	656,127,358	
13.	Title plants less \$ 0 charged off (for Title insurers only)					
	Investment income due and accrued	215,780		215,780	498,727	
	Premiums and considerations:					
	15.1 Uncollected premiums and agents' balances in the course of collection	256,371	139,953	116,418	106,172	
	15.2 Deferred premiums, agents' balances and installments booked but deferred					
	and not yet due (including \$ 0 earned but unbilled premiums)					
	15.3 Accrued retrospective premiums (\$ 0) and contracts subject to					
	1.1. 1.1. (1)					
16	redetermination (\$ 0) Reinsurance:					
10.		6,826		6,826	4,461	
	<ul><li>16.1 Amounts recoverable from reinsurers</li><li>16.2 Funds held by or deposited with reinsured companies</li></ul>	0,020		0,020		
	40.0					
17	16.3 Other amounts receivable under reinsurance contracts  Amounts receivable relating to uninsured plans					
	Current federal and foreign income tax recoverable and interest thereon					
	Net deferred tax asset					
18.2 19.	Guaranty funds receivable or on deposit					
20. 21	Electronic data processing equipment and software	652,549	652,549			
21. 22.	Furniture and equipment, including health care delivery assets (\$ 0)  Net adjustment in assets and liabilities due to foreign exchange rates	002,049	052,549			
		1 075 605		1 075 605	1 000 066	
23.	Receivables from parent, subsidiaries and affiliates	1,075,625		1,075,625	1,029,066	
24.	Health care (\$ 0) and other amounts receivable	02 205 440	2 204 407	00 004 000	70.044	
25.	Aggregate write-ins for other-than-invested assets	93,395,440	3,304,407	90,091,033	72,944	
26.	Total assets excluding Separate Accounts, Segregated Accounts and	010 010 =1=	4 000 000	000 440 00:	057.000.505	
^-	Protected Cell Accounts (Lines 12 to 25)	610,213,713	4,096,909	606,116,804	657,838,728	
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	040 040 740	4 000 000	000 110 001	057 000 700	
28.	Total (Lines 26 and 27)	610,213,713	4,096,909	606,116,804	657,838,728	

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. Member Assessment Receivable	92,199,241	2,199,241	90,000,000	
2502. Prepaid assets	993,285	993,285		
2503. Security deposit - lease	111,881	111,881		
2598. Summary of remaining write-ins for Line 25 from overflow page	91,033		91,033	72,944
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	93.395.440	3.304.407	90.091.033	72.944

## LIABILITIES, SURPLUS AND OTHER FUNDS

i .		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)	131,861,792	157,182,138
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)	37,268,229	43,597,505
4.	Commissions payable, contingent commissions and other similar charges	3,607,624	3,639,131
5.	Other expenses (excluding taxes, licenses and fees)	5,667,291	5,497,696
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	686,629	685,411
7.1	Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))		
7.2	Net deferred tax liability		
8.	Borrowed money \$ 318,600,000 and interest thereon \$ 13,142,250	331,742,250	383,700,625
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded		
l	reinsurance of \$ 0 and including warranty reserves of \$ 0		
l	and accrued accident and health experience rating refunds including \$ 0		
l	for medical loss ratio rebate per the Public Health Service Act)	185,495,369	195,049,950
	Advance premium	6,588,932	6,202,566
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.		00 004 005	20,171,584
			400,023
	Amounts withheld or retained by company for account of others		
15.	Paralle and the second discount of the second	0.004.040	2,929,007
	Provision for reinsurance (including \$ 0 certified) (Schedule F, Part 3 Column 78)	<b>!</b>	2,020,007
	All Production and the large of the first of the large of		
	Desiration		
	Developed for a constitue		
	Payable for securities		
22.	Payable for securities lending		
	Liability for amounts held under uninsured plans		
	Capital notes \$ 0 and interest thereon \$ 0		440.047.000
	Aggregate write-ins for liabilities		116,647,289
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	789,908,582	935,702,925
1			
28.	Total liabilities (Lines 26 and 27)	789,908,582	935,702,925
	Aggregate write-ins for special surplus funds		
	Common capital stock		
31.			
32.	Aggregate write-ins for other-than-special surplus funds		
	Surplus notes		
34.	Gross paid in and contributed surplus		
	Unassigned funds (surplus)	(183,791,778)	(277,864,197)
- ^^	Less treasury stock, at cost:		<del></del>
36.	Loss trousury stock, at cost.		<del> </del>
36.	36.1 0 shares common (value included in Line 30 \$ 0)		X-1.099.0191
36.	·		AT. 1988 1188
	36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0)	(183,791,778)	
37.	36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0)		
37.	36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	(183,791,778)	(277,864,197)
37.	36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	(183,791,778)	(277,864,197)
37. 38.	36.1	(183,791,778) 606,116,804	(277,864,197) 657,838,728
37. 38. 2501.	36.1	(183,791,778) 606,116,804 52,641,201	(277,864,197) 657,838,728 110,589,883
37. 38. 2501. 2502.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665	(277,864,197) 657,838,728 110,589,883 3,876,002
37. 38. 2501. 2502. 2503.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753	(277,864,197) 657,838,728 110,589,883 3,876,002 943,271
37. 38. 2501. 2502. 2503. 2598.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197) 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753	(277,864,197) 657,838,728 110,589,883 3,876,002 943,271
37. 38. 2501. 2502. 2503. 2598. 2599. 2901.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197) 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197) 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599. 2901.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999.	36.1	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201.	36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0)  Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)  Totals (Page 2, Line 28, Col. 3)  DETAILS OF WRITE-IN LINES  Statutory fund payable Pension benefits liability Escheat funds  Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)  NONE  Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197) 657,838,728 110,589,883 3,876,002 943,271 1,238,133 116,647,289
37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201. 3202.	36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0)  Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)  Totals (Page 2, Line 28, Col. 3)  DETAILS OF WRITE-IN LINES  Statutory fund payable Pension benefits liability Escheat funds  Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)  NONE  Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197) 657,838,728 110,589,883 3,876,002 943,271 1,238,133
37. 38. 2501. 2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201. 3202. 3203. 3298.	36.1 0 shares common (value included in Line 30 \$ 0) 36.2 0 shares preferred (value included in Line 31 \$ 0) Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) Totals (Page 2, Line 28, Col. 3)  DETAILS OF WRITE-IN LINES  Statutory fund payable Pension benefits liability Escheat funds Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)  NONE  Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	(183,791,778) 606,116,804 52,641,201 6,887,665 956,753 1,010,827	(277,864,197) 657,838,728 110,589,883 3,876,002 943,271 1,238,133 116,647,289

## **STATEMENT OF INCOME**

		1	2
		Current Year	Prior Year
	UNDERWRITING INCOME		
1.	Premiums earned (Part 1, Line 35, Column 4)  DEDUCTIONS:	287,476,738	301,515,439
2.	Losses incurred (Part 2, Line 35, Column 7)	86,654,749	106,262,595
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	26,742,763	69,735,257
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)	92,414,790	96,399,261
5.	Aggregate write-ins for underwriting deductions	52,641,201	110,589,883
6. 7	Total underwriting deductions (Lines 2 through 5)		382,986,996
7. 8.	Net income of protected cells  Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	20 023 235	(81,471,557)
0.	INVESTMENT INCOME	29,020,200	(01,471,007)
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	(22,117,196)	(27,331,179)
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)	(22,117,196)	(27,331,179)
	OTHER INCOME		
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered		
	\$ 0 amount charged off \$ 0)		
13.	Finance and service charges not included in premiums		
14.		90,042,566	281,871,761
	Total other income (Lines 12 through 14)	90,042,566	281,871,761
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	96,948,605	173,069,025
	Dividends to policyholders		
	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	96,948,605	173,069,025
	Federal and foreign income taxes incurred		
20.	Net income (Line 18 minus Line 19) (to Line 22)	96,948,605	173,069,025
	CAPITAL AND SURPLUS ACCOUNT		
21.	, , , , , , , , , , , , , , , , , , , ,	(277,864,197)	(461,390,162)
22.	Net income (from Line 20)	96,948,605	173,069,025
23.	Net transfers (to) from Protected Cell accounts		
24. 25.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ 0		
26.	Change in net unrealized foreign exchange capital gain (loss)  Change in net deferred income tax		
	Change in net deferred income tax  Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	10-1	9,281,901
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29.	Change in surplus notes		
30.	Surplus (contributed to) withdrawn from protected cells		
31.	Cumulative effect of changes in accounting principles		
32.			
	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	1	
35.	Dividends to stockholders		
36.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)	(2.044.662)	4.475.000
37. 38.	Aggregate write-ins for gains and losses in surplus  Change in surplus as regards policyholders for the year (Lines 22 through 37)	(3,011,663) 94,072,419	1,175,039 183,525,965
	Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 38) (Page 3, Line 37)	(183,791,778)	(277,864,197)
39.			

	DETAILS OF WRITE-IN LINES		
0501.	Statutory fund expense	52,641,201	110,589,883
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)	52,641,201	110,589,883
1401.	Member Assessment Income	90,000,000	281,819,778
1402.	Other income (loss)	42,566	51,983
1403.	CRTF Income		
1498.	Summary of remaining write-ins for Line 14 from overflow page		
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	90,042,566	281,871,761
3701.	Pension unassigned funds - unrecognized losses	(3,011,663)	1,175,039
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)	(3,011,663)	1,175,039

## **CASH FLOW**

		1	2
	Cash from Operations	Current Year	Prior Year
1.	Premiums collected net of reinsurance	280,264,406	294,899,834
2.	Net investment income	(00 000 700)	(29,058,812
3.			279,672,519
4.	• • • • • • • • • • • • • • • • • • • •		545,513,54
5.	Benefit and loss related payments		307,282,84
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		 
7.	50.0		183,021,79
8.			
9.			400 204 62
10.	Total (Lines 5 through 9) Net cash from operations (Line 4 minus Line 10)		490,304,63 55,208,90
11.		(09,442,142)	33,200,90
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	1	
	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		
40	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		
		1	
	13.5 Other invested assets 13.6 Miscellaneous applications		
	13.7 Total investments acquired (Lines 13.1 to 13.6)		
14.			
15.			
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):	•	
	16.1 Surplus notes, capital notes		
	<ul><li>16.2 Capital and paid in surplus, less treasury stock</li><li>16.3 Borrowed funds</li></ul>	(51.050.275)	(48,001,62
	<ul><li>16.3 Borrowed funds</li><li>16.4 Net deposits on deposit-type contracts and other insurance liabilities</li></ul>	(51,958,375)	1
	ACE District to the literature		
	40.0 Otherwoods are Paral (conflict)	(445.740)	2,845,887
17	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5	(113,713)	2,043,007
٠,,	alian line 40 CV	(52,074,094)	(45,155,738
		(32,011,004)	(10,100,700
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	7	(141,516,236)	10,053,167
19.	, 1	050 407 050	040.074.40
	19.1 Beginning of year		646,074,19
	19.2 End of year (Line 18 plus Line 19.1)	514,611,122	656,127,358

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

		1	2	3	4
			Unearned	Unearned	
		Net	Premiums Dec. 31	Premiums Dec. 31	Premiums
		Premiums	Prior Year-	Current Year-	Earned
		Written per	per Col. 3,	per Col. 5	During Year
	Line of Business	Column 6, Part 1B	Last Year's Part 1	Part 1A	(Cols. 1 + 2 - 3)
1	Fire				
1	Allied lines	277,922,157	195,049,950	185,495,369	287,476,738
	Farmowners multiple peril		100,040,000	100,400,000	201,410,100
	Homeowners multiple peril				
	Commercial multiple peril				
	Mortgage guaranty				
0.	Ocean marine Inland marine				
	Einanaial guaranty				
	Medical professional liability—occurrence				
	Medical professional liability—claims-made				
1	Earthquake				
	Group accident and health				
14.	Credit accident and health				
	(group and individual)				
1	Other accident and health				
16.	Workers' compensation				
17.1	Other liability—occurrence				
17.2	Other liability—claims-made				
17.3	Excess workers' compensation				
18.1	Products liability—occurrence				
18.2	Products liability—claims-made				
19.1,19.2	Private passenger auto liability				
19.3,19.4	Commercial auto liability				
	Auto physical damage				
	Aircraft (all perils)				
	Fidelity				
24.	Surety				
	Burglary and theft				
	Boiler and machinery				
	Credit				
	International				
	Warranty				
	Reinsurance-nonproportional				
0	assumed property				
32	Reinsurance-nonproportional				
JZ.	assumed liability				
33	Reinsurance-nonproportional				
<i>ა</i> ა.					
24	assumed financial lines				
34.	Aggregate write-ins for other lines				
25	of business	077 000 457	405.040.050	405 405 000	007 470 700
35.	TOTALS	277,922,157	195,049,950	185,495,369	287,476,738

DETAILS OF WRITE-IN LINES		
3401.		
3402.		
3403.	IONE	
3498. Sum of remaining write-ins for		
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 1A – RECAPITULATION OF ALL PREMIUMS

		Amount Unearned (Running One Year or Less from Date of Policy)	Amount Unearned (Running More Than One Year from Date of Policy)	3 Earned but Unbilled	4  Reserve for Rate  Credits and  Retrospective  Adjustments Based	5 Total Reserve for Unearned Premiums
	Line of Business	(a)	(a)	Premium	on Experience	Cols. 1 + 2 + 3 + 4
1.	Fire					
2.	Allied lines	185,495,369				185,495,369
3.	Farmowners multiple peril					
4.	Homeowners multiple peril					
5.	Commercial multiple peril					
6.	Mortgage guaranty					
	Ocean marine					
	Inland marine					
10.						
11.1	Medical professional liability—occurrence					
	Medical professional liablity—claims-made					
	Earthquake					
	Group accident and health					
	Credit accident and health					
17.	(many and in dividual)					
15						
	14/ 1 1 e					
	Other Patrice					
17.1	Other liability—occurrence					
	Other liability—claims-made					
	Excess workers' compensation					
	Products liability—claims-made					
	Private passenger auto liability					
	Commercial auto liability					
	Auto physical damage					
22.	Aircraft (all perils)					
23.	Fidelity					
24.	Surety					
26.	Burglary and theft					
27.	Boiler and machinery					
28.	Credit					
29.	International					
31.	Reinsurance-nonproportional					
	assumed property					
32.	Reinsurance-nonproportional					
	assumed liability					
33.	Reinsurance-nonproportional					
	assumed financial lines					
34	Aggregate write-ins for other lines					
<b>V</b> 1.	of husinoss					
35	TOTALS	185,495,369				185,495,369
•	Accrued retrospective premiums based on exp	•	I	1		100,400,000
	Formed but unbilled promiums					
	raneu ou unomeu diennunis					

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

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

# UNDERWRITING AND INVESTMENT EXHIBIT PART 1B – PREMIUMS WRITTEN

2   3   4   5	
Direct Business From Non- Affiliates Affiliates  1. Fire 2. Allied lines 372,016,601 3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liability—occurrence 11.2 Medical professional liability—claims-made 12. Earthquake	Written Cols. 1 + 2 + 3 - 4 - 5  444 277,922,157
Line of Business (a) Affiliates Affiliates Affiliates Affiliates  1. Fire 2. Allied lines 372,016,601 3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	Cols. 1 + 2 + 3 - 4 - 5
Line of Business (a) Affiliates Affiliates Affiliates Affiliates Affiliates  1. Fire 2. Allied lines 372,016,601 94,094, 3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	4 - 5 444 277,922,157
2. Allied lines 372,016,601 94,094, 3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
2. Allied lines 372,016,601 94,094, 3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liability—occurrence 11.2 Medical professional liability—claims-made 12. Earthquake	
3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
9. Inland marine 10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
10. Financial guaranty 11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
11.1 Medical professional liabilityoccurrence 11.2 Medical professional liabilityclaims-made 12. Earthquake	
11.2 Medical professional liabilityclaims-made  12. Earthquake	
12. Earthquake	
40. O	
13. Group accident and health	
13. Group accident and nearth	
14. Credit accident and health	
(group and individual)	
15. Other accident and health	
16. Workers' compensation	
17.1 Other liability—occurrence	
17.2 Other liability—claims-made	
17.3 Excess workers' compensation	
18.1 Products liability—occurrence	
40.0 Developed liability and a second	
40.4.40.0 PC at a constant to Eat Til	
10.3.10.4 Commoraid outs lisbility	
Od. Auto physical designs	
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 372,016,601 94,094,	444 277,922,157

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

(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 \$ 0	
	2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$	0

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

		Losses Paid	Less Salvage		5	6	7	8
Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4  Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire								
2. Allied lines	112,071,468		96,373	111,975,095	131,861,792	157,182,138	86,654,749	30.14
Farmowners multiple peril					1			
Homeowners multiple peril					1			
5. Commercial multiple peril			1		1			
6. Mortgage guaranty			1		1			
8. Ocean marine					1			
9. Inland marine								
10. Financial guaranty								
11.1 Medical professional liability—occurrence								
11.2 Medical professional liability—claims-made								
12. Earthquake								
13. Group accident and health								
Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation								
17.1 Other liability—occurrence								
17.2 Other liability—claims-made								
17.3 Excess workers' compensation								
18.1 Products liability—occurrence								
18.2 Products liability—claims-made								
9.1,19.2 Private passenger auto liability					1			
9.3,19.4 Commercial auto liability			l		1			
21. Auto physical damage			l		1			
22. Aircraft (all perils)			l		l			
23. Fidelity			[		[			
24. Surety								
26. Burglary and theft					1			
27. Boiler and machinery					1			
28. Credit					1			
29. International			[		1			
30. Warranty			[		1			
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	112,071,468		96,373	111,975,095	131,861,792	157,182,138	86,654,749	30.14
55. 1517125	112,011,400		00,010	111,070,000	101,001,102	101,102,100	00,007,170	30.14
	ı					T	1	
DETAILS OF WRITE-IN LINES								

DETAILS OF WRITE-IN LINES					
3401.					
3402.			1		
3403.		NUN			
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  1. Fire 2. Allied lines 3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liablity—occurrence 11.2 Medical professional liablity—claims-made 12. Earthquake 13. Group accident and health 14. Credit accident and health 15. Other accident and health	1 Direct 54,616,856	Reported 2  Reinsurance Assumed	Deduct Reinsurance Recoverable 7,695	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	Reinsurance Assumed	7 Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment
1. Fire 2. Allied lines 3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liablity—occurrence 11.2 Medical professional liablity—claims-made 12. Earthquake 13. Group accident and health 14. Credit accident and health (group and individual)			Reinsurance Recoverable	Losses Excl. Incurred But Not Reported	Direct		1	Unpaid	Adjustment
2. Allied lines 3. Farmowners multiple peril 4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liablity—occurrence 11.2 Medical professional liablity—claims-made 12. Earthquake 13. Group accident and health 14. Credit accident and health (group and individual)	54,616,856		7.695					(5515. 4 . 5 . 5 . 1)	Expenses
4. Homeowners multiple peril 5. Commercial multiple peril 6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liablity—occurrence 11.2 Medical professional liablity—claims-made 12. Earthquake 13. Group accident and health 14. Credit accident and health (group and individual)				54,609,161	77,273,511		20,880	131,861,792	37,268,229
6. Mortgage guaranty 8. Ocean marine 9. Inland marine 10. Financial guaranty 11.1 Medical professional liablity—occurrence 11.2 Medical professional liablity—claims-made 12. Earthquake 13. Group accident and health 14. Credit accident and health (group and individual)									
9. Inland marine 10. Financial guaranty 11.1 Medical professional liablity—occurrence 11.2 Medical professional liablity—claims-made 12. Earthquake 13. Group accident and health 14. Credit accident and health (group and individual)									
11.1 Medical professional liablity—occurrence 11.2 Medical professional liablity—claims-made 12. Earthquake 13. Group accident and health 14. Credit accident and health (group and individual)									
Earthquake     Group accident and health     Credit accident and health (group and individual)									
14. Credit accident and health (group and individual)								,,,	
15 Other accident and health								(a)	
16. Workers' compensation								(a)	
17.1 Other liability—occurrence 17.2 Other liability—claims-made 17.3 Excess workers' compensation									
17.3 Excess workers compensation  18.1 Products liability—occurrence  18.2 Products liability—claims-made									
19.1,19.2 Private passenger auto liability  19.3,19.4 Commercial auto liability									
21. Auto physical damage 22. Aircraft (all perils)									
23. Fidelity 24. Surety									
26. Burglary and theft 27. Boiler and machinery									
28. Credit 29. International									
30. Warranty 31. Reinsurance-nonproportional assumed property	XXX				XXX				
32. Reinsurance-nonproportional assumed liability 33. Reinsurance-nonproportional assumed financial lines					XXX				
34. Aggregate write-ins for other lines of business 35. TOTALS	XXX			'	XXX				

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

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

# UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		·			
		Loss Adjustment	Other Underwriting	Investment	Total
		Expenses	Expenses	Expenses	Total
1. Claim	adjustment services:				
1.1 [	Direct	9,901,057			9,901,057
	Reinsurance assumed				
	Reinsurance ceded	44,987			44,987
	Net claim adjustment services (1.1 + 1.2 - 1.3)	9,856,070			9,856,070
	nission and brokerage:				
	Direct, excluding contingent		59,474,929		59,474,929
	Reinsurance assumed, excluding contingent				
	Reinsurance ceded, excluding contingent		3,159,455		3,159,455
	Contingent—direct				
	Contingent—reinsurance assumed				
	Contingent—reinsurance ceded				
	Policy and membership fees				
	Net commission and brokerage (2.1 + 2.2 - 2.3 +		50.045.474		50.045.474
	2.4 + 2.5 - 2.6 + 2.7)		56,315,474		56,315,474
	ances to manager and agents				
4. Advert	<u> </u>		59,089		59,089
			170,254		170,254
	. C		1,526,833		1,526,833
	of assureds' records				
-	y and related items:	10 000 051	44 004 507		05.544.000
	Salaries	13,683,351	11,831,587		25,514,938
	Payroll taxes	189,003	651,012		840,015
	oyee relations and welfare	1,009,729	3,524,401		4,534,130
10. Insura		55,339	190,611		245,950
11. Directo	ors' fees	40.007			054.404
	l and travel items	43,067	208,037		251,104
	and rent items	733,767	3,464,785		4,198,552
14. Equipr		37,374	511,021		548,395
	or depreciation of EDP equipment and software		18,727		18,727
	ng and stationery	71,479	179,390		250,869
	ge, telephone and telegraph, exchange and express	285,776	1,139,383		1,425,159
_	and auditing	268,298	696,760		965,058
	(Lines 3 to 18)	16,377,183	24,171,890		40,549,073
	s, licenses and fees:				
	State and local insurance taxes deducting guaranty		0.044.240		0.044.240
	association credits of \$ 0  Insurance department licenses and fees		6,911,346		6,911,346
			71,050		71,050
			44.050		44.050
	All other (excluding federal and foreign income and real estate)  Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)		41,850		41,850
			7,024,246		7,024,246
	estate expenses				
	estate taxes pursements by uninsured plans				
	gate write-ins for miscellaneous expenses	509,510	4,903,180	2,386,866	7,799,556
	al aurana a la aurand	26,742,763	92,414,790	2,386,866	
			92,414,790	∠,300,000	(a) 121,544,419 47,229,773
	unpaid expenses—prior year	37,268,229 43,597,505	9,961,544		
	npaid expenses—prior year  nts receivable relating to uninsured plans, prior year		3,022,238		53,419,743
	nts receivable relating to uninsured plans, prior year nts receivable relating to uninsured plans, current year				
	L EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	33,072,039	92,275,484	2,386,866	127,734,389
JU. 101AI	LE LAI LINOLO I AID (LIIIGO 20 - 20 + 21 - 20 + 23)	33,012,039	32,213,404	2,300,000	121,134,309

DETAILS OF WRITE-IN LINES				
2401. IT Systems Support & Product Development	415,650	4,876,568		5,292,218
2402. Line of Credit Fees			1,022,222	1,022,222
2403. Bond Issuance Expense			563,706	563,706
2498. Sum of remaining write-ins for Line 24 from overflow page	93,860	26,612	800,938	921,410
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	509.510	4.903.180	2.386.866	7.799.556

(a) Includes management fees of \$ 0 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.		(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 8,895,492	8,612,545
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	8,895,492	8,612,545
11.	Investment expenses		(g) 2,386,866
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h) 28,342,875
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)		30,729,741
17.	Net investment income (Line 10 minus Line 16)		(22,117,196)
	DETAILS OF WRITE-IN LINES		
0001	DETAILS OF WAITE-IN LINES		

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

(a)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(b)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued dividends on purchases.
(c)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(d)	Includes \$	0 for company's occupancy of its own build	lings; and excludes \$ 0 intere	est 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, ex	cluding 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 ass	sets.

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

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

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

## **EXHIBIT OF NONADMITTED ASSETS**

		1	2	3
		Current Year Total Nonadmitted	Prior Year Total	Change in Total Nonadmitted Assets
		Assets	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 lines			
	3.2 Other than first lines			
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.				
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and accrued			
	Premiums and considerations:			
10.	45.4. Upon line to discovery and a control belongs to the accuracy of an illustration	139,953	129,038	(10,915)
	15.1 Uncollected premiums and agents balances in the course of collection  15.2 Deferred premiums, agents' balances and installments booked but deferred	1	120,000	(10,510)
	and not yet due			
	45.2 Assembly advantage and appropriate and ap			
16	Reinsurance:			
10.				
	16.2 Funds held by or deposited with reinsured companies			
47	16.3 Other amounts receivable under reinsurance contracts			
	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			40-46-
21.	Furniture and equipment, including health care delivery assets	652,549	777,988	125,439
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	3,304,407	3,325,360	20,953
26.	Total assets excluding Separate Accounts, Segregated Accounts and			
	Protected Cell Accounts (Lines 12 to 25)	4,096,909	4,232,386	135,477
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28.	Total (Lines 26 and 27)	4,096,909	4,232,386	135,477

DETAILS OF WRITE-IN LINES			
1101.			
1102.	l		
1103. N()N —	1		
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501. Member Assessment Receivable	2,199,241	2,199,241	
2502. Prepaid Assets	993,285	1,008,373	15,088
2503. Security deposit - lease	111,881	111,881	
2598. Summary of remaining write-ins for Line 25 from overflow page		5,865	5,865
2599 Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	3 304 407	3 325 360	20 953

#### Note 1 - Summary of Significant Accounting Policies

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

The accompanying financial statements of Texas Windstorm Insurance Association (The "Association" or "TWIA") 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 #	2019	2018
Company state basis (P 4, Line 20, Columns 1 & 2)     State Prescribed Practices that is an increase / (decrease) from NAIC SAP     State Permitted Practices that is an increase / (decrease) from NAIC SAP	XXX	XXX	XXX	\$ 96,948,605 - -	\$ 173,069,025 - -
4. NAIC SAP $(1-2-3=4)$	XXX	XXX	XXX	\$ 96,948,605	\$ 173,069,025

Surplus	SSAP#	F/S Page	F/S Line #	2019	2018
<ul><li>5. Company state basis (Page 3, Line 37, Columns 1 &amp; 2)</li><li>6. State Prescribed Practices that is an increase / (decrease) from NAIC SAP</li></ul>	XXX	XXX	XXX	(\$ 183,791,778)	(\$ 277,864,197)
<ul> <li>7. State Permitted Practices that is an increase / (decrease) from NAIC SAP</li> <li>8. NAIC SAP (5 - 6 - 7 = 8)</li> </ul>	20 XXX	2 XXX	5 XXX	82,016,050 (\$ 265,807,828)	92,573,713 (\$ 370,437,910)

TDI has granted the permitted practice to allow TWIA to admit the following restricted assets associated with the issuance of Series 2014 Pre-Event Class 1 Revenue Bonds ("Series 2014 bonds") as of December 31, 2019 (see Note 11 - Debt) to the extent that the assets do not exceed bond related liabilities. The detailed amounts are as follows:

• \$82,016,050 held in the obligation revenue fund for repayment of the Series 2014 bonds.

The obligation revenue funds are held in trust and restricted for future debt service obligations.

#### 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 accompanying footnotes. Actual results could differ from these estimates.

#### C. Accounting Policies

All policies issued by the Association have a maximum term of one year from date of issuance. Premiums earned are taken into income over the periods covered by the policies whereas the related acquisition costs are expensed when incurred. Unearned premiums, net of deductions for reinsurance, are computed on a pro-rata basis over the term of the policies.

In addition, the company uses the following accounting policies:

- Short-term investments are stated at amortized cost, which approximates market value. Reverse repurchase agreements are recorded in cash equivalents if the repurchase date is less than 90 days. Reverse repurchase agreements represent the purchase of a security with an agreement to resell.
- 2. through 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. Loss and loss adjustment expense reserves are based upon claim estimates for (1) losses for claims reported prior to the close of the accounting period, (2) losses incurred but unreported prior to the close of the accounting period, and (3) expenses for investigating and adjusting claims. Such liabilities are necessarily based on assumptions and estimates and while management believes the amounts are adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.

- 12. The Association has a written capitalization policy for prepaid expenses and purchases of items such as electronic data processing equipment, software, furniture, other equipment and leasehold improvements. The predefined capitalization thresholds under this policy have not changed from those of the prior year.
- 13. Not applicable as the Association does not write medical insurance with prescription drug coverage.

#### D. Going Concern

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

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

A. Material Changes in Accounting Principle

The Association prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Texas. Effective January 1, 2001, the State of Texas required that insurance companies domiciled in the State of Texas prepare their statutory basis financial statements in accordance with the NAIC *Accounting Practices and Procedures* manual subject to any deviations prescribed or permitted by the State of Texas insurance commissioner.

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 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
  - 1. Funds held by the Texas Treasury Safekeeping Trust Company ("TTSTC") on behalf of the Association are invested in overnight reverse repurchase agreements. These invested funds represent proceeds from the issuance of bonds in 2014 and include debt service payments. The funds are held at the TTSTC to be used for debt service and the payment of catastrophe loss and loss adjustment expense. See note 1 and note 11. The reverse repurchase agreements require collateral of at least 100% for Treasuries; 101% for Agencies and US Instrumentalities and 102% for mortgage-backed securities. The fair value of reverse repurchase agreements was \$82,016,050 and \$92,573,713 at December 31, 2019 and 2018, respectively.
  - 2. Type of Repo Trades Used

		1	2	3	4
		First Quarter	Second Quarter	Third Quarter	Fourth Quarter
a.	Bilateral (YES/NO)	NO	NO	NO	NO
ь.	Tri-Party (YES/NO)	YES	YES	YES	YES

3. Original (Flow) & Residual Maturity

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
a. Maximum Amount				
1. Open No Maturity	\$ -	\$ -	\$ -	\$ -
2. Overnight	97,958,183	106,359,024	61,591,416	82,016,050
3. 2 Days to 1 Week	-	-	-	-
4. > 1 Week to 1 Month	-	-	-	-
5. > 1 Month to 3 Months	-	-	-	-
6. > 3 Months to 1 Year	-	-	-	-
7. > 1 Year	-	-	-	-

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
b. Ending Balance				
1. Open No Maturity	\$ -	\$ -	\$ -	\$ -
2. Overnight	97,958,183	106,359,024	61,591,416	82,016,050
3. 2 Days to 1 Week	-	-	-	-
4. > 1 Week to 1 Month	-	-	-	-
5. > 1 Month to 3 Months	-	-	-	-
6. > 3 Months to 1 Year	-	-	-	-
7. > 1 Year	_	-	-	-

4. Counterparty, Jurisdiction and Fair Value (FV)

No Defaults, non applicable.

5. Securities Acquired Under Repo - Sale

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
a. Maximum Amount	XXX	XXX	XXX	\$ 82,016,050
1. BACV	XXX	X X X	X X X	\$ 82,016,050
2. Nonadmitted Subset of BACV	XXX	X X X	X X X	-
3. Fair value	\$ 97,958,183	\$ 106,359,024	\$ 61,591,416	\$ 82,016,050

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
b. Ending Balance	XXX	XXX	XXX	\$ 82,016,050
1. BACV	XXX	X X X	X X X	\$ 82,016,050
2. Nonadmitted Subset of BACV	XXX	X X X	X X X	-
3. Fair value	\$ 97,958,183	\$ 106,359,024	\$ 61,591,416	\$ 82,016,050

#### 6. Securities Acquired Under Repo – Sale by NAIC Designation

	1	2	3	4
Ending Balance	None	NAIC 1	NAIC 2	NAIC 3
a. Bonds BACV	-	-	-	-
b. Bonds FV	-	-	-	-
c. LB & SS BACV	-	-	-	-
d. LB & SS FV	-	-	-	-
e. Preferred Stock BACV	-	-	-	-
f. Preferred Stock FV	-	-	-	-
g. Common Stock	-	-	-	-
h. Mortgage Loans BACV	-	-	-	-
i. Mortgage Loans FV	-	-	-	-
j. Real Estate BACV	-	-	-	-
k. Real Estate FV	-	-	-	-
1. Derivatives BACV	-	-	-	-
m. Derivatives FV	-	-	-	-
n. Other Invested Assets BACV	-	\$ 82,016,050	-	-
o. Other Invested Assets FV	-	\$ 82,016,050	-	-
p. Total Assets BACV	-	\$ 82,016,050	-	-
q. Total Assets FV	=	\$ 82,016,050	-	-

	5	6	7	8
Ending Balance	NAIC 4	NAIC 5	NAIC 6	Nonadmitted
a. Bonds BACV	-	-	-	-
b. Bonds FV	-	-	-	-
c. LB & SS BACV	-	-	-	-
d. LB & SS FV	-	-	-	-
e. Preferred Stock BACV	-	-	-	-
f. Preferred Stock FV	-	-	-	-
g. Common Stock	-	-	-	-
h. Mortgage Loans BACV	-	-	-	-
i. Mortgage Loans FV	-	-	-	-
j. Real Estate BACV	-	-	-	-
k. Real Estate FV	-	-	-	-
1. Derivatives BACV	-	-	-	-
m. Derivatives FV	-	-	-	-
n. Other Invested Assets BACV	-	-	-	-
o. Other Invested Assets FV	-	-	-	-
p. Total Assets BACV	-	-	-	-
q. Total Assets FV	-	-	-	-

#### 7. Proceeds Provided - Sale

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
a. Maximum Amount				
1. Cash	\$ 97,958,183	\$ 106,359,024	\$ 61,591,416	\$ 82,016,050
2. Securities (FV)	-	-	-	-
3. Securities (BACV)	XXX	X X X	X X X	-
4. Nonadmitted Subset	XXX	XXX	XXX	\$ -

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
b. Ending Balance				
1. Cash	\$ 97,958,183	\$ 106,359,024	\$ 61,591,416	\$ 82,016,050
2. Securities (FV)	-	-	-	-
3. Securities (BACV)	X X X	X X X	X X X	-
4. Nonadmitted Subset	XXX	X X X	X X X	\$ -

#### 8. Recognized Forward Resale Commitment

	First Quarter	Second Quarter	Third Quarter	Fourth Quarter
a. Maximum Amount	\$ 97,958,183	\$ 106,359,024	\$ 61,591,416	\$ 82,016,050
b. Ending Balance	\$ 97,958,183	\$ 106,359,024	\$ 61,591,416	\$ 82,016,050

J. Real Estate

None

K. Low-Income Housing Tax Credits

None

#### L. Restricted Assets

1. Restricted assets (including pledged) are summarized by restricted asset category. Assets restricted below are held by the Texas Treasury Safekeeping Trust Company and are restricted for use for debt service reserves and for when a catastrophic event occurs. See note 1 and note 11. These assets are invested in overnight reverse repurchase agreements.

	Gross (Admitted & Nonadmitted) Restricted							Currer	nt Year		
			Current Year							Percentage	
	1	2	3	4	5	6	7	8	9	10	11
Restricted Asset Category	Total General Account (G/A)	G/A Supporting S/A Restricted Assets (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase / (Decrease) (5 minus 6)	Total Non-admitted Restricted Restricted (5 minus 8)		Gross (Admitted & Non- admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. to c. None  d. Subject to reverse repurchase  e. to n. None	\$82,016,050				\$82,016,050	\$92,573,713	(\$10,557,663)	\$ -	\$82,016,050	13.44%	13.53%
o. Total restricted assets	\$82,016,050				\$82,016,050	\$92,573,713	(\$10,557,663)	\$ -	\$82,016,050	13.44%	13.53%

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28
- 2. Detail of assets pledged as collateral not captured in other categories (reported on line m above)

None

3. Detail of other restricted assets (reported on line n above)

None

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

None

M. Working Capital Finance Investments

None

N. Offsetting and Netting of Assets and Liabilities

None

O. 5GI\* Securities

None

P. Short Sales

None

Q. Prepayment Penalty and Acceleration Fees

None

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

Not applicable

#### Note 7 – Investment Income

A. Accrued Investment Income

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

B. Amounts Non-Admitted

None

#### Note 8 - Derivative Instruments

Not applicable

#### Note 9 – Income Taxes

In 2010, Texas Windstorm Insurance Association (The "Association") applied for and received a Private Letter Ruling ("PLR") from the Internal Revenue Service. The PLR requested acknowledgement that the Association's income is derived from an essential governmental function which accrues to a state or political subdivision and is therefore excluded from gross income under Section 115(1) of the Internal Revenue Code ("IRC"). On August 17, 2010, the Internal Revenue Service ruled that the Association performs an essential government function and that income from that function is excluded from gross income under IRC Section 115(1).

The Association had been filing form 1120-PC tax returns with the Internal Revenue Service as a property and casualty insurance company. Under the Internal Revenue Code the statute of limitations to be assessed additional taxes or to file amended tax returns is 3 years from the later of the due date of the return (including extensions) or the filing date of the return. There are existing net operating loss carryforwards in open tax years that are not anticipated to be realized. No further federal income tax impact is expected in the future.

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

A. Nature of Relationships

Pursuant to the Association's Plan of Operation, the Board of Directors consists of nine voting members appointed by the Commissioner of Insurance. The nine-member Board includes three public members residing in the first tier coastal counties and representing certain regions of the catastrophe area, three non-coastal representatives residing more than 100 miles from the coast, and three industry representatives actively writing and renewing windstorm and hail insurance in the first tier coastal counties. As of December 31, 2019, there were two vacant positions on the Board of Directors including a first tier coastal representative and an industry representative.

On October 10, 2002, the Commissioner of Insurance in Texas enacted Article 21.49A of the Texas Insurance Code implementing the Texas FAIR Plan Association. The Commissioner instructed the Texas Windstorm Insurance Association to manage the FAIR Plan.

B. Detail of Transactions Greater than ½% of Admitted Assets

None

C. Change in Terms of Intercompany Arrangements

None

D. Amounts Due to or from Related Parties

During 2019 and 2018 the Association made expenditures on behalf of the Texas FAIR Plan Association ("the Plan") under its management contract and was reimbursed \$14,133,008 and \$13,786,972, respectively. As of December 31, 2019 and 2018, the Association held an intercompany admitted receivable of \$1,075,625 and \$1,029,066, respectively. This arrangement is subject to a written agreement which requires that balances be settled within 30 days.

E. Guarantees or Undertakings for Related Parties

Not applicable

F. Management, Service Contracts, Cost Sharing Arrangements

During 2002, the Association entered into a service contract with the Texas Fair Plan Association (the "Plan") in which the Association is to be fully reimbursed for all expenditures, professional fees, consulting services, allocated employee time, lost investment income and other costs directly associated with the services provided by the Association on behalf of the Plan.

G. Nature of Relationships that Could Affect Operations

None

H. Amount Deducted for Investment in Upstream Company

Not applicable

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

Not applicable

J. Write-downs for Impairment of Investments in Affiliates

Not applicable

K. Foreign Insurance Subsidiary Valued Using CARVM

Not applicable

L. Downstream Holding Company Valued Using Look-Through Method

Not applicable

M. All SCA Investments

Not applicable

N. Investment in Insurance SCAs

Not applicable

O. SCA or SSAP No. 48 Loss Tracking

Not applicable

#### Note 11 – Debt

A. The Texas Public Finance Authority (the "Authority" or the "Issuer") has issued the Texas Public Finance Authority Class 1 Revenue Bonds (Texas Windstorm Insurance Association Program), Taxable Series 2014 (the "Bonds") on behalf of TWIA for the purpose of financing future costs in the amount of \$500,000,000. The Bonds are issued pursuant to a master resolution adopted by the Board of Directors of the Authority (the "Board") on September 24, 2014 (the "Master Resolution"), and a first supplemental resolution adopted by the Board on September 24, 2014 (the "First Supplemental Resolution", and together with the Master Resolution, the "Resolutions"). The Bonds constitute the initial series of Class 1 Public Securities of the Authority secured and payable from Class 1 Pledged Revenues irrevocably pledged under the Resolutions. TWIA has pledged the Class 1 Pledged Revenues to the Authority pursuant to a Financing and Pledge Agreement dated as of September 1, 2014 between the Authority and TWIA.

The secured Bonds were issued on September 30, 2014 for \$500,000,000 of which \$318,600,000 and \$368,500,000 was outstanding as of December 31, 2019 and 2018, respectively. The bonds mature July 1, 2024 and can be redeemed in whole or in part by the Seller beginning July 1, 2019. The original Bonds bear interest from 5.25% to 8.25% with an effective interest rate of 8.03%. Interest is payable semi-annually on January 1 and July 1 with the first payment made January 1, 2015. The Bonds are secured by TWIA's net premium and other revenue which is used to fund the Debt Service and related accounts held by the Texas Treasury Safekeeping Trust Company.

There are various general and special covenants. The primary covenant, which exists as long as there are outstanding Class 1 Public Securities and Administrative Expenses are incurred, states that TWIA will take actions that produce Projected Net Coverage Revenues in an amount not less than 1.25 times the Obligations due in the next calendar year and 1.25 times the estimated amount of Administrative Expenses due in the next calendar year. Another covenant, which exists as long as the Bonds are outstanding, states that TWIA will maintain the Operating bank account subject to a deposit account control agreement to maintain a perfected security interest in the Net Premiums and Other Revenue held for the benefit of the Bondholders. The deposit account control agreement is activated upon default of the debt covenants. As of both December 31, 2019 and 2018, TWIA is in compliance with these and all other covenants.

The Bonds were subject to optional make-whole redemption, in whole or in part, at the option of the Authority, at the request of TWIA prior to July 1, 2019 at a redemption price equal to the greater of (i) 100% of the principal amount of the Bonds to be redeemed or (ii) the sum of the present values of the remaining schedule payments of principal and interest on the Bonds to be redeemed (exclusive of interest accrued to the date fixed for redemption) discounted to the date of redemption on a semiannual basis (assuming a 360-day year consisting of twelve 30-day months) at the Treasury Rate plus 100 basis points, plus in each case, accrued and unpaid interest on the Bonds being redeemed to the date fixed for redemption.

The Bonds are also subject to optional redemption prior to maturity on or after July 1, 2019, in whole or in part, at a redemption price equal to the principal amount of Bonds to be redeemed plus accrued interest to the date of redemption.

At December 31, 2019 and 2018, the notes had no unamortized premium or discount. Bond issuance costs are expensed as incurred.

Interest expense incurred is recorded as an investment expense and was \$28,342,875 and \$32,302,875 for the years ended December 31, 2019 and 2018, respectively. Interest expense of \$30,401,250 and \$34,204,500 was paid for the years ended December 31, 2019 and 2018, respectively.

Changes in bonds payable for the year ending December 31, 2019:

Description	Bonds Outstanding December 31, 2018	Bonds	Issued 1		Bonds Matured	Bonds Outstanding December 31, 2019
Taxable						
Series 2014	\$ 368,500,000	\$	-	\$	49,900,000	\$ 318,600,000

The schedule of aggregate maturities for the next five years and thereafter is as follows:

Year	Amount
2020	54,000,000
2021	58,500,000
2022	63,300,000
2023	68,600,000
2024	74,200,000
Thereafter	-
On Demand	-
Total	\$ 318,600,000

The Association has obtained a \$500,000,000 committed line of credit with two of its primary financial institutions during 2019. The line of credit agreement was entered into July 1, 2019 subsequent to the Association's board of directors approval on May 7, 2019. No amounts were drawn against the line of credit. Issuance fees for the committed line of credit were \$500,000 and the Association pays the lenders a 0.4% commitment fee against the unused portion of the line of credit. The commitment originally matured May 27, 2020, however the line of credit was terminated by the Association as of December 26, 2019 without penalty.

#### 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

The Association has a defined benefit pension plan, which covers employees from their date of hire, if the employee is scheduled to work at least 1,000 hours in a twelve-month period. Pension benefits are based on years of service and the employee's compensation during the five highest consecutive years' earnings from the last ten years of employment. An employee's benefits vest 5 years from date of hire. The Association makes contributions to the plan that comply with the minimum funding provisions of the Employee Retirement Income Security Act. As of December 31, 2019, the Association accrued in accordance with actuarially determined amounts with an offset to the pension cost accrual for the incremental asset amortization.

A summary of assets, obligations and assumptions of the Pension Plan are as follows at December 31, 2019 and 2018:

1	C1		1 0.	1 1'	. •
1.	Change	ın	benefit	obliga	ation:

1.	Change in benefit congation.	<u>Under</u> 1	unded .
		2019	2018
	Benefit obligation at beginning of year	\$ 22,936,583	
	Service cost		1,969,431
	Interest cost		883,412
	Contribution by plan participants	-	_
	Actuarial loss/(gain)	5,887,877	(2,794,860)
	Foreign currency exchange rate changes	-	-
	Benefits paid	(597,262)	(578,143)
	Plan Amendments	-	-
	Business combinations, divestitures,		
	curtailments, settlements and special		
	termination benefits	-	-
_	Benefit obligation at end of year	\$ 30,989,299	\$ 22,936,583
2.	Change in Pension plan assets:		
	Change in Pension plan assets.	<u>2019</u>	<u>2018</u>
	Fair value of plan assets at beginning of year	\$ 16 171 021	\$ 15,597,374
	Actual return/(loss) on plan assets		(1,028,514)
	Foreign currency exchange rate changes	5,011,007	(1,020,311)
	Employer contributions	2 359 776	2,180,304
	Plan participants' contributions	2,337,770	2,100,504
	Benefits paid	(597.262)	(578,143)
	Business combinations, divestitures and settlements	(377,202)	(370,143)
	Fair value of plan assets at end of year	\$ 21,547,602	\$ 16,171,021
	Tun value of plan assets at end of your	ψ 21,5 17,002	Ψ 10,171,021
3.	Funded status:		
	_	<u>2019</u>	<u>2018</u>
	Components:		
	Prepaid benefit costs	\$ -	\$ -
	Overfunded plan assets	-	-
	Accrued benefit costs		2,889,560
	Liability for pension benefits	6,887,665	3,876,002
	Assets and liabilities recognized		
	Assets and habilities recognized Assets (nonadmitted)		
	Liability recognized	9,441,697	6,765,562
	Liability recognized	9,441,097	0,703,302
	Unrecognized liabilities	\$ -	\$ -
1	Commonwell of make and the bounds of another		
4.	Components of net periodic benefit costs:	<u>2019</u>	<u>2018</u>
	Service cost	\$ 1,731,374	\$ 1,969,431
	Interest cost	1,030,727	883,412
		(932,793)	
	Expected return on plan assets Transition asset or obligation	(932,193)	(900,254)
		150 501	264.500
	(Gains) and losses amortization	150,581	
	Prior service cost or (credit)	44,359	44,359
	(Gain) or loss recognized due to settlement or curtailment	\$ 2,024,248	\$ 2,261,536
	Total net periodic benefit cost	\$ 2,024,246	\$ 2,201,330
5.	Amounts in unassigned funds (surplus) recognized as components of		
	net periodic benefit cost		
		<u>2019</u>	<u>2018</u>
	Items not yet recognized as a component of net periodic cost – prior year	\$ 3,876,002	\$ 5,051,041
	Net transition asset or obligation recognized	_	_
	Net prior service cost or (credit) arising during the period	_	_
	Net prior service cost or (credit) arising during the period  Net prior service cost or (credit) recognized	(44,359)	(44,359)
	Net (gain) and loss arising during the period	3,206,603	(866,092)
	Net loss/(gain) recognized	(150,581)	(264,588)
	Items not yet recognized as a component of net periodic cost –	\$ 6,887,665	\$ 3,876,002
	current year	+ 0,007,000	,0,0,002
	•		

6. Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost:

	<u>2019</u>			<u> 2018</u>
Net transition asset or obligation	\$	-	\$	-
Net prior service cost or (credit)	3	11,306		355,665
Net recognized (gains) and losses	6,5	76,359	3	3,520,337

7. Weighted-average assumptions used to determine net periodic benefit cost as of December 31:

	<u>2019</u>	<u>2018</u>
Weighted-average discount rate	4.50%	3.75%
Expected long-term rate of return on plan assets	5.50%	5.50%
Rate of compensation increase	2.50%	2.50%
Interest crediting rates	n/a	n/a
Weighted-average assumptions used to determine projected benefit		
obligations as of December 31:		
Weighted-average discount rate	3.50%	4.50%
Rate of compensation increase	2.50%	2.50%
Interest crediting rates	n/a	n/a

- 8. The amount of accumulated benefit obligation for defined benefit pension plans was \$27,626,057 for the current year and \$20,318,912 for the prior year.
- 9. Postretirement Benefits or Special or Contractual Benefits Per SSAP No. 11

Not applicable

10. The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated:

<u>Years</u>	<u>Amount</u>
2020	\$ 695,167
2021	767,504
2022	860,762
2023	975,359
2024	1,085,469
2025 through 2029	7,111,218

11. The Company expects to contribute \$2,568,240 during 2020.

12 to 18 Not applicable

B. Description of Investment Policies

The investment policy is de-risk investments as the funding ratio grows and exceeds 100%.

C. (1) Fair Value Measurements of Plan Assets at Reporting Date:

Description for each class of plan assets	<u>(Level 1)</u>	(Level 2)	(Lev	<u>el 3)</u>	<b>Total</b>
Cash	\$ -	\$ 81,231	\$	-	\$ 81,231
Small Cap Equity	649,652	-		-	649,652
Large Cap Equity	4,792,507	-		-	4,792,507
Mid Cap Equity	1,467,503	-		-	1,467,503
International Equity	-	2,401,733		-	2,401,733
Realty Fund		1,300,467			1,300,467
Fixed Income	-	10,852,204		-	10,852,204
Limited Partnerships	=	-		2,305	2,305
Total Plan Assets	\$ 6,909,662	\$ 14,635,635	\$	2,305	\$ 21,547,602

#### D. Rate of Return Assumptions

The plan seeks to be diversified while trying to maximize investment return.

#### E. Defined Contribution Plan

The Association maintains a defined contribution 401(k) plan available to eligible employees after 6 months of continuous service. Matching contributions totaling \$949,000 and \$819,000 before allocated to FAIR Plan were made for fiscal years ending December 31, 2019 and 2018, respectively. The Association's portion was approximately \$645,000 for the current year and \$553,000 for 2018.

#### 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 1993, the Texas legislature created the Catastrophe Reserve Trust Fund ("CRTF"). At the end of each year and pursuant to administrative rules, the Association shall deposit the net gain from operations of the Association in excess of incurred losses, operating expenses, public security obligations, and public security administrative expenses into the CRTF and/or purchase reinsurance. In addition, pursuant to Tex. Ins. Code §2210.259, a surcharge is charged on non-compliant structures insured by the Association, and these surcharges are deposited monthly into the CRTF.

When there is an occurrence or series of occurrences in a catastrophe area, the Association shall pay losses in excess of premium and other revenue of the Association from available reserves of the Association and available amounts in the CRTF. Administrative rules adopted by the commissioner of insurance establish the procedures relating to the disbursement of money from the CRTF.

The Texas Comptroller of Public Accounts ("comptroller") administers the CRTF in accordance with Tex. Ins. Code, Chapter 2210. All money, including investment income, deposited in the CRTF, are state funds to be held by the comptroller outside the state treasury on behalf of, and with legal title in, the TDI until disbursed as provided by the Tex. Ins. Code, Chapter 2210 and administrative rules adopted by the TDI under the Association's Plan of Operation.

The CRTF may be terminated only by law. On termination of the CRTF, all assets of the CRTF revert to the state of Texas to provide funding for the mitigation and preparedness plan established under Tex. Ins. Code, §2210.454.

For the years ending December 31, 2019 and December 31, 2018, statutory fund costs were \$52,641,201 and \$110,589,883, respectively, based on the TDI's interpretation of the relevant statutes. TDI's directive requires the Association to determine its net gain from operations based on catastrophe-year incurred losses, rather than calendar year reported losses. Starting at the end of calendar year 2018, the Association is required to use the net gain from operations of the Association to make payments to the CRTF, procure reinsurance, or use alternative risk financing mechanisms. Although amounts held in the CRTF are not presented as an asset in the statutory statements of admitted assets, liabilities, surplus and other funds, once contributed to the CRTF, these funds are held in trust with the TTSTC and will be available for the exclusive use of the Association to pay losses and expenses of the Association as permitted by law. The December 31, 2018 payable to the CRTF of \$110,589,883 was remitted to the TTSTC on March 29, 2019.

In August 2017, Hurricane Harvey struck the Texas Coast and impacted the Association. Ultimate loss and loss adjustment expenses from Hurricane Harvey are estimated to be approximately \$1,700,000,000. Texas Insurance Code 2210 allows the Association to assess member companies Class 1 member assessments up to \$500,000,000. A Class 1 member assessment was approved by the Commissioner of the Texas Department of Insurance on May 25, 2018 for \$175,000,000, a second assessment on August 29, 2018 for \$106,819,778 and a third assessment of \$90,000,000 on January 10, 2020 for a combined total of \$371,819,778. As of December 31, 2019, \$279,620,537 has been collected from the first two assessments. The third assessment was billed on February 13, 2020 with monies due in March 2020. One insurance group has disputed their participation of a 2018 assessment in the amount of \$2,199,241 which has been non-admitted as of December 31, 2019. Any uncollected assessment can be reallocated to other carriers if the dispute is resolved in favor of this group. Further assessments will be requested if needed as Hurricane Harvey paid loss development matures. As of December 31, 2019, the Association had a deficit surplus of \$183,791,778.

#### Note 14 – Liabilities, Contingencies and Assessments

#### A. Capital Commitments

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

B. Assessments

Not applicable

C. Gain Contingencies

Not applicable

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

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

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

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

(a)	00-25	(b)	26-50	(c)	51-100	(d)	101-500	(e)	More than
	Claims		Claims		Claims		Claims		500 Claims
	X								

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

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

E. Product Warranties

Not applicable

F. Joint and Several Liabilities

Not applicable

G. Other Contingencies

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

#### Note 15 – Leases

- A. Lessee Leasing Arrangements
  - 1. The Association leases office space under a non-cancelable operating lease agreement that expires in 2022. Rental expense for the current year and the prior year was approximately \$1,422,000 and \$1,453,000 respectively. The Association's portion was approximately \$924,000 for the current year and \$944,000 for prior year.
  - 2. At December 31, 2019, the minimum aggregate rental commitments are as follows:

<u>Years</u>	<u>Amount</u>
2020	1,035,702
2021	1,062,027
2022	1,088,352
2023	-
<u>Thereafter</u>	<del>_</del>
Total	\$ 3,186,081

- 3. The Association has not entered into any sale or leaseback arrangements.
- B. Lessor Leasing Arrangements

Not applicable

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

Not applicable

#### Note 17 - Sales, 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 assets and liabilities that are financial instruments. The fair values are also categorized into the three-level fair value hierarchy. Cash, cash equivalents and short-term investments are the only financial instruments held by the Association.

Type or Class of Financial	Aggregate Fair	Admitted					Net Asset	Practica (Carry	able ing
Instrument	<u>Value</u>	<u>Assets</u>	Level 1	Level 2	Lev	<u>el 3</u>	Value (NAV)	<u>Value</u>	<u>e)</u>
Cash, cash equivalents and									
short-term investments	\$ 209,839,812	\$ 209,839,812	\$ 209,839,812	\$	- \$	-	\$ -	\$	-
Exempt Money Market Mutual									
Funds – as Identified by SVO	222,755,260	222,755,260	-		-	-	222,755,260		-
All Other Money Market Mutual									
Funds	82,016,050	82,016,050	82,016,050		-	-	-		-
Total Cash, cash equivalents and									
short-term investments	\$ 514.611.122	\$ 514.611.122	\$ 291.855.862	\$	- \$	_	\$ 222,755,260	\$	_

Not

D. Items for which Not Practicable to Estimate Fair Values

Not applicable

#### Note 21 – Other Items

A. Unusual or Infrequent Items

See Note 13

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

The Association has ceded risks under an excess of loss agreement to a reinsurer during 2019 and 2018 who in-turn issued Catastrophe Bonds ("CAT Bonds"). Funds from the issuance of the CAT Bonds are held in trust. Certain events can bring rise to the Association to recover on ceded losses.

Management of Risk Related To:	Number of Outstanding Contracts	Aggregate Maximum Proceeds
(1) Directly Written Insurance Risks		
a. ILS Contracts as Issuer	-	-
b. ILS Contracts as Ceding Insurer	3	\$1,000,000,000
c. ILS Contracts as Counterparty	-	-
(2) Assumed Insurance Risks		
a. ILS Contracts as Issuer	-	-
b. ILS Contracts as Ceding Insurer	-	-
c. ILS Contracts as Counterparty	_	-

#### Note 22 – Events Subsequent

The Association has evaluated subsequent events occurring after December 31, 2019, the date of the most recent balance sheet, through the issuance of the financial statements.

#### Type I. Recognized Subsequent Events:

In June of 2019, the Association increased loss and loss adjustment expense reserves related to Hurricane Harvey in the amount of \$90 million. In accordance with Texas Insurance Code Chapter 2210, the Association is permitted to assess member companies to fund these additional loss amounts with the approval of the Commissioner of the Texas Department of Insurance ("the Texas Commissioner"). The Company recorded the member assessment revenue of \$90 million and the related assessment receivable as of December 31, 2019 and received approval from the Texas Commissioner on January 10, 2020. (See Note 13) Monies from the assessment are anticipated to be collected in March 2020.

#### Type II. Nonrecognized Subsequent Events:

As discussed in Note 11 – Debt, the outstanding Texas Public Finance Authority Class 1 Revenue Bonds issued on behalf of the Association, are subject to optional redemption prior to maturity on or after July 1, 2019 at a redemption price equal to the principal amount of bonds to be redeemed plus accrued interest to the date of redemption. On February 18, 2020 the Association Board of Directors approved an early redemption in the amount of \$45 million and directed Association staff to request approval from the Texas Commissioner. On February 24, 2020 the Association received approval from the Texas Commissioner to redeem the requested \$45 million of bond principal. The redemption is anticipated to be completed during the second quarter of 2020.

The Association does not write health insurance and is not subject to assessment under section 9010 of the Affordable Care Act.

#### **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.

NAIC Code	Federal ID#	Name of Reinsurer	Amount
10969	59-5360143	United Property & Casualty Insurance Company	3,000

#### 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.

	Total Amount in Dispute		Status of Dispute			
Name of Reinsurer	(Including IBNR)	Notification	Arbitration	Litigation		
NONE						

#### C. Reinsurance Assumed and Ceded

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

	Assu	Assumed		ded	Assumed Less Ceded			
	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity	Unearned Premiums	Commission Equity		
a. Affiliates								
b. All other								
c. Totals								
d. Direct Unea	d. Direct Unearned Premium Reserve \$185,495,369							

- 2. No accrual exists at the end of the current year 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 Downgrades or Status Subject to Revocation

Not applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable

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

Not applicable

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

Current year changes in estimates of the costs of prior year losses and loss adjustment expenses A. (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 \$113,397,512 are higher by \$86,946,237 due to net unfavorable development of prior year estimates, primarily due to an increase in Hurricane Harvey development. The Association was impacted by Hurricane Harvey in 2017. Ultimate loss and loss adjustment expenses from Hurricane Harvey are estimated to be approximately \$1,700,000,000 as of December 31, 2019, an increase of \$90,000,000 from December 31, 2018 due to the severity of claims development. 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 as of December 31, 2019 make a reasonable provision for the Association's claims liabilities.

Rollforward of unpaid losses and LAE	2019	2018
Balance as of January 1,	\$200,857,903	\$415,213,261
Less: Reinsurance Recoverable	78,260	478,995
Net Balance at January 1,	200,779,643	414,734,266
Incurred, net of reinsurance, related to:		
Current year	26,451,275	19,442,605
Prior years	86,946,237	156,555,247
Net Incurred	113,397,512	175,997,852
Paid, net of reinsurance, related to:		
Current year	(19,915,729)	(14,070,091)
Prior years	(125,131,405)	(375,882,384)
Net Paid Losses	(145,047,134)	(389,952,475)
Net Balance at December 31,	169,130,021	200,779,643
Plus: Reinsurance Recoverable	67,973	78,260
Balance at December 31,	\$ 169,197,994	\$ 200,857,903

#### 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, 2019.

#### Note 31 – High Deductibles

Not applicable

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

Not applicable

#### Note 33 – Asbestos and Environmental Reserves

A hearing was held on January 8, 2003, for the purpose of making changes to T.W.I.A. policies. A petition was heard to clarify T.W.I.A's exclusion for mold coverage. T.W.I.A. policies do not cover loss due to mold damage, and the clarification verbiage was added to all of its policies, i.e., residential, commercial, and mobile home. Approval of the petition became effective March 1, 2003.

#### Note 34 – Subscriber Savings Accounts

Not applicable

#### Note 35 - Multiple Peril Crop Insurance

Not applicable

#### Note 36 - Financial Guaranty Insurance

A. and B. Not applicable

#### PART 1 - COMMON INTERROGATORIES

#### **GENERAL**

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

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

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

if app	licable) suspen	ded or revoked by any governmental entity during the	e reporting period?			s[]No[X	
! If yes	, give full inform	nation:					
Does	any foreign (no	n-United States) person or entity directly or indirectly	control 10% or more of the reporting enti	ity?	Yes	s[]No[X	1
		, , , , , ,					
If yes	, 7.21	State the percentage of foreign control.					
	7.22	State the nationality(s) of the foreign person(s) or e	entity(s); or if the entity is a mutual or		_		
		reciprocal, the nationality of its manager or attorne	y-in-fact and identify the type of entity(s)				
		(e.g., individual, corporation, government, manage	r or attorney-in-fact).				
		1	2				
		Nationality	Type of Entity				
-							
Is the	company a sul	osidiary of a bank holding company regulated by the	Federal Reserve Board?		Yes	s[]No[X	]
If resp affiliat of the	ponse to 8.3 is tes regulated by Comptroller of	yes, please provide the names and locations (city and a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal regulatory.	d state of the main office) of any he Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities	ice	Yes	s[]No[X	1
If resp affiliat	ponse to 8.3 is tes regulated by Comptroller of	yes, please provide the names and locations (city and a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal research	d state of the main office) of any ne Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.	I	ı		
If resp affiliat	ponse to 8.3 is tes regulated by Comptroller of	yes, please provide the names and locations (city and a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance	d state of the main office) of any he Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities	ice	Yes	s[] No[X	]
If resp affiliat	ponse to 8.3 is tes regulated by Comptroller of	yes, please provide the names and locations (city and a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal results.	d state of the main office) of any he Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.	I	ı		
If resp affiliat	ponse to 8.3 is tes regulated by Comptroller of	yes, please provide the names and locations (city and a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal real form	d state of the main office) of any he Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.  2 Location	3	4	5	6
If resp affiliat of the	ponse to 8.3 is tes regulated by Comptroller of	yes, please provide the names and locations (city and a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal real form	d state of the main office) of any he Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.  2 Location	3	4	5	6
4 If resp affiliat of the Excha	tes regulated by Comptroller of ange Commissi	yes, please provide the names and locations (city and a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal in the Affiliate Name	d state of the main office) of any ne Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.  2 Location (City, State)	3	4	5	6
If respatified of the Excha	tes regulated by Comptroller of ange Commissi	yes, please provide the names and locations (city any a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal regulatory.  1 Affiliate Name  d address of the independent certified public accountudit?	d state of the main office) of any ne Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.  2 Location (City, State)	3	4	5	6
If resp affiliat of the Excha	is the name an act the annual act the annual act the insurer beer	yes, please provide the names and locations (city any a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal regulatory and identify the affiliate sprimary federal regulatory.  1 Affiliate Name  d address of the independent certified public account audit?  Matza; 9500 Arboretum Blvd., Suite 120, Austin, TX	d state of the main office) of any he Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.  2 Location (City, State)  tant or accounting firm retained to 78759	3 FRB	4	5	6
I If resp affiliat of the Excha	is the name an uct the annual abun Thomson &	yes, please provide the names and locations (city any a federal financial regulatory services agency [i.e. the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal regular for the Affiliate Name  d address of the independent certified public account udit?  Matza: 9500 Arboretum Blvd., Suite 120, Austin, TX	d state of the main office) of any he Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.  2 Location (City, State)  tant or accounting firm retained to 78759	3 FRB	4 OCC	5	6 SEC
If resp affiliat of the Excha What conductable Calho Audit	is the name an uct the annual a bun Thomson & accountant rec	yes, please provide the names and locations (city and a federal financial regulatory services agency [i.e. to the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal regulatory.  1 Affiliate Name  d address of the independent certified public accountudit? Matza; 9500 Arboretum Blvd., Suite 120, Austin, TX granted any exemptions to the prohibited non-audit quirements as allowed in Section 7H of the Annual Figure	d state of the main office) of any he Federal Reserve Board (FRB), the Offi Corporation (FDIC) and the Securities egulator.  2 Location (City, State)  tant or accounting firm retained to 78759	3 FRB	4 OCC	5 FDIC	6 SEC

10.3	Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?	Yes[]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?	
	Xiuyu Li, 5700 S MoPac Expy, Austin, TX 78749, In-house Actuary	
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes[] No[X]
	12.11 Name of real estate holding company 12.12 Number of parcels involved	
	12.13 Total book/adjusted carrying value	\$
12.2	If yes, provide explanation:	
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:	
13.1	What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?	
13 2	Does this statement contain all business transacted for the reporting entity through its United States Branch on	
	risks wherever located?	Yes[] No[]
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes[] No[]
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes[] No[] N/A [X]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?  a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  c. Compliance with applicable governmental laws, rules, and regulations;	
	<ul> <li>d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and</li> <li>e. Accountability for adherence to the code.</li> </ul>	Yes [X] No []
4.11	If the response to 14.1 is no, please explain:	

14.2	Has the code of ethics for senior managers be	een amended?		Yes[]No[X]
1.21	If the response to 14.2 is yes, provide informa	tion related to amendment(s)	).	
143	Have any provisions of the code of ethics bee	n waived for any of the speci	fied officers?	Yes[]No[X]
14.5	Trave any provisions of the code of entics bee	in waived for any or the speci	ileu viliceis:	res[]NO[X]
4.31	If the response to 14.3 is yes, provide the natu	ure of any waiver(s).		
	Is the reporting entity the beneficiary of a Lette confirming bank is not on the SVO Bank List?	er of Credit that is unrelated t	to reinsurance where the issuing or	Yes[] No[X]
	If the response to 15.1 is yes, indicate the Am issuing or confirming bank of the Letter of Cre is triggered.			
1				I
	1 American	2	3	4
	Bankers			
	Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
	Does the reporting entity keep a complete per subordinate committees thereof?			Yes[X] No[]
	Has the reporting entity an established proced interest or affiliation on the part of any of its of is likely to conflict with the official duties of suc	ficers, directors, trustees or r	-	Yes[X] No[]
		F	INANCIAL	
	Has this statement been prepared using a bas Generally Accepted Accounting Principles)?	sis of accounting other than S	Statutory Accounting Principles (e.g.,	Yes[]No[X]
20.1	Total amount loaned during the year (inclusive			
			directors or other officers stockholders not officers	\$ \$
			ustees, supreme or grand (Fraternal only)	\$
20.2	Total amount of loans outstanding at the end	of year (inclusive of Separate	e Accounts, exclusive of policy loans):	
			directors or other officers	\$\$
			stockholders not officers ustees, supreme or grand (Fraternal only)	\$ \$
				<u> </u>
	Were any assets reported in this statement su liability for such obligation being reported in th	-	ion to transfer to another party without the	Yes[]No[X]
21.2	If yes, state the amount thereof at December 3	· ·		
			ented from others prowed from others	\$
			ased from others	\$ \$
		21.24 Ot	her	\$

22.1	Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?	Vog [ ] No [ V ]
	guaranty fund of 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 [X] No []
23.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	\$
	INVESTMENT	
	INVESTMENT	
24.01	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 24.03)	Yes[] No[X]
24 02	If no, give full and complete information, relating thereto:	
	The Association invests in overnight reverse repurchase agreements with the Texas Treasury Safekeeping Trust Company  These invested funds were received during the issuance of bonds during 2014. The funds are held at the TTSTC to be used for debt service and for use when a catastrophic event occurs. See note 1 and note 11	
24.03	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)	
	Texas Windstorm Insurance Association does not have a security lending program.	
24.04	Does the company's security lending program meet the requirements for a conforming program as outlined in the	
	Risk-Based Capital Instructions?	Yes[] No[] N/A [X]
24.05	If answer to 24.04 is yes, report amount of collateral for conforming programs.	\$
		•
24.06	If answer to 24.04 is no, report amount of collateral for other programs.	\$
24.07	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]
24.08	Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?	Yes[] No[] N/A [X]
	, January	( ) ( ) (v)
24.09	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]
24.10	For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:	
	24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
	2-1101 Total fall Value of Folimostica collateral assets reported off softedule DL, Falls Talla 2	\$
	24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
	24.103 Total payable for securities lending reported on the liability page	\$
9E 4	Were any of the stocks, hands as other seconds of the reporting online any of the second of the seco	
∠∪.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 24.03)	Yes [X] No []

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

25.21	Subject to repurchase agreements	\$ 
25.22	Subject to reverse repurchase agreements	\$ 82,016,049
25.23	Subject to dollar repurchase agreements	\$
25.24	Subject to reverse dollar repurchase agreements	\$
25.25	Placed under option agreements	\$
25.26	Letter stock or securities restricted as to sale -	
	excluding FHLB Capital Stock	\$
25.27	FHLB Capital Stock	\$
25.28	On deposit with states	\$
25.29	On deposit with other regulatory bodies	\$
25.30	Pledged as collateral - excluding collateral	
	pledged to an FHLB	\$ 
25.31	Pledged as collateral to FHLB - including	
	assets backing funding agreements	\$ 
25.32	Other	\$ 

25.3 For category (25.26) provide the following:

1	2	3	
Nature of Restriction Description		Amount	

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

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

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

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

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

Yes[]No[X]

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

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

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

Yes [ ] No [ ]

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

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

Yes[]No[X]

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

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

Yes[]No[X]

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

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

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

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

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

Yes [ ] No [ X ]

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

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

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

"...handle securities"]

1	2
Name Firm or Individual	Affiliation
John Polak	<u>                                     </u>
Jerome Fadden	<u>                                     </u>

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

Yes[]No[X]

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

Yes [ ] No [X]

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

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

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

Yes[]No[X]

29.2 If yes, complete the following schedule:

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

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

293	For	each	mutual	fund lis	sted in	the	table	above	comi	olete	the	following	schedu	ıle
20.0	1 01	Cuon	mutuui	Turiu iii	Jiou III	uio	lubic	ubovo,	OUITI		uic	TOHOWING	Jonicat	$a_{1} \cup$

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

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

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

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

- 33 By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
  - a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
  - 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]

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

Has the reporting entity self-designated PLGI securities?

Yes[]No[X]

- 35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
  - a. The shares were purchased prior to January 1, 2019.
  - The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. b.
  - 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
  - d. The fund only or predominantly holds bonds in its portfolio.
  - 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.
  - 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]

#### **OTHER**

36.1 Amount of payments to trade associations, service organizations and statistical or Rating Bureaus, if any?

146,003

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

covered by this statement.

1	2
Name	Amount Paid
Insurance Services Checking Office	\$ 112,766
	\$
	\$

37.1 Amount of payments for legal expenses, if any?

652,655

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

ents for legal expenses during the period covered by this statement

yments for legal expenses during the period covered by this statement.	
1	2
Name	Amount Paid
Perkins Law Group PLLC	\$ 287,020
	\$
	\$

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

œ.			

38.2 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.

ig are period corolled by and claterioria	
1	2
Name	Amount Paid
	\$
	\$
	\$

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicar	e Supp	plement Insurance in force?	Yes[]No[X]
1.2	If yes, indicate premium earned on U.S. business	only.		\$
1.3	What portion of Item (1.2) is not reported on the N 1.31 Reason for excluding	Medica	re Supplement Insurance Experience Exhibit?	\$
1.5	Indicate amount of earned premium attributable t Indicate total incurred claims on all Medicare Sup Individual policies:		dian and/or Other Alien not included in Item (1.2) above. nt insurance.	\$ \$
	•	Most of 1.61 1.62 1.63	urrent three years: Total premium earned Total incurred claims Number of covered lives	\$ \$
			rs prior to most current three years:  Total premium earned  Total incurred claims  Number of covered lives	\$ \$
1.7		Most of 1.71 1.72 1.73	urrent three years: Total premium earned Total incurred claims Number of covered lives  virs prior to most current three years:	\$ \$
2.	Health Test:	1.74 1.75 1.76	Total premium earned Total incurred claims Number of covered lives  1 2 Current Year Prior Year	\$ \$
		2.1 2.2 2.3 2.4 2.5 2.6	Premium Numerator         \$         \$         301,515,439           Premium Denominator         \$         287,476,738         \$         301,515,439           Premium Ratio (2.1 / 2.2)         *         *         Reserve Numerator         \$         \$         \$           Reserve Denominator         \$         354,625,390         \$         395,829,593           Reserve Ratio (2.4 / 2.5)         *         *         *	
3.1	Does the reporting entity issue both participating	and no	n-participating policies?	Yes[]No[X]
3.2	If yes, state the amount of calendar year premiun	ns writt	en on:	
		3.21 3.22	Participating policies Non-participating policies	\$ \$
4.	For Mutual reporting entities and Reciprocal Exch			*
	Does the reporting entity issue assessable policies	•	•	Yes [ ] No [ ]
4.2	Does the reporting entity issue non-assessable p	olicies		Yes [ ] No [ ]
4.3	If assessable policies are issued, what is the external	ent of th	e 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 [ ]
5.2	If yes, is the commission paid:			
		5.21 5.22	Out of Attorney's-in-fact compensation As a direct expense of the exchange	Yes[]No[]N/A[X] Yes[]No[]N/A[X]
53	What expenses of the Exchange are not paid out	of the	compensation of the Attorney-in-fact?	
0.0				
5.4	Has any Attorney-in-fact compensation, continge		Ifillment of certain conditions, been deferred?	Yes[]No[X]
	If yes, give full information			
-				
	What provision has this reporting entity made to p compensation contract issued without limit loss: Texas Windstorm Insurance Association does no		itself from an excessive loss in the event of a catastrophe under a workers' workers compensation insurance policies.	

#### 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:  Texas Windstorm Insurance Association estimates its probable maximum loss using AIR Touchstone and RMS RiskLink software models to model the risk of hurricanes. The PML comprises residential and commercial property exposures which are most concentrated in and around the Galveston and Corpus Christi areas.		
	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?  Texas Windstorm Insurance Association has reinsured \$2.1 billion in excess of \$2.1 billion under catastrophe reinsurance agreements. Futher, Texas Windstorm Insurance Association has the ability to sell post event bonds, and the use of the Catastophe Reserve Trust Fund.		
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes [	] No [ X ]
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss Funding for Texas Windstorm Insurance Association is specified by Chapter 2210, Texas Insurance Code.		
	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes [	] No [ X ]
	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 [ ]
	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?		] No [X]
8.2	If yes, give full information	•	
	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 [ X ]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity 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 [ X ]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.		
9.4	Except for transactions meeting the requirements of paragraph 37 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes [	] No [ X ]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.		
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:	· ·	1M 277
	<ul><li>(a) The entity does not utilize reinsurance; or,</li><li>(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation</li></ul>	Yes [	] No [ X ]
	supplement; or  (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an	Yes [	] No [ X ]
	attestation supplement.	Yes [	] No [ X ]

#### PART 2 – PROPERTY & CASUALTY INTERROGATORIES

	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	Yes[]No[]N/A[X]				
	Has the reporting entity guaranteed policies issued by any other entity and now in force: If yes, give full information	Yes[]No[X]				
	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:					
	12.11 Unpaid losses	\$				
	12.12 Unpaid underwriting expenses (including loss adjustment expenses)	<b>5</b>				
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?	<b>.</b>				
	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	Yes[]No[]N/A[X]				
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement:					
	12.41 From 12.42 To	%				
	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?	Yes[]No[X]				
12.6	If yes, state the amount thereof at December 31 of current year:					
	12.61 Letters of Credit  12.62 Collateral and other funds	<u> </u>				
13 1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	4,424,000				
		<u> </u>				
	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?	Yes[]No[X]				
	State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.					
14.1	4.1 Is the company a cedant in a multiple cedant reinsurance contract?					
14.2	If yes, please describe the method of allocating and recording reinsurance among the cedants:					
14.3	If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance					
	contracts?	Yes [ ] No [ ]				
14.4	If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?	Yes [ ] No [ ]				
14.5	If the answer to 14.4 is no, please explain:					
15.1	Has the reporting entity guaranteed any financed premium accounts?	Yes[]No[X]				
15.2	If yes, give full information					
	Does the reporting entity write any warranty business? If yes, disclose the following information for each of the following types of warranty coverage:	Yes[]No[X]				
	1 2 3 4 5					
	Direct Losses Direct Losses Direct Written Direct Premium Direct Premium Direct Premium Unearned Earned					
	16.11 Home \$ \$ \$					
	16.12 Products \$ \$ \$ \$ \$ \$ 16.13 Automobile \$ \$ \$ \$ \$					
	16.14 Other* \$ \$ \$ \$ \$					
	* Disclose type of coverage:					

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1	7.1 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?					
	Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:					
	<ul> <li>17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3 exempt from the statutory provision for unauthorized reinsurance</li> <li>17.12 Unfunded portion of Interrogatory 17.11</li> <li>17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11</li> <li>17.14 Case reserves portion of Interrogatory 17.11</li> <li>17.15 Incurred but not reported portion of Interrogatory 17.11</li> <li>17.16 Unearned premium portion of Interrogatory 17.11</li> <li>17.17 Contingent commission portion of Interrogatory 17.11</li> </ul>	\$ \$				
18.1	Do you act as a custodian for health savings accounts?	Yes[]No[X]				
18.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$				
18.3	Do you act as an administrator for health savings accounts?	Yes[]No[X]				
18.4	If yes, please provide the balance of the funds adminstered as of the reporting date.	\$				
19.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes[]No[X]				
19.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes[]No[X]				

## FIVE - YEAR HISTORICAL DATA

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

		1	2	3	4	5
		2019	2018	2017	2016	2015
	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
2.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	372,016,601	395,551,679	423,074,138	487,353,537	503,824,316
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6.	Total (Line 35)	372,016,601	395,551,679	423,074,138	487,353,537	503,824,316
	Net Premiums Written (Page 8, Part 1B, Col. 6)					
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
	Property lines (Lines 1, 2, 9, 12, 21 & 26)	277,922,157	287,112,861	319,081,366	361,300,741	379,696,858
	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)  All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
	Total (Line 35)	277,922,157	287,112,861	319,081,366	361,300,741	379,696,858
	Statement of Income (Page 4)					
13.	Net underwriting gain (loss) (Line 8)	29,023,235	(81,471,557)	(1,225,823,932)	75,008,379	(8,977,110)
14.	Net investment gain (loss) (Line 11)	(22,117,196)	(27,331,179)	(28,886,165)	(34,620,236)	(37,754,478)
	Total other income (Line 15)	90,042,566	281,871,761	743,268,162	66,919	3,888
16.	Dividends to policyholders (Line 17)					
17.	Federal and foreign income taxes incurred (Line 19)					(7,828,675)
18.	Net income (Line 20)	96,948,605	173,069,025	(511,441,935)	40,455,062	(38,899,025)
	Balance Sheet Lines (Pages 2 and 3)					
	Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)  Premiums and considerations (Page 2, Col. 3)	606,116,804	657,838,728	647,953,929	972,707,900	993,093,861
	20.1 In course of collection (Line 15.1)	116,418	106,172	90,174	204,394	228,148
	20.2 Deferred and not yet due (Line 15.2)					
	20.3 Accrued retrospective premiums (Line 15.3)					
21.	Total liabilities excluding protected cell business (Page 3, Line 26)	789,908,582	935,702,925	1,109,344,091	972,707,900	993,093,862
	Losses (Page 3, Line 1)	131,861,792	157,182,138	358,214,371	43,248,596	61,066,377
	Loss adjustment expenses (Page 3, Line 3)	37,268,229	43,597,505	56,519,895	10,209,966	13,986,366
24.	Unearned premiums (Page 3, Line 9)	185,495,369	195,049,950	209,452,528	237,725,520	246,828,924
25.	Capital paid up (Page 3, Lines 30 & 31)	(400 704 770)	(077.004.407)	(404.200.400)		
26.	Surplus as regards policyholders (Page 3, Line 37)  Cash Flow (Page 5)	(183,791,778)	(277,864,197)	(461,390,162)		
27	N ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	(89,442,142)	55,208,905	(338,643,135)	62,934,874	(149,463,336)
21.	Net cash from operations (Line 11)  Risk-Based Capital Analysis	(03,442,142)	33,200,303	(550,045,155)	02,334,074	(143,403,330)
28.	Total adjusted capital	(183,791,778)	(277,864,197)	(461,390,162)		
29.	Authorized control level risk-based capital	26,601,548	27,483,960	226,868,452	38,763,217	40,423,373
	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
35. 36.	Contract loans (Line 6) Derivatives (Line 7)					
38.	Other invested assets (Line 8) 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)					
	Affiliated mortgage loans on real estate					
	All other affiliated  Total of above Lines 42 to 47					
	1 Utal UI ADUVE LINES 42 (U 47					
48. 49	Total investment in a count included in Lines 40 to 47 observe					
48. 49. 50.	Total investment in parent included in Lines 42 to 47 above  Percentage of investments in parent, subsidiaries and affiliates to surplus as					

## FIVE - YEAR HISTORICAL DATA

(Continued)

		1	2	3	4	5
		2019	2018	2017	2016	2015
	Capital and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)					
52.	Dividends to stockholders (Line 35)  Change in surplus as regards policyholders for the year (Line 38)		183,525,965	(461,390,162)		
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	112,071,468	307,370,851	952,193,352	36,786,677	134,184,261
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
57. 58.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)  Nonproportional reinsurance lines (Lines 31, 32 & 33)					
	Total (Line 35)	112,071,468	307,370,851	952,193,352	36,786,677	134,184,261
	Net Losses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)					
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	111,975,095	307,294,828	951,275,842	36,786,677	134,184,261
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64. 65.	Nonproportional reinsurance lines (Lines 31, 32 & 33) Total (Line 35)	111,975,095	307,294,828	951,275,842	36,786,677	134,184,261
	``````````````````````````````````````					
	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)	30.1	35.2	364.5	5.1	36.1
68. 69.	Loss expenses incurred (Line 3) Other underwriting expenses incurred (Line 4)	9.3	23.1 32.0	60.2	5.3 29.6	11.2
	Net underwriting gain (loss) (Line 8)	10.1	(27.0)	(352.9)	1	(2.4)
	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	19.8	(26.1)	(202.3)	71.1	54.7
72.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3	13.0		(202.0)		54.7
	divided by Page 4, Line 1 x 100.0)	39.4	58.4	424.7	10.4	47.4
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35	(454.0)	(402.2)	(60.2)		
	divided by Page 3, Line 37, Col. 1 x 100.0)	(151.2)	(103.3)	(69.2)		
	One Year Loss Development (\$000 omitted)					
74.	Development in estimated losses and loss expenses incurred prior to current	70 70 5	400 470	/0.07.4\	(0.000)	(0.404)
75.	year (Schedule P, Part 2-Summary, Line 12, Col. 11)  Percent of development of losses and loss expenses incurred to policyholders'	73,735	109,178	(8,374)	(8,900)	(9,494)
	surplus of prior year end (Line 74 above divided by Page 4, Line 21,					
	Col. 1 x 100.0)	(26.5)	(23.7)			
	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)	183,740	(10,499)	(15,876)	(11,266)	(40,985)
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)	(39.8)				
	TE: If a party to a merger, have the two most recent years of this exhibit been restated due to a				Voc [ ]	

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)
BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2019

AIC Group Code 4766				THE STATE OF TEX						NAIC Company Cod		
		icy and Membership Fees, Less niums on Policies not Taken	3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire 2.1 Allied Lines	372,016,601	381,571,182		185,495,369	112,071,468	86,725,260	131,890,367	5,244,482	5,201,325	17,924,932	59,474,929	7,024,2
2.2 Multiple Peril Crop												
2.3 Federal Flood												
2.4 Private Crop 2.5 Private Flood												
3. Farmowners Multiple Peril												
Harmowners Multiple Peril     Homeowners Multiple Peril												
Commercial Multiple Peril (Non-Liability Portion)												
2 Commercial Multiple Peril (Liability Portion)												
6. Mortgage Guaranty												
. Ocean Marine												
Inland Marine												
Financial Guaranty												
Medical Professional Liability												
. Earthquake												
Group Accident and Health (b)												
. Credit A & H (Group and Individual)												
Collectively Renewable A & H (b)												
Non-Cancelable A & H (b)		l					l	l		1		
Guaranteed Renewable A & H (b)										l		
Non-Renewable for Stated Reasons Only (b)										1		
5 Other Accident Only										1		
6 Medicare Title XVIII Exempt from State Taxes or Fees										1		
7 All Other A & H (b)										1		
Federal Employees Health Benefits Plan Premium (b)										1		
Workers' Compensation										1		
1 Other Liability - Occurrence		[								1		
2 Other Liability - Claims-Made										1		
B Excess Workers' Compensation												
. Products Liability												
1 Private Passenger Auto No-Fault (Personal Injury Protection)												
Other Private Passenger Auto Liability												
3 Commercial Auto No-Fault (Personal Injury Protection)												
4 Other Commercial Auto Liability												
Private Passenger Auto Physical Damage												
2 Commercial Auto Physical Damage												
. Aircraft (all perils)												
Fidelity												
Fidelity Surety												
Burglary and Theft												
Boiler and Machinery												
. Credit												
b. International												
g. International												
Warranty     Aggregate Write-Ins for Other Lines of Business												
Aggregate write-ins for Other Lines of Business     TOTALS (a)	270.040.004	204 574 400		405 405 200	140.074.400	00 705 000	404 000 007	5.044.400	E 004 20E	47.004.000	E0 474 000	7.004
DETAILS OF WRITE-INS	372,016,601	381,571,182		185,495,369	112,071,468	86,725,260	131,890,367	5,244,482	5,201,325	17,924,932	59,474,929	7,024
11.												
02.												
03.												
198. Summary of remaining write-ins for Line 34 from overflow page				ION								
199. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)												
		ļ				l	l .	1		1		

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

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



**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)** 

	Code 4766			BUSINESS IN	THE STATE OF TOT	AL DURING THE YEA					<b>NAIC Company Cod</b>	e 30040	
		Gross Premiums, Including Polic Return Premiums and Prem		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire 2.1 Allie	d lines	372,016,601	381,571,182		185,495,369	112,071,468	86,725,260	131,890,367	5,244,482	5,201,325	17,924,932	59,474,929	7,024,2
	iple Peril Crop												
2.3 Fede													
2.4 Priva													
2.5 Priva													
3. Farn	nowners Multiple Peril												
	neowners Multiple Peril												
	nmercial Multiple Peril (Non-Liability Portion)												
	nmercial Multiple Peril (Liability Portion)												
	gage Guaranty												
	an Marine												
	nd Marine												
	ncial Guaranty										l l		1
	ical Professional Liability										l l		1
<ol><li>Eart</li></ol>													
<ol> <li>Grou</li> </ol>	up Accident and Health (b)												
14. Cred	dit A & H (Group and Individual)												
5.1 Colle	ectively Renewable A & H (b)												
	-Cancelable A & H (b)												
	ranteed Renewable A & H (b)												
	-Renewable for Stated Reasons Only (b)												
	er Accident Only												
haM a	icare Title XVIII Exempt from State Taxes or Fees												
	Other A & H (b)												
	eral Employees Health Benefits Plan Premium (b)												
	kers' Compensation												
	er Liability - Occurrence												
	er Liability - Claims-Made												
	ess Workers' Compensation												
	ducts Liability												
10. P100	ate Passenger Auto No-Fault (Personal Injury Protection)												
J. I PIIV	ate Passenger Auto No-Fauit (Personal Injury Protection)												
9.2 Otne	er Private Passenger Auto Liability												
.3 Com	nmercial Auto No-Fault (Personal Injury Protection)												
	er Commercial Auto Liability												
	ate Passenger Auto Physical Damage												
	nmercial Auto Physical Damage												
	raft (all perils)												
<ol><li>Fide</li></ol>													
24. Sure													
	plary and Theft	[											
	er and Machinery												
<ol><li>Cred</li></ol>		[				[				l			1
9. Inter		[			[	[				l	l		1
0. War	ranty				<b> </b>					l			[
	regate Write-Ins for Other Lines of Business												
35. TOT	ALS (a)	372,016,601	381,571,182		185,495,369	112,071,468	86,725,260	131,890,367	5,244,482	5,201,325	17,924,932	59,474,929	7,024
	DETAILS OF WRITE-INS		-										
													1
01													
													1
02.													
401. 402. 403.					<b>NON</b>								
02. 03. 98. Sum	nmary of remaining write-ins for Line 34 from overflow page ils (Lines 3401 through 3403 plus 3498) (Line 34 above)				ION								

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

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

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

NONE Schedule F - Part 1 Assumed Reinsurance

NONE Schedule F - Part 2 Premium Portfolio

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

_		1		1	1	1			-						-				1	
	1	2	3	4	5	6	_	_			rance Recovera							ce Payable	19	20
							7	8	9	10	11	12	13	14	15	16	17	18		
-						•												•	Net Amount	Funds Held
-						•										Amount in		Other	Recoverable From	by
ı		NAIC	Name	ŀ		Reinsurance			Known	Known	IBNR	IBNR			Cols. 7	Dispute	Ceded	Amounts	Reinsurers	Under
ł	ID	1	of	Domiciliary		Premiums	Paid	Paid	Case Loss	Case LAE		LAE	Unearned	Contingent	l	Included in	Balances	Due to	Cols. 15 –	1
ı	Number	Company Code	Reinsurer	Jurisdiction	Special Code	Ceded	Losses	LAE	Reserves	Reserves	Loss Reserves	Reserves	Premiums	Contingent Commissions	through 14 Totals	Column 15	Payable	Reinsurers	[17 + 18]	Reinsurance Treaties
-	Number	Code	Reliisulei	Julisuiction	Special Code	Ceded	LUSSES	LAC	Reserves	Reserves	Reserves	Reserves	Fremuns	Commissions	TOTALS	Column 15	Fayable	Remoulers	[17 + 10]	Treaties
	22-2005057	26921	Everest Reinsurance Company	DE		9,866											2,579		(2,579)	
-	13-2673100	22039	General Reinsurance Company	DE DE		271											71		(2,373)	(
-   -	13-3138390	42307	Navigators Insurance Company	NY		352											92		(92)	(
-   1	47-0698507	23680	Odyssey Reinsurance Company	CT		1,480											387		(387)	(
-   1	23-1641984	10219	QBE Reinsurance Corporation	PA		326											85		(85)	(
-	13-1675535	25364	Swiss Reinsurance America Corporation	NY		286											75		(75)	<u> </u>
	31-0542366	10677	The Cincinnati Insurance Company	OH		641											168		(168)	<u> </u>
-   1	13-5616275	19453	Transatlantic Reinsurance Company	NY		543											142		(142)	<u> </u>
-   1	46-1168622	14568	Maison Insurance Company	LA													1		, , ,	'  · · · · · · · ·
- 1	47-1005834	15545	The Woodlands Ins Company	TX										1						1
- 1	59-3560143	10969	United Property & Casualty Insurance Company	FL			1	1			1				3				3	1
- [	90-0797817	14930	Weston Insurance Company	FL	1	1,593	3	2	8	33	17	6		1	69	1	1		69	118
ર 🏻	46-3943172	15341	Safepoint Insurance Company	FL FL	1	98					3	1		1	4		1		4	6
L																				
Ľ	999999	Total Authorize	ed - Other U.S. Unaffiliated Insurers			15,456	4	3	8	33	21	7			76		3,599		(3,523)	) 179
-	AA-3194168	0	Aspen Bermuda Limited	BMU		789											206		(206)	
-   -	AA-3194139	0	AXIS Specialty Limited	BMU		1,409											368		(368)	(
-	AA-3191376	0	Cerulean Re SAC Ltd.	BMU		375											98		(98)	
-	AA-3194122	0	DaVinci Reinsurance Limited	BMU		2,052											536		(536)	(
-	AA-1340125	0	Hannover Re Old CAT Bond	DEU		30,227											6,366		(6,366)	<u> </u>
1	AA-1340125	0	Hannover Rück SE (Markel CATCo-Re Aquilo bu	DEU		133											35		(35)	(
-	AA-1126566	0	Lloyd's Underwriter Syndicate No. 0566 STN	GBR		395											103		(103)	) 
- 1	AA-1127084	0	Lloyd's Underwriter Syndicate No. 1084 CSL	GBR		1,480											387		(387)	<u> </u>
1	AA-1127183	0	Lloyd's Underwriter Syndicate No. 1183 TAL	GBR		732											191		(191)	<u></u>
- 1	AA-1120085	0	Lloyd's Underwriter Syndicate No. 1274 AUL	GBR		133								1			35		(35)	6
- 1	AA-1127414	0	Lloyd's Underwriter Syndicate No. 1414 ASC	GBR		2,467								1			645		(645)	)
- 1	AA-1120102	0	Lloyd's Underwriter Syndicate No. 1458 RNR	GBR		839											219		(219)	)
- 1	AA-1120156	0	Lloyd's Underwriter Syndicate No. 1686 AXS	GBR	1	691			1					1		1	181		(181)	)
- 1	AA-1120084	0	Lloyd's Underwriter Syndicate No. 1955 BAR	GBR	1	178								1		1	46		(46)	)
	AA-1128001	0	Lloyd's Underwriter Syndicate No. 2001 AML	GBR	1	247								1			64		(64)	)
	AA-1128003	0	Lloyd's Underwriter Syndicate No. 2003 XLC	GBR		217											57		(57)	)
-	AA-1120097	0	Lloyd's Underwriter Syndicate No. 2468 NEO	GBR		395			1					I		I	103		(103)	)
	AA-1120097	0	Lloyd's Underwriter Syndicate No. 2468 NEO	GBR		99		l	1			[		I		I	26	I	(26)	)
	AA-1128791	0	Lloyd's Underwriter Syndicate No. 2791 MAP	GBR		740			1					[			193		(193)	)
	AA-1120075	0	Lloyd's Underwriter Syndicate No. 4020 ARK	GBR		493			[								129		(129)	)
	AA-1126004	0	Lloyd's Underwriter Syndicate No. 4444 CNP	GBR		656	1	l	1			l		1	l	I	171	l	(171)	)
- [ ]	AA-3190829	0	Markel Bermuda Limited	BMU	1	987	l	l				l		1			258		(258)	)
- 1.			Partner Reinsurance Company Ltd.	BMU		1,184											309			

22

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

1	2	3	1 4	5	6				Reins	rance Recovera	able On					Reinsuran	re Pavahle	19	20
'	۷		1			7	8	9	10	11	12	13	14	15	16	17	18	10	20
						·			10	••	1	"	1		10		10	Net Amount	Funds Held
							Ì		•				t					Recoverable	by
															Amount in		Other	From	Company
	NAIC	Name			Reinsurance		}	Known	Known	IBNR	IBNR		†	Cols. 7	Dispute	Ceded	Amounts	Reinsurers	Under
ID		iname of	Di-ili		Premiums	Paid	D-:-I	1	Case LAE		LAE	Unanamad	0			Balances	Due to		
· <del>-</del>	Company	· · · · · · · · · · · · · · · · · · ·	Domiciliary				Paid	Case Loss		Loss	1	Unearned	Contingent	through 14	Included in			Cols. 15 –	Reinsurance
Number	Code	Reinsurer	Jurisdiction	Special Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
																			1
AA-3190339	0	Renaissance Reinsurance Ltd.	BMU		3,085											806		(806)	1
AA-3190870	0	Validus Reinsurance, Ltd.	BMU		1,973											516		(516)	1
																		//	-
1299999	Total Authorized	d - Other Non-U.S. Insurers#	1		51,976											12,048		(12,048)	
1499999	Total Authorized	L d - Total Authorized Excluding Protected Cells			67,432	4	3	8	33	21	7			76		15,647		(15,571)	179
	1010.710.101.201				01,102	·										,		(10,011)	· · ·
AA-1464104	0	Allianz Risk Transfer AG	LIE		410			1	1							107		(107)	1
AA-1464104	0	Allianz Risk Transfer AG (Nephila business)	LIE		704											184		(184)	1
AA-3190932	0	Argo Re Limited	BMU		1,283			1								335		(335)	
AA-3191352	0	Ascot Reinsurance Company Limited	BMU		1,322											346		(346)	1
AA-9240012	0	China Property & Casualty Reinsurance Compan	CHN		296											77		(77)	1
AA-3190770		Chubb Tempest Reinsurance Ltd.	BMU		987											258		(258)	1
AA-3191289		Fidelis Insurance Bermuda Limited	BMU		789											206		(206)	
AA-1120175		Fidelis Underwriting Limited	GBR		493											129		(129)	
AA-1120173 AA-3191190		Hamilton Re, Ltd.	BMU		698											182		(129)	
AA-8310008		Humboldt Re Limited	GGY		118											21		(102)	1
AA-8310006		Kelvin Re Limited	GGY		197											52		(51)	1
AA-6310006 AA-5420050		Korean Reinsurance Company	KOR		148											39		(32)	
AA-3420050 AA-1240051		QBE Europe SA / NV	BEL		987											258		(258)	
		<b>.</b>	HKG		99											26		(200)	
AA-5324100		Taiping Reinsurance Company Limited	IND		247											20		(26)	
AA-5340660		The New India Assurance Company Limited	BMU		641											168		(64)	
AA-3191295		Third Point Reinsurance (USA) Ltd.			2,467											645		(168)	
AA-3191388		Vermeer Reinsurance Ltd.	BMU		2,407													(645)	
2699999	Total I Inauthori	Lized - Other non-U.S. Insurers#			11.886											3.107		(3,107)	
2799999		ized - Ortected Cells			11,000											3,107		(3,107)	
2899999	Total Unauthoria	zed - Total Unauthorized Excluding Protected Cells	3		11,886											3,107		(3,107)	
CR-3194126		Arch Reinsurance Ltd	BMU		1,480											207		(207)	
CR-3194126 CR-3194126	0	Arch Reinsurance Ltd (Quantedge)	BMU		235											387		(387)	
		Hannover Re (Pillar ) - Including CAT Bond	DEU DEU		10,966														
CR-1340125 CR-1340125	0		DEU		10,966											2,632		(2,632)	
CR-1340125 CR-1340125		Hannover Rück SE Hannover Rück SE (Credit)	DEU		276											107		(107)	
CR-1340125 CR-1340125		Hannover Ruck SE (Credit) Hannover Rück SE (Eskatos business)	DEU		178											46		(72)	
			BMU		493													(46)	
CR-3190875		Hiscox Insurance Company (Bermuda) Limited														129		(129)	
CR-1460100		New Reinsurance Company Ltd.	CHE		247											I		(64)	
CR-3191315	0	XL Bermuda Ltd	BMU		493											129		(129)	
						1		1											1

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

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	1	2	3	4	5	6	7	•			urance Recovera		10	1 44	45	40		ce Payable	19	20
							7	8	9	10	11	12	13	14	15	16	17	18	Not Amount	Funda Hald
				ŀ		1										•			Net Amount	Funds Held
-									-				-			A			Recoverable	by
		NAIC	Nama			Deinamana				I/	IDND	IDND			0-1- 7	Amount in	0-4-4	Other	From	Company
	15	NAIC	Name	D		Reinsurance	Б.:	D 11	Known	Known	IBNR	IBNR	1		Cols. 7	Dispute	Ceded	Amounts	Reinsurers	Under
	ID Normalia a m	Company	of Deignand	Domiciliary	0	Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Contingent	through 14	Included in	Balances	Due to	Cols. 15 –	Reinsurance
	Number	Code	Reinsurer	Jurisdiction	Special Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	Commissions	Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
					L															
-			Other Non-U.S. Insurers#			14,778											3,627		(3,627)	
4	199999	Total Certified -	Protected Cells	1																
	.299999	Total Certified -	Total Certified Excluding Protected Cells			14,778											3,627		(3,627)	
H.	233333	Total Certilled -	Total Certified Excidding Frotected Cells			14,770											5,021		(0,021)	
4	399999	Total Authorized	, Unauthorized and Certified Excluding Protected C	ells	1	94,096	4	3	8	33	21	7			76		22,381		(22,305)	179
			-																	
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Ľ	999999	Totals				94,096	4	3	8	33	21	7			76		22,381		(22,305)	179

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

				`	Juit I tion,											
	C	ollateral			25	26	27				Cede	ed Reinsurance	e Credit Risk			
ID Number From Col. 1	Name of Multiple Reinsurer Beneficiary From Col. 3 Trusts	22  Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable& Funds Held (Cols 17+18+20; But not in Excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24. not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Col. 31 - 32)	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)
																1
22-2005057	Everest Reinsurance Company		0		<del>.</del>											l
13-2673100	General Reinsurance Corporation		0		<del>-</del>									11		[ <b>.</b> ]
13-3138390	Navigators Insurance Company		0		<del>.</del>											
47-0698507	Odyssey Reinsurance Company		0		<del>.</del>											
23-1641984	QBE Reinsurance Corporation		0		<del>-</del>											L
13-1675535	Swiss Reinsurance America Corporation		0		<del>-</del>											L
31-0542366	The Cincinnati Insurance Company		0		<del>-</del>											[
13-5616275	Transatlantic Reinsurance Company		0		<del>.</del>											
46-1168622	Maison Insurance Company		0		<del>.</del>									3		
47-1005834	The Woodlands Ins Company		0		<del>-</del>											[
59-3560143	United Property & Casualty Insurance Company		0		<del>-</del>	3		3	4		4		4			0
	Weston Insurance Company		0		69			69	83	83						L
46-3943172	Safepoint Insurance Company		0		4			4	5	5				6		
0000000	Total Authorized - Other U.S. Unaffiliated Insurers		VVV		73	3		70	04	- 00	4		4	VVV		
0999999	Total Authorized - Other C.S. Orialililated insurers		XXX		/3	3		76	91	88	4		4	XXX		U
ΔΔ_319/168	Aspen Bermuda Limited													3		
	AXIS Specialty Limited													2		
	Cerulean Re SAC Ltd.													7		
	DaVinci Reinsurance Limited													3		
AA-1340125	<b>↓</b>													2		
AA-1340125	∤ · · · · · · · · · · · · · · · · · · ·													2		
AA-1126566	Lloyd's Underwriter Syndicate No. 0566 STN													3		
AA-1127084	Lloyd's Underwriter Syndicate No. 1084 CSL		0											3		
AA-1127183	Lloyd's Underwriter Syndicate No. 1183 TAL		0											3		
AA-1120085	Lloyd's Underwriter Syndicate No. 1274 AUL		0											3		
	Lloyd's Underwriter Syndicate No. 1414 ASC				-									3		
AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR		0		-									3		
AA-1120156	Lloyd's Underwriter Syndicate No. 1686 AXS		0		-								1	3		
AA-1120084	Lloyd's Underwriter Syndicate No. 1955 BAR		0		-									3		
AA-1128001	Lloyd's Underwriter Syndicate No. 2001 AML		0		-									3		
AA-1128003	Lloyd's Underwriter Syndicate No. 2003 XLC		0		-									3		
	Lloyd's Underwriter Syndicate No. 2468 NEO		0		-									3		

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

			ollateral			25	26	27					ed Reinsurance				
Nu F	ID Number From Reinsurer Col. 1 From Col. 3	21 Multiple Beneficiary Trusts	22 Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable& Funds Held (Cols 17+18+20; But not in Excess of Col. 29)	Stressed Net Recoverable (Cols. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24. not in Excess of Col. 31)	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)	Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1	-1120097 Lloyd's Underwriter Syndicate No. 2468 NEO		1	0		l <del>.</del>									3		
AA-1	-1128791 Lloyd's Underwriter Syndicate No. 2791 MAP		l	0		<del>-</del>	l								3		
AA-1	-1120075 Lloyd's Underwriter Syndicate No. 4020 ARK			0		-									3		
AA-1	-1126004 Lloyd's Underwriter Syndicate No. 4444 CNP			0		-									3		
AA-3	-3190829 Markel Bermuda Limited			0	1	-									3		
AA-3	-3190686 Partner Reinsurance Company Ltd.			0	1	-									2		
AA-3	-3190339 Renaissance Reinsurance Ltd.		1	0	1	-									2		
AA-3	-3190870 Validus Reinsurance, Ltd.			0		-									3		
1299	99999 Total Authorized - Other Non-U.S. Insurers#			XXX											XXX		
1399	99999 Total Authorized - Protected Cells			XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1400	99999 Total Authorized - Total Authorized Excluding Protected Cells			XXX		73	3		76	91	88	4		4	XXX		0
1499	99999 Total Authorized - Total Authorized Excluding Protected Cells			***		13	3			91	00	4		4	***		0
AA-1	-1464104 Allianz Risk Transfer AG					-									2		
	-1464104 Allianz Risk Transfer AG (Nephila business)														2		
	-3190932 Argo Re Limited			1													
	-3191352 Ascot Reinsurance Company Limited		1	0													
				0		- · · · · · · · · · · · · · · · · · · ·									3		
	<b> </b>			0		<del>.</del>											
I AA-3	-9240012 China Property & Casualty Reinsurance Company Limited			0 0		<del>.</del> <del>.</del>											
	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd.			0 0													
AA-3	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited			0 0 0 0													
AA-3 AA-1	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited			0 0 0 0													
AA-3 AA-1 AA-3	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd.			0 0 0 0 0													
AA-3 AA-1 AA-3 AA-8	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited			0 0 0 0 0 0													
AA-3 AA-1 AA-3 AA-8 AA-8	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited -8310006 Kelvin Re Limited			0 0 0 0 0													
AA-3 AA-1 AA-3 AA-8 AA-8 AA-5	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited -8310006 Kelvin Re Limited -5420050 Korean Reinsurance Company			0 0 0 0 0													
AA-3 AA-1 AA-3 AA-8 AA-5 AA-1	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited -8310006 Kelvin Re Limited -5420050 Korean Reinsurance Company -1240051 QBE Europe SA / NV			0 0 0 0 0 0 0 0													
AA-3 AA-1 AA-3 AA-8 AA-5 AA-1 AA-5	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited -8310006 Kelvin Re Limited -5420050 Korean Reinsurance Company -1240051 QBE Europe SA / NV -5324100 Taiping Reinsurance Company Limited			0 0 0 0 0 0 0 0													
AA-3 AA-1 AA-8 AA-8 AA-5 AA-1 AA-5	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited -8310006 Kelvin Re Limited -5420050 Korean Reinsurance Company -1240051 QBE Europe SA / NV -5324100 Taiping Reinsurance Company Limited -5430660 The New India Assurance Company Limited			0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0													
AA-3 AA-1 AA-3 AA-8 AA-5 AA-1 AA-5 AA-3	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited -8310006 Kelvin Re Limited -5420050 Korean Reinsurance Company -1240051 QBE Europe SA / NV -5324100 Taiping Reinsurance Company Limited -5340660 The New India Assurance Company Limited -3191295 Third Point Reinsurance (USA) Ltd.			0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											3 3 3 1 4 4 4 4 4 3 3 3 3 4		
AA-3 AA-1 AA-3 AA-8 AA-5 AA-1 AA-5 AA-3	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited -8310006 Kelvin Re Limited -5420050 Korean Reinsurance Company -1240051 QBE Europe SA / NV -5324100 Taiping Reinsurance Company Limited -5430660 The New India Assurance Company Limited			0 0 0 0 0 0 0 0 0 0													
AA-3 AA-1 AA-8 AA-5 AA-1 AA-5 AA-3	-9240012 China Property & Casualty Reinsurance Company Limited -3190770 Chubb Tempest Reinsurance Ltd3191289 Fidelis Insurance Bermuda Limited -1120175 Fidelis Underwriting Limited -3191190 Hamilton Re, Ltd8310008 Humboldt Re Limited -8310006 Kelvin Re Limited -5420050 Korean Reinsurance Company -1240051 QBE Europe SA / NV -5324100 Taiping Reinsurance Company Limited -5340660 The New India Assurance Company Limited -3191295 Third Point Reinsurance (USA) Ltd.			0 0 0 0 0 0 0 0 0 0											3 3 3 1 4 4 4 4 4 3 3 3 3 4		

23.1

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

					(	suit (NSK)											
		Co	ollateral			25	26	27			-	Cede	ed Reinsurance	Credit Risk			
ID Number From Col. 1	Name of Reinsurer From Col. 3	21  Multiple Beneficiary Trusts	22 Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable From Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable& Funds Held (Cols 17+18+20; But not in Excess of Col. 29)	Stressed Net Recoverable (Cois. 29 - 30)	Total Collateral (Cols. 21 + 22 + 24. not in Excess of Col. 31)	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)
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells			XXX											XXX		
CR-1340128 CR-1340128 CR-1340128 CR-3190878 CR-1460100	Arch Reinsurance Ltd (Quantedge) Hannover Re (Pillar ) - Including CAT Bond Hannover Rück SE Hannover Rück SE (Credit) Hannover Rück SE (Eskatos business) Hiscox Insurance Company (Bermuda) Limited			000000000000000000000000000000000000000											2 2 2 2 2 2 2 3 2 2		
4099999	Total Certified - Other Non-U.S. Insurers#			XXX											XXX		
4199999	Total Certified - Protected Cells			XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4299999	Total Certified - Total Certified Excluding Protected Cells			XXX											XXX		
	•																
4399999	Total Authorized, Unauthorized and Certified Excluding Protected Cells			XXX		73	3		76	91	88	4		4	XXX		0
																	<sub>[</sub> ]
9999999	Totals			XXX		73	3		76	91	88	4		4	XXX		0

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

Part			1						Ttomourano										
Barrier   Barr				rance Recove	rable on Paid		Paid Loss Adj	ustment Exper		44	45	46	47	48	49	50	51	52	53
Total   Recoverable   Recove			37						43										
Part				38	39	40	41	42		Total	Deservatable		Dogoverskie						
2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-	Number	Table 5		1- 29		91 - 120	Over 120	Overdue	Cols. 37 + 42 (In total should	Recoverable on Paid Losses & LAE Amounts in Dispute	on Paid Losse & LAE Over 90 Days Past Due Amounts in Dispute	Recoverable on Paid Losses & LAE Amounts	on Paid Losse & LAE Over 90 Days Past Due Amounts Not in Dispute	ı	1	Amounts More Than 90 Days Overdue Not in Dispute	Than 120 Days	in Col. 50 Less	for Reinsurers wit
20.003557   Eveneri Reinstanance Company   13.2073100   General Reinstanance Corporation   17.55   13.2073100   General Reinstanance Company   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55   17.55	Col. 1	From Col. 3	Current	Days	Days	Days	Days	+ 40 + 41	Cols. 7 + 8)	Col. 43	Cols. 40 & 41	(Cols. 43 - 44)	41 - 45)	90 Days	42/Col. 43	46 + 48)	(Col. 41/Col. 43)	(Yes or No)	20% in Col. 50
22,200,007   Everes Reinstaurance Company   YES   13,373,001   Augustion Instaurance Company   YES   13,000   Augustion Instaurance Company   YES   14,000   Augustion Instaurance Company   YES   14,0																			
22,200,007   Everes Reinstaurance Company   YES   13,373,001   Augustion Instaurance Company   YES   13,000   Augustion Instaurance Company   YES   14,000   Augustion Instaurance Company   YES   14,0																			
15-313(93)   Navigation Insurance Company   15-313(94)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)   25-16(1986)		.	1							1					1				1
15.31/3509  Nevigator Insurance Company			1							1									1
23-161984   GER Reinsurance Corporation   September   September															1			YES	
13-167-255   Solve Reinsurance America Corporation   September	47-0698507	Odyssey Reinsurance Company	1							1		1					l		1
31-04-236	23-1641984	QBE Reinsurance Corporation	1		l l		l	l l		1	1	1		l	1	1	l	YES	1
13-5616/275   Tensellantin Reinsurance Company	13-1675535	Swiss Reinsurance America Corporation	1							1		1			1		l	YES	
13-5616757   Transalfantic Rehassurance Company	31-0542366	The Cincinnati Insurance Company	1				1	1		1		1			1				
Ar-109884   The Woodnads ins Company   YES	13-5616275		1				1	1		1		1		l · · · · · · · · ·	1			YES	
Ar-109884   The Woodnads ins Company   YES	46-1168622	Maison Insurance Company	1				1	1		1		1		l · · · · · · · · ·	1			YES	
S9-350/143 United Property & Casualty Insurance Company	47-1005834									1					1			YES	
99-97817   Weston Insurance Company   2   2   2   2   46-3943172   Safepoint Insurance Company   5   5   5   5   9   YES										1					1				
A6-3943172   Safepoint Insurance Company   5   5   5			2																
Despise		. 🛊	5						<del>.</del> 5	1		5						YES	
A-3194168   Aspen Bermuda Limited   YES			1							1									
AA-3194168   Aspen Bermuda Limited   YES	0999999	Total Authorized - Other U.S. Unaffiliated Insurers	7						7			7						XXX	
AA-3194139   AXIS Specialty Limited   YES																			
AA-3191376   Cerulean Re SAC Ltd.   YES     AA-3194122   DaVinc Reinsurance Limited   YES     AA-1340125   Hannover Rück SE (Markel CATCo-Re Aquilo business)   YES     AA-14126566   Lloyd's Underwriter Syndicate No. 1086 STN   YES     AA-1127084   Lloyd's Underwriter Syndicate No. 1183 TAL   YES     AA-1127085   Lloyd's Underwriter Syndicate No. 1183 TAL   YES     AA-1127141   Lloyd's Underwriter Syndicate No. 1143 CA   YES     AA-1127142   Lloyd's Underwriter Syndicate No. 1438 RNR   YES     AA-1120156   Lloyd's Underwriter Syndicate No. 1438 RNR   YES     AA-1120085   Lloyd's Underwriter Syndicate No. 144 ASC   YES     AA-1120160   Lloyd's Underwriter Syndicate No. 1458 RNR   YES     AA-1120086   Lloyd's Underwriter Syndicate No. 1458 RNR   YES     AA-1120086   Lloyd's Underwriter Syndicate No. 1458 RNR   YES     AA-1120086   Lloyd's Underwriter Syndicate No. 1686 AXS   YES     AA-1120087   Lloyd's Underwriter Syndicate No. 1585 BAR   YES     AA-1120088   Lloyd's Underwriter Syndicate No. 1086 AXS   YES     AA-1120089   Lloyd's Underwriter Syndicate No. 1086 AXS   YES     AA-1120080   Lloyd's Underwriter Syndicate No. 2001 AML   YES     AA-1120081   Lloyd's Underwriter Syndicate No. 2001 AML   YES     AA-1120801   Lloyd's Underwri		.																	1
AA-3194122   DaVinci Reinsurance Limited   YES     AA-1340125   Hannover Re Old CAT Bond   YES     AA-1340125   Hannover Rück SE (Markel CATCo-Re Aquillo business)     AA-1126866   Lloyd's Underwriter Syndicate No. 0.566 STN   YES     AA-1127084   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-1120086   Lloyd's Underwriter Syndicate No. 1456 RNR   YES     AA-1120102   Lloyd's Underwriter Syndicate No. 1456 RNR   YES     AA-1120112   Lloyd's Underwriter Syndicate No. 1555 BAR   YES     AA-1120084   Lloyd's Underwriter Syndicate No. 1555 BAR   YES     AA-1120085   Lloyd's Underwriter Syndicate No. 2001 AML   YES     AA-1120086   Lloyd's Underwriter Syndicate No. 2001 AML   YES     AA-1120087   Lloyd's Underwriter Syndicate No. 2001 AML   YES     AA-1120081   Lloyd's Underwriter Syndicate No. 2001 AML   YES     AA-1120081   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120804   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120805   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120806   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120807   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120808   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120808   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120809   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120809   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1120809   Lloyd's Underw	AA-3194139	.													1			YES	
AA-1340125   Hannover Re Old CAT Bond   YES     AA-1340125   Hannover Rück SE (Markel CATCo-Re Aquilo business)   YES     AA-1126566   Lloyd's Underwriter Syndicate No. 0566 STN   YES     AA-1127084   Lloyd's Underwriter Syndicate No. 1084 CSL   YES     AA-1127183   Lloyd's Underwriter Syndicate No. 1084 CSL   YES     AA-1127085   Lloyd's Underwriter Syndicate No. 1274 AUL   YES     AA-1127414   Lloyd's Underwriter Syndicate No. 1274 AUL   YES     AA-1120102   Lloyd's Underwriter Syndicate No. 1458 RNR   YES     AA-1120105   Lloyd's Underwriter Syndicate No. 1686 AXS   YES     AA-1120106   Lloyd's Underwriter Syndicate No. 1686 AXS   YES     AA-1120084   Lloyd's Underwriter Syndicate No. 1955 BAR   YES     AA-1120084   Lloyd's Underwriter Syndicate No. 1955 BAR   YES     AA-1120084   Lloyd's Underwriter Syndicate No. 2001 AML   YES     AA-1128003   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128004   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128005   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128006   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128007   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128008   Lloyd's Underwriter Syndicate No. 2003 XLC   XLOYD   XLOYD																			
AA-1340125   Hannover Rück SE (Markel CATCo-Re Aquilo business)   YES     AA-1126566   Lloyd's Underwriter Syndicate No. 0566 STN     AA-1127084   Lloyd's Underwriter Syndicate No. 1084 CSL     AA-1127183   Lloyd's Underwriter Syndicate No. 1183 TAL     AA-1127085   Lloyd's Underwriter Syndicate No. 1183 TAL     AA-112086   Lloyd's Underwriter Syndicate No. 1274 AUL     AA-1127414   Lloyd's Underwriter Syndicate No. 1414 ASC     AA-1120102   Lloyd's Underwriter Syndicate No. 1458 RNR     AA-1120104   Lloyd's Underwriter Syndicate No. 1686 AXS     AA-1120084   Lloyd's Underwriter Syndicate No. 1686 AXS     AA-1120105   Lloyd's Underwriter Syndicate No. 1955 BAR     AA-1128001   Lloyd's Underwriter Syndicate No. 2001 AML     AA-1128003   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128003   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128004   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128005   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128006   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128007   AA-1128008   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128008   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128008   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128009   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128000   Lloyd's Underwriter Syndi		. •	1							1		1							1
AA-1126566   Lloyd's Underwriter Syndicate No. 0566 STN   YES     AA-1127183   Lloyd's Underwriter Syndicate No. 1183 TAL     AA-1120185   Lloyd's Underwriter Syndicate No. 1274 AUL     Lloyd's Underwriter Syndicate No. 1274 AUL     Lloyd's Underwriter Syndicate No. 1274 AUL     Lloyd's Underwriter Syndicate No. 1414 ASC     Lloyd's Underwriter Syndicate No. 1458 RNR     AA-1120102   Lloyd's Underwriter Syndicate No. 1686 AXS     AA-11201804   Lloyd's Underwriter Syndicate No. 1686 AXS     AA-1128001   Lloyd's Underwriter Syndicate No. 2001 AML     AA-1128003   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128003   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128004   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128006   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128007   YES     AA-1128008   Lloyd's Underwriter Syndicate No. 2003 XLC     AA-1128009   Lloyd's Underwr	AA-1340125	Hannover Re Old CAT Bond	1							1		1					l		1
AA-1127084 Lloyd's Underwriter Syndicate No. 1084 CSL AA-1127183 Lloyd's Underwriter Syndicate No. 1183 TAL AA-1120085 Lloyd's Underwriter Syndicate No. 1274 AUL YES AA-1127414 Lloyd's Underwriter Syndicate No. 1414 ASC YES AA-1120102 Lloyd's Underwriter Syndicate No. 1458 RNR YES AA-1120156 Lloyd's Underwriter Syndicate No. 1458 RNR YES AA-1120084 Lloyd's Underwriter Syndicate No. 1686 AXS AA-1120084 Lloyd's Underwriter Syndicate No. 1955 BAR AA-1128001 Lloyd's Underwriter Syndicate No. 2001 AML YES AA-1128001 Lloyd's Underwriter Syndicate No. 2003 XLC YES	AA-1340125	Hannover Rück SE (Markel CATCo-Re Aquilo business)	1		l l		1	l l		1	1	1		l	1	1	l		1
AA-1127084   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-1127414   Lloyd's Underwriter Syndicate No. 1414 ASC   YES     AA-1120152   Lloyd's Underwriter Syndicate No. 1458 RNR   YES     AA-1120155   Lloyd's Underwriter Syndicate No. 1686 AXS   YES     AA-1120084   Lloyd's Underwriter Syndicate No. 1955 BAR   YES     AA-11200801   Lloyd's Underwriter Syndicate No. 2001 AML   YES     AA-1128001   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128003   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128004   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128007   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128008   Lloyd's Underwriter Syndicate No. 2003 XLC   YES     AA-1128009   Lloyd's Underwriter Syndicate No. 2003 XLC   YES	AA-1126566	Lloyd's Underwriter Syndicate No. 0566 STN	1					l l				1							
AA-1127183	AA-1127084	Lloyd's Underwriter Syndicate No. 1084 CSL																YES	
AA-1120085	AA-1127183		1				1	1		1		1		l · · · · · · · · ·	1			YES	
AA-1127414	AA-1120085	. 🛊	1	1			1			1					1	1			1
AA-1120102       Lloyd's Underwriter Syndicate No. 1458 RNR       YES         AA-1120156       Lloyd's Underwriter Syndicate No. 1686 AXS       YES         AA-1120084       Lloyd's Underwriter Syndicate No. 1955 BAR       YES         AA-1128001       Lloyd's Underwriter Syndicate No. 2001 AML       YES         AA-1128003       Lloyd's Underwriter Syndicate No. 2003 XLC       YES			1	1			1			1					1				
AA-1120156       Lloyd's Underwriter Syndicate No. 1686 AXS       YES         AA-1120084       Lloyd's Underwriter Syndicate No. 1955 BAR       YES         AA-1128001       Lloyd's Underwriter Syndicate No. 2001 AML       YES         AA-1128003       Lloyd's Underwriter Syndicate No. 2003 XLC       YES		.	1	1			1			1					1				
AA-1120084         Lloyd's Underwriter Syndicate No. 1955 BAR         YES           AA-1128001         Lloyd's Underwriter Syndicate No. 2001 AML         YES           AA-1128003         Lloyd's Underwriter Syndicate No. 2003 XLC         YES			1				1			1					1				
AA-1128001         Lloyd's Underwriter Syndicate No. 2001 AML         YES           AA-1128003         Lloyd's Underwriter Syndicate No. 2003 XLC         YES		.	1							1					1				1
AA-1128003 Lloyd's Underwriter Syndicate No. 2003 XLC YES			1							1					1				1
			1							1					1			YES	
			1							1					1			YES	

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

		Reinsu	rance Recove	erable on Paid	Losses and F	Paid Loss Adj	justment Expe	nses	44	45	46	47	48	49	50	51	52	53
		37			Overdue			43										
			38	39	40	41	42											
ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	1- 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Total Overdue Cols. 38 + + 40 + 41	Total Due Cols. 37 + 42 (In total should Equal Cols. 7 + 8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losse & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on	Recoverable on Paid Losse & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prio 90 Days	Percentage Overdue C 42/Col. 43	(Col. 47/Cols.	Percentage Mor Than 120 Days Overdue (Col. 41/Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 4 for Reinsurers wil Values Less Tha 20% in Col. 50
	Libraria Hadanasia Constituta Na CACO NEC																	
AA-1120097	Lloyd's Underwriter Syndicate No. 2468 NEO																YES	
AA-1128791 AA-1120075	Lloyd's Underwriter Syndicate No. 2791 MAP																YES	
AA-1126004	Lloyd's Underwriter Syndicate No. 4020 ARK																YES	
AA-1120004 AA-3190829	Lloyd's Underwriter Syndicate No. 4444 CNP Markel Bermuda Limited																YES	
	Partner Reinsurance Company Ltd.																YES	
AA-3190000 AA-3190339	Renaissance Reinsurance Ltd.																YES	
AA-3190339 AA-3190870	Validus Reinsurance Ltd.																YES	
AA-3190870	Validus Reinsurance, Ltd.																YES	
1299999	Total Authorized - Other Non-U.S. Insurers#																XXX	
1399999	Total Authorized - Protected Cells																XXX	
		_									_	1					1001	
1499999	Total Authorized - Total Authorized Excluding Protected Cells	7						7			7						XXX	
AA-1464104	Allianz Risk Transfer AG																YES	
	Allianz Risk Transfer AG (Nephila business)																YES	
AA-3190932	Argo Re Limited																YES	
	Ascot Reinsurance Company Limited																YES	
	China Property & Casualty Reinsurance Company Limited																YES	
	Chubb Tempest Reinsurance Ltd.																YES	
	Fidelis Insurance Bermuda Limited																YES	
	Fidelis Underwriting Limited																YES	
AA-3191190	Hamilton Re, Ltd.																YES	
AA-8310008	Humboldt Re Limited																YES	
	Kelvin Re Limited																YES	
	Korean Reinsurance Company																YES	
AA-1240051	QBE Europe SA / NV																YES	
	Taiping Reinsurance Company Limited	1															YES	1
	The New India Assurance Company Limited			1										1			YES	
AA-3191295	Third Point Reinsurance (USA) Ltd.	1		1					1					1			YES	
AA-3191388	Vermeer Reinsurance Ltd.																YES	
2600000	Total Unguitherized Other pan II O Income:																VVV	
2699999	Total Unauthorized - Other non-U.S. Insurers#											-	-				XXX	
2799999	Total Unauthorized - Protected Cells										1		1	1			XXX	1

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

		T									T							
		Reinsur 37	rance Recove	erable on Paid	Losses and F Overdue	Paid Loss Adj	ustment Expe	nses 43	44	45	46	47	48	49	50	51	52	53
		31	38	39	40	41	42	43								+		
ID Number From	Name of Reinsurer		1- 29	30 - 90	91 - 120	Over 120	Total Overdue Cols. 38 +	Total Due Cols. 37 + 42 (In total should Equal	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in	Recoverable on Paid Losse & LAE Over 90 Days Past Due Amounts in Dispute Included in		Recoverable on Paid Losse & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 +	Amounts Received Prio	Percentage Overdue C	in Dispute	Percentage Mor Than 120 Days Overdue	Is the Amount in Col. 50 Less Than 20%?	Amounts in Col. 4 for Reinsurers wit Values Less Tha
Col. 1	From Col. 3	Current	Days	Days	Days	Days	+ 40 + 41	Cols. 7 + 8)	Col. 43	Cols. 40 & 41	(Cols. 43 - 44)	41 - 45)	90 Days	42/Col. 43	46 + 48)	(Col. 41/Col. 43)	(Yes or No)	20% in Col. 50
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells																XXX	
CR-3194126 CR-1340125 CR-1340125 CR-1340125 CR-1340125 CR-3190875 CR-1460100	Arch Reinsurance Ltd Arch Reinsurance Ltd (Quantedge) Hannover Re (Pillar ) - Including CAT Bond Hannover Rück SE Hannover Rück SE (Credit) Hannover Rück SE (Eskatos business) Hiscox Insurance Company (Bermuda) Limited New Reinsurance Company Ltd. XL Bermuda Ltd																YES	
4099999	Total Certified - Other Non-U.S. Insurers#																XXX	
4199999	Total Certified - Protected Cells																XXX	
4299999	Total Certified - Total Certified Excluding Protected Cells																XXX	
4299999	Total Certified - Total Certified Excluding Protected Cells																^^^	
4399999	Total Authorized, Unauthorized and Certified Excluding Protected C	7						7			7						XXX	
0000000	Totala	7						7			7							
9999999	Totals	/				1		- /	1	1	1			1	1		XXX	1

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

		54		50									05		0   50   111   0		
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if	Col. 52 = "No"; O	therwise Enter 0	69
								Percent of						66	67	68	
								Collateral									
								Provided for									
				1				Net									
						Net		Recoverables	Percent Credit	20% of		Provision for	20% of				Provision for
						Recoverable		Subject to	Allowed on Net	Recoverable		Reinsurance	Recoverable				Overdue
						Subject to		Collateral	Recoverables	on Paid Losses	Amounts of	with Certified	on Paid Losse	1			Reinsurance Ced
				Percent	Catatrophic	Collatereal		Requirements	Subject to Collate	& LAE Over	Credit Allowed	Reinsurers Du		Provided	Net Unsecured		to Certified
ID		Certified	Effective D	Collateral	Recoverables	Requirement	Dollar Amount	([Col. 20 + Col.	Requirements	90 Days Past	for Net	to Collateral	90 Days Past	,	Recoverable fo		Reinsurers ( Grea
Number	Name of	Reinsurer	of Certififed	Required for	Qualifying for	for Full Credi	of Collateral	21 + Col.22 +	(Col. 60 / Col.	Due Amounts	Recoverables	Defciency	Due Amounts	1	Which Credit		of [ Col. 62 + Col.
From	Reinsurer	Rating	Reinsurer	Full Credit (0%	Collateral	(Col. 19 -	Required (Col	Col. 24]/	56, not to	in Dispute	(Col. 57 +[Col.	(Col. 19 -	Not in Dispute	'	1	20% of Amount	1 *
Col. 1	From Col. 3	(1 through 6)	Rating	through 100%)	Deferral	Col. 57)	56 * Col. 58)	Col. 58)	exceed 100%)	(Col. 45 * 20%)	58 * Col. 61 ])	Col. 63)	(Col. 47 * 20	Exceed Col 6	(Col. 63 -Col. 6	in Col. 67	to Exceed Col. 63
22-2005057	Everest Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-2673100	General Reinsurance Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-3138390	Navigators Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-0698507	Odyssey Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
23-1641984	QBE Reinsurance Corporation	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
31-0542366	The Cincinnati Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-5616275	Transatlantic Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46-1168622	Maison Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-1005834	The Woodlands Ins Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
59-3560143	United Property & Casualty Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
90-0797817	Weston Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
46-3943172	Safepoint Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0999999	Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194168	Aspen Bermuda Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194139	AXIS Specialty Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191376	Cerulean Re SAC Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194122	DaVinci Reinsurance Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340125	Hannover Re Old CAT Bond	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340125	Hannover Rück SE (Markel CATCo-Re Aquilo business)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126566	Lloyd's Underwriter Syndicate No. 0566 STN	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127084	Lloyd's Underwriter Syndicate No. 1084 CSL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127183	Lloyd's Underwriter Syndicate No. 1183 TAL	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	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
AA-1127414	Lloyd's Underwriter Syndicate No. 1414 ASC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120102	Lloyd's Underwriter Syndicate No. 1458 RNR	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120156	Lloyd's Underwriter Syndicate No. 1686 AXS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

		54	55	56	57	58	59	60	61	62	63	64	65	Complete if	Col. 52 = "No"; C	therwise Enter 0	69
								Percent of						66	67	68	
								Collateral									
								Provided for									
								Net	D 10 11	20% of		D	000/ (				D
				-		Net Recoverable		Recoverables Subject to	Percent Credit Allowed on Net	Recoverable	•	Provision for Reinsurance	20% of Recoverable				Provision for Overdue
						Subject to		Collateral	Recoverables	on Paid Losses	Amounts of	with Certified	on Paid Losse	Total Collater			Reinsurance Ced
				Percent	Catatrophic	Collatereal		Requirements	Subject to Collate	& LAE Over	Credit Allowed	Reinsurers Du		Provided	Net Unsecured		to Certified
ID		Certified	Effective D	Collateral	Recoverables	Requirement	Dollar Amount	([Col. 20 + Col.	Requirements	90 Days Past	for Net	to Collateral	90 Days Past	1	Recoverable fo		Reinsurers ( Grea
Number	Name of	Reinsurer	of Certififed	Required for	Qualifying for	for Full Credi	of Collateral	21 + Col.22 +	(Col. 60 / Col.	Due Amounts	Recoverables	Defciency	Due Amounts	21 + Col. 22	Which Credit		of [ Col. 62 + Col.
From	Reinsurer	Rating	Reinsurer	Full Credit (0%	Collateral	(Col. 19 -	Required (Col	Col. 24]/	56, not to	in Dispute	(Col. 57 +[Col.	(Col. 19 -	Not in Dispute	Col.24; not to	is Allowed	20% of Amount	65] or Col.68; not
Col. 1	From Col. 3	(1 through 6)	Rating	through 100%)	Deferral	Col. 57)	56 * Col. 58)	Col. 58)	exceed 100%)	(Col. 45 * 20%)	58 * Col. 61 ])	Col. 63)	(Col. 47 * 20	Exceed Col 6	(Col. 63 -Col. 6	in Col. 67	to Exceed Col. 63
AA-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-1128003	Lloyd's Underwriter Syndicate No. 2003 XLC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120097 AA-1120097	Lloyd's Underwriter Syndicate No. 2468 NEO Lloyd's Underwriter Syndicate No. 2468 NEO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120097 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 Underwriter Syndicate No. 4444 CNP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190829	Markel Bermuda Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190686	Partner Reinsurance Company Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190339	Renaissance Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190870	Validus Reinsurance, Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1299999	L I I I I I I I I I I I I I I I I I I I				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1399999	Total Authorized - Protected Cells				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-1464104	Allianz Risk Transfer AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1464104	Allianz Risk Transfer AG (Nephila business)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190932	Argo Re Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191352	Ascot Reinsurance Company Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9240012	China Property & Casualty Reinsurance Company Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190770	Chubb Tempest Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191289	Fidelis Insurance Bermuda Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120175	Fidelis Underwriting Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191190	Hamilton Re, Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-8310008	Humboldt Re Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-8310006	Kelvin Re Limited	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

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

							-										
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if	Col. 52 = "No"; O	Otherwise Enter 0	69
								Percent of						66	67	68	
								Collateral									
								Provided for									
								Net									
						Net		Recoverables	Percent Credit	20% of		Provision for	20% of				Provision for
						Recoverable		Subject to	Allowed on Net	Recoverable		Reinsurance					Overdue
						Subject to		Collateral	Recoverables	on Paid Losses	Amounts of	with Certified	on Paid Losse	Total Collater	l		Reinsurance Ced
I ID		Certified	Effective D	Percent	Catatrophic Recoverables	Collatereal	D-II A	Requirements	Subject to Collate	& LAE Over	Credit Allowed for Net	Reinsurers Du to Collateral		Provided	Net Unsecured		to Certified
Number	Name of	Reinsurer	of Certififed	Collateral Required for	Qualifying for	Requirement for Full Credi	Dollar Amount of Collateral	([Col. 20 + Col. 21 + Col.22 +	Requirements (Col. 60 / Col.	90 Days Past Due Amounts	Recoverables	Defciency	90 Days Past Due Amounts	21 + Col. 22	Recoverable fo Which Credit	-	Reinsurers ( Grea of [ Col. 62 + Col.
From	Reinsurer	Rating	Reinsurer	Full Credit (0%	Collateral	(Col. 19 -	Required (Col	Col. 24]/	56. not to	in Dispute	(Col. 57 +[Col.	(Col. 19 -	Not in Dispute		1	20% of Amount	1 -
Col. 1	From Col. 3	(1 through 6)	Rating	through 100%)	Deferral	Col. 13	56 * Col. 58)	Col. 58)	exceed 100%)	(Col. 45 * 20%)		Col. 63)	(Col. 47 * 20	Exceed Col 6			to Exceed Col. 63
001.1	110111 001. 0	(Tallough o)	rading	unough 100%)	Doloria	001. 01 )	00 001.00)	001. 00)	CXCCCQ 10070)	(001: 40 2070)	00 001.01])	001.00)	(001. 47 20		(001: 00 001: 0	111 001. 07	to Exceed Coil Co
AA-1240051	QBE Europe SA / NV	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Taiping Reinsurance Company Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-5340660	The New India Assurance Company Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191295	Third Point Reinsurance (USA) Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191388	Vermeer Reinsurance Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2000000	T-t-III				VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV	VVV
-	Total Unauthorized - Other non-U.S. Insurers# Total Unauthorized - Protected Cells				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2799999	Total Unauthonzed - Protected Cells				^^^		^^^	^^^	^^^			^^^	***	^^^		^^^	^^^
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
CR-3194126	Arch Reinsurance Ltd	2	1/1/2019	10.000		(387)	(39)										
	Arch Reinsurance Ltd (Quantedge)	2	1/1/2019	10.000		(61)	(6)										
CR-1340125	Hannover Re (Pillar ) - Including CAT Bond	2	11/20/2018	10.000		(2,632)	(263)										1
CR-1340125	Hannover Rück SE	2	11/20/2018	10.000		(107)	(11)										
	Hannover Rück SE (Credit)	2	11/20/2018	10.000		(72)	(7)						1				1
	Hannover Rück SE (Eskatos business)	2	11/20/2018	10.000		(46)	(5)										
	Hiscox Insurance Company (Bermuda) Limited	3	1/22/2019	20.000		(129)	(26)										
	New Reinsurance Company Ltd.	2	4/4/2019	10.000		(64)	(6)										
CR-3191315	XL Bermuda Ltd	2	1/1/2019	10.000		(129)	(13)										
	Total Certified - Other Non-U.S. Insurers#					(3,627)	(376)	XXX	XXX								
4199999	Total Certified - Protected Cells							XXX	XXX								
4299999	Total Certified - Total Certified Excluding Protected Cells					(3,627)	(376)	XXX	XXX								
4399999	Total Authorized, Unauthorized and Certified Excluding Protected Cel	ls		1		(3,627)	(376)	XXX	XXX								
		1		1			1		1	1	1	1	1		1	1	1

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

	1	70	Dravisian for Unavi	therized Deineuranes	Dravisian for Overdue	Authorized Reinsurance	T	Total Provision	for Deineuronee	
		/0	71	thorized Reinsurance 72	73	Authorized Reinsurance 74	75	76	for Reinsurance 77	78
			/ 1	12	Complete if	Complete if	13	10	11	10
						1				
					Col. 52 = "Yes";	Col. 52 = "No";				
					Otherwise Enter 0	Otherwise Enter 0				
			Provision for	Provision for Overdue	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts	Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid				
		20% of Recoverable on	Reinsurance with	Reinsurance from	Not in Dispute + 20%	Losses & LAE Over 90		Provision for Amounts		
ID		Paid Losses & LAE Over	Unauthorized	Unauthorized Reinsurers	of Amounts in	Days Past Due	Provision for Amounts	Ceded to Unauthorized	Provision for Amounts	
Number	Name of	90 Days Past Due Amounts	Reinsurers Due to	and Amounts in Dispute	Dispute	(Greater of Col 26 *	Ceded to Authorized	Reinsurers	Ceded to Certified	Total Provision for
From	Reinsurer	Not in Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or	Reinsurers	(Cols. 71 + 72 Not in Excess	Reinsurers	Reinsurance
Col. 1	From Col. 3	(Col. 47 * 20%)	(Col. 26)	Amount in Col. 16)	[Col. 45 * 20%])	[Cols. 40 + 41] * 20%)	(Cols. 73 + 74)	of Col. 15)	(Cols. 64 + 69)	(Cols. 75 + 76 +77)
	2									
22-2005057	Everest Reinsurance Company		XXX	XXX				XXX	XXX	
13-2673100	General Reinsurance Corporation		XXX	XXX				XXX	XXX	
13-3138390	Navigators Insurance Company		XXX	XXX				XXX	XXX	
<b>4</b> 7-0698507	Odyssey Reinsurance Company		XXX	XXX				XXX	XXX	
23-1641984	QBE Reinsurance Corporation		XXX	XXX				XXX	XXX	
13-1675535	Swiss Reinsurance America Corporation		XXX	XXX				XXX	XXX	
31-0542366	The Cincinnati Insurance Company		XXX	XXX				XXX	XXX	
13-5616275	Transatlantic Reinsurance Company		XXX	XXX				XXX	XXX	
46-1168622	Maison Insurance Company		XXX	XXX				XXX	XXX	
47-1005834	The Woodlands Ins Company		XXX	XXX				XXX	XXX	
59-3560143	United Property & Casualty Insurance Company		XXX	XXX				XXX	XXX	
90-0797817	Weston Insurance Company		XXX	XXX			l	XXX	XXX	
46-3943172	Safepoint Insurance Company		XXX	XXX				XXX	XXX	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX				XXX	XXX	
AA-3194168	Aspen Bermuda Limited		XXX	XXX				XXX	XXX	
AA-3194139	AXIS Specialty Limited		XXX	XXX				XXX	XXX	
AA-3191376	Cerulean Re SAC Ltd.		XXX	XXX				XXX	XXX	
AA-3194122	DaVinci Reinsurance Limited		XXX	XXX				XXX	XXX	
AA-1340125	Hannover Re Old CAT Bond		XXX	XXX				XXX	XXX	
AA-1340125	Hannover Rück SE (Markel CATCo-Re Aquilo business)		XXX	XXX				XXX	XXX	
AA-1126566	Lloyd's Underwriter Syndicate No. 0566 STN		XXX	XXX				XXX	XXX	
AA-1127084	Lloyd's Underwriter Syndicate No. 1084 CSL		XXX	XXX				XXX	XXX	
AA-1127183	Lloyd's Underwriter Syndicate No. 1004 CCL		XXX	XXX				XXX	XXX	
AA-1120085	Lloyd's Underwriter Syndicate No. 1703 TAL  Lloyd's Underwriter Syndicate No. 1274 AUL		XXX	XXX				XXX	XXX	
AA-1120003	Lloyd's Underwriter Syndicate No. 1274 AGE		XXX	XXX				XXX	XXX	
AA-1120102	Lloyd's Underwriter Syndicate No. 1414 ASC		XXX	XXX				XXX	XXX	
AA-1120102 AA-1120156	Lloyd's Underwriter Syndicate No. 1456 RNR Lloyd's Underwriter Syndicate No. 1686 AXS			XXX				XXX	XXX	
AA-1120130	Liuyu s Uniderwinter Syridicate No. 1000 AAS	1	^^^		L	<b>1</b>	<u> </u>			

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

	T	70	Provision for Unau	thorized Reinsurance	Provision for Overdue	Authorized Reinsurance		Total Provision	for Reinsurance	
		'0	71	72	73	74	75	76	77	78
			7.1	12	Complete if	Complete if			1	
					Col. 52 = "Yes";	Col. 52 = "No";				
					Otherwise Enter 0	Otherwise Enter 0				
					Otherwise Linter o	Otherwise Linter 0				
						Greater of 20% of Net				
					20% of Recoverable	Recoverable Net of			•	
					on Paid Losses &	Funds Held &			•	
					LAE Over 90 Days	Collateral, or 20% of			•	
			Provision for	Provision for Overdue	Past Due Amounts	Recoverable on Paid			•	
		20% of Recoverable on	Reinsurance with	Reinsurance from	Not in Dispute + 20%	Losses & LAE Over 90		Provision for Amounts	•	
ID		Paid Losses & LAE Over	Unauthorized	Unauthorized Reinsurers	of Amounts in	Days Past Due	Provision for Amounts	Ceded to Unauthorized	Provision for Amounts	
Number	Name of	90 Days Past Due Amounts	Reinsurers Due to	and Amounts in Dispute	Dispute	(Greater of Col 26 *	Ceded to Authorized	Reinsurers	Ceded to Certified	Total Provision for
From	Reinsurer	Not in Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or	Reinsurers	(Cols. 71 + 72 Not in Excess	Reinsurers	Reinsurance
Col. 1	From Col. 3	(Col. 47 * 20%)	(Col. 26)	Amount in Col. 16)	[Col. 45 * 20%])	[Cols. 40 + 41] * 20%)	(Cols. 73 + 74)	of Col. 15)	(Cols. 64 + 69)	(Cols. 75 + 76 +77)
AA-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-1128003	Lloyd's Underwriter Syndicate No. 2003 XLC		XXX	XXX				XXX	XXX	
AA-1120097	Lloyd's Underwriter Syndicate No. 2468 NEO		XXX	XXX				XXX	XXX	
AA-1120097	Lloyd's Underwriter Syndicate No. 2468 NEO		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	
AA-1126004	Lloyd's Underwriter Syndicate No. 4444 CNP		XXX	XXX				XXX	XXX	
AA-3190829	Markel Bermuda Limited		XXX	XXX				XXX	XXX	
AA-3190686	Partner Reinsurance Company Ltd.		XXX	XXX				XXX	XXX	
AA-3190339	Renaissance Reinsurance Ltd.		XXX	XXX				XXX	XXX	
AA-3190870	Validus Reinsurance, Ltd.		XXX	XXX				XXX	XXX	
1299999	Total Authorized - Other Non-U.S. Insurers#		XXX	XXX				XXX	XXX	
1399999	Total Authorized - Protected Cells		XXX	XXX				XXX	XXX	
1499999	Total Authorized - Total Authorized Excluding Protected Cells		XXX	XXX				XXX	XXX	
1100000	Total / dullorized Total / dullorized Excluding 1 Total de Colle		7000	7000				7000	7000	
AA-1464104	Allianz Risk Transfer AG				XXX	XXX	XXX		XXX	
AA-1464104	Allianz Risk Transfer AG (Nephila business)				XXX	XXX	XXX		XXX	
AA-3190932	Argo Re Limited				XXX	XXX	XXX		XXX	
AA-3191352	Ascot Reinsurance Company Limited				XXX	XXX	XXX		XXX	
AA-9240012	China Property & Casualty Reinsurance Company Limited				XXX	XXX	XXX		XXX	
AA-3190770	Chubb Tempest Reinsurance Ltd.				XXX	XXX	XXX		XXX	
AA-3191289	Fidelis Insurance Bermuda Limited				XXX	XXX	XXX		XXX	
AA-1120175	Fidelis Underwriting Limited				XXX	XXX	XXX		XXX	
AA-3191190	Hamilton Re, Ltd.				XXX	XXX	XXX		XXX	
AA-8310008	Humboldt Re Limited				XXX	XXX	XXX		XXX	
AA-8310006	Kelvin Re Limited				XXX	XXX	XXX		XXX	
AA-5420050	Korean Reinsurance Company			1	XXX	XXX	XXX	1	XXX	1

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

		70	Provision for Unaut	horized Reinsurance	Provision for Overdue	Authorized Reinsurance		Total Provision 1	for Reinsurance	
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col 26 * 20% or [Cols. 40 + 41] * 20%)	Provision for Amounts Ceded to Authorized Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 +77)
AA-1240051 AA-5324100 AA-5340660 AA-3191295 AA-3191388	QBE Europe SA / NV Taiping Reinsurance Company Limited The New India Assurance Company Limited Third Point Reinsurance (USA) Ltd. Vermeer Reinsurance Ltd.				XXX XXX XXX XXX	XXX XXX XXX XXX	XXX XXX XXX XXX		XXX XXX XXX XXX XXX	
2699999	Total Unauthorized - Other non-U.S. Insurers#				XXX	XXX	XXX		XXX	
2799999	Total Unauthorized - Protected Cells				XXX	XXX	XXX		XXX	
					1004	1004	100/		100/	
2899999	Total Unauthorized - Total Unauthorized Excluding Protected Cells				XXX	XXX	XXX		XXX	
CR-3194126 CR-3194126 CR-1340125 CR-1340125 CR-1340125 CR-1340125 CR-3190875 CR-1460100 CR-3191315	Arch Reinsurance Ltd Arch Reinsurance Ltd (Quantedge) Hannover Re (Pillar ) - Including CAT Bond Hannover Rück SE Hannover Rück SE (Credit) Hannover Rück SE (Eskatos business) Hiscox Insurance Company (Bermuda) Limited New Reinsurance Company Ltd. XL Bermuda Ltd	XXX XXX XXX XXX XXX XXX XXX XXX	XXX XXX XXX XXX XXX XXX XXX XXX XXX	XXX XXX XXX XXX XXX XXX XXX XXX	XXX XXX XXX XXX XXX XXX XXX	XXX XXX XXX XXX XXX XXX XXX	XXX XXX XXX XXX XXX XXX XXX XXX XXX	XXX XXX XXX XXX XXX XXX XXX XXX		
4099999	Total Certified - Other Non-U.S. Insurers#	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4199999	Total Certified - Protected Cells	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4299999	Total Certified - Total Certified Excluding Protected Cells	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4399999	Total Authorized, Unauthorized and Certified Excluding Protected Cells									
9999999	Totals									

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

			nks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)	
1	2	3	4	5
Issuing or Confirming Bank				
Reference Number Used in Col. 23 of Sch F Part 3	Letters of	American Bankers Association (ABA) Routing Number		
Sch F Part 3	Credit Code	Number	Issuing or Confirming Bank Name	Letters of Credit Amount
			NONE	
	[]			
999999 Total				

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

	1	2	3	
	Name of Reinsurer	Commission Rate	Ceded Premium	
1.	· · · · · · · · · · · · · · · · · · ·			
2.	•			
3.	•			
4.	·			
5.	·			
В.	Report the five largest reinsurance recoverables reported in F, Part 3, Line 9999999, Column 15, the amount of ceded	•	,	, Schedule
B.	•	•	,	s, Schedule
В.	F, Part 3, Line 9999999, Column 15, the amount of ceded	premium, and indicate whether the recoverable	s are due from an affiliated insurer.	4
	F, Part 3, Line 9999999, Column 15, the amount of ceded  1  Name of Reinsurer	•	,	4 Affiliated
B. 6.	F, Part 3, Line 9999999, Column 15, the amount of ceded  1  Name of Reinsurer  United Property & Casualty Insurance Company	premium, and indicate whether the recoverable	s are due from an affiliated insurer.	4
	F, Part 3, Line 9999999, Column 15, the amount of ceded  1  Name of Reinsurer  United Property & Casualty Insurance Company	premium, and indicate whether the recoverable	s are due from an affiliated insurer.	4 Affiliated
	F, Part 3, Line 9999999, Column 15, the amount of ceded  1  Name of Reinsurer	premium, and indicate whether the recoverable	s are due from an affiliated insurer.  3 Ceded Premium	4 Affiliated Yes[] No[X]
6. 7.	F, Part 3, Line 9999999, Column 15, the amount of ceded  1  Name of Reinsurer  United Property & Casualty Insurance Company  Weston Insurance Company	premium, and indicate whether the recoverable	s are due from an affiliated insurer.  3 Ceded Premium 1,593	4 Affiliated Yes[] No[X] Yes[] No[X]

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

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

		1	2	3
		As Reported	Restatement	Restated
		(Net of Ceded)	Adjustments	(Gross of Ceded)
ASSET	FS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	514,611,122		514,611,122
2.	/	116,418		116,418
3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	6,826	(6,826)	
4.	Funds held by or deposited with reinsured companies (Line 16.2)			
5.	Other assets	91,382,438		91,382,438
6.	Net amount recoverable from reinsurers		(22,485,211)	(22,485,211)
7.	Protected cell assets (Line 27)			
8.	Totals (Line 28)	606,116,804	(22,492,037)	583,624,767
LIABIL	ITIES (Page 3)			
9.	Losses and loss adjustment expenses (Lines 1 through 3)	169,130,021	67,973	169,197,994
10.	Taxes, expenses, and other obligations (Lines 4 through 8)	341,703,794		341,703,794
11.		185,495,369		185,495,369
12.		6,588,932		6,588,932
13.	Dividends declared and unpaid (Line 11.1 and 11.2)			
14.	Ceded reinsurance premiums payable (net of ceding commissions) (Line 12)	22,381,265	(22,381,265)	
15.	Funds held by company under reinsurance treaties (Line 13)	470.745	(178,745)	
16.	Amounts withheld or retained by company for account of others (Line 14)			
17.				
18.		64,430,456		64,430,456
19.	Total liabilities excluding protected cell business (Line 26)	789,908,582	(22,492,037)	, ,
20.	Protected cell liabilities (Line 27)			
21.	, , , , , , , , , , , , , , , , , , , ,	(183,791,778)	XXX	(183,791,778)
	Totals (Line 38)	606,116,804	(22,492,037)	583,624,767

If yes, give full explanation:

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

or pooling arrangements? Yes [ ] No [ X ]

NONE Schedule H - Part 1

NONE Schedule H - Part 2, 3 and 4

NONE Schedule H - Part 5

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

(\$000 omitted)

	Pr	emiums Earne	d			Lo	ss and Loss E	xpense Payme	nts			12
Years in	1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	yments	Containmer	t Payments	and Other	Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX			221		290			511	XXX
2. 2010	383,424	31,694	351,730	18,005		323		3,951		24	22,279	XXX
3. 2011	385,000	63,219	321,781	96,089		725		14,386		48	111,200	XXX
4. 2012	429,594	108,472	321,122	66,741		829		14,961		69	82,531	XXX
5. 2013	456,630	161,499	295,131	70,811		901		12,922		72	84,634	XXX
6. 2014	484,049	116,493	367,556	7,002		1,017		5,796		126	13,815	XXX
7. 2015	501,722	124,128	377,594	138,583		2,679		37,109		3	178,371	XXX
8. 2016	496,457	126,053	370,404	28,409	18	484		14,882	12	64	43,745	XXX
9. 2017	451,347	103,993	347,354	1,338,484	966	6,905	20	249,300	206	502	1,593,497	XXX
10. 2018	409,954	108,439	301,515	11,663	50	117		6,280	20	18	17,990	XXX
11. 2019	381,571	94,094	287,477	12,936	56	7	2	7,053	20	3	19,918	XXX
12. Totals	XXX	XXX	XXX	1,788,723	1,090	14,208	22	366,930	258	929	2,168,491	XXX

		Losses	Unpaid		Defen	se and Cost (	Containment L	Jnpaid	Adjusti	ing and	23	24	25
	Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	Other	Unpaid			Number of
	13	14	15	16	17	18	19	20	21	22		Total Net	Claims
											Salvage	Losses	Outstanding
	Direct		Direct		Direct		Direct		Direct		and	and	Direct
	and		and		and		and		and		Subrogation	Expenses	and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1. Prior	1,531		16,264		721		1,553		716			20,785	XXX
2. 2010													XXX
3. 2011													XXX
4. 2012	747		9		39		3					798	XXX
5. 2013			14						4			18	XXX
6. 2014	3		7		9		2					21	XXX
7. 2015	86		132		230		35		34			517	XXX
8. 2016	9		105		58		29		3			204	XXX
9. 2017	50,532		56,572	3	7,602	15	7,358		17,203			139,249	XXX
10. 2018	396		267	1	228	l	16		98			1,004	XXX
11. 2019	1,313	8	3,906	17	34	18	7		1,325	6		6,536	XXX
12. Totals	54,617	8	77,276	21	8,921	33	9,003		19,383	6		169,132	XXX

		To	otal Losses and		Loss and L	oss Expense Pe	ercentage			34	Net Bala	ince Sheet
		Loss	Expenses Incu	rred	(Incurre	ed/Premiums Ea	arned)	Nontabul	ar Discount	Inter-	Reserves A	After Discount
		26	27	28	29	30	31	32	33	Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	17,795	2,990
2.	2010	22,279		22,279	5.811		6.334					
3.	2011	111,200		111,200	28.883		34.558					
4.	2012	83,329		83,329	19.397		25.949				756	42
5.	2013	84,652		84,652	18.538		28.683				14	4
6.	2014	13,836		13,836	2.858		3.764				10	1.
7.	2015	178,888		178,888	35.655		47.376				218	299
8.	2016	43,979	30	43,949	8.859	0.024	11.865		1		114	90
9.	2017	1,733,956	1,210	1,732,746	384.174	1.164	498.842		1		107,101	32,148
10.	2018	19,065	71	18,994	4.651	0.065	6.300				662	342
11.	2019	26,581	127	26,454	6.966	0.135	9.202				5,194	1,342
12.	Totals	XXX	XXX	xxx	XXX	XXX	XXX			XXX	131,864	37,268

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

## SCHEDULE P - PART 2 - SUMMARY

	INCUR	RED NET LOS	SES AND DEF	ENSE AND C	OST CONTAIN	IMENT EXPEN	SES REPORT	ED AT YEAR E	END (\$000 OM	ITTED)	DEVEL	OPMENT
Years in	1	2	3	4	5	6	7	8	9	10	11	12
Which												
Losses Were											One	Two
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Year	Year
1. Prior	216,709	316,574	621,755	521,028	495,669	488,891	488,288	479,039	478,627	478,178	(449)	(861)
2. 2010	15,605	18,477	18,495	18,844	18,696	18,591	18,343	18,375	18,353	18,328	(25)	(47)
3. 2011	XXX	95,386	97,559	98,106	97,510	96,893	96,709	97,107	97,015	96,814	(201)	(293)
4. 2012	XXX	XXX	63,238	70,390	68,006	67,357	67,245	68,538	68,482	68,368	(114)	(170)
5. 2013	XXX	XXX	XXX	77,923	76,010	73,574	72,912	72,277	72,039	71,726	(313)	(551)
6. 2014	XXX	XXX	XXX	XXX	7,255	8,346	8,383	8,527	8,145	8,040	(105)	(487)
7. 2015	XXX	XXX	XXX	XXX	XXX	148,901	141,773	142,814	142,526	141,745	(781)	(1,069)
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	31,669	30,271	29,636	29,076	(560)	(1,195)
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,278,036	1,389,339	1,466,449	77,110	188,413
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,463	12,636	(827)	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,102	XXX	XXX
									12. Totals		73,735	183,740

## **SCHEDULE P - PART 3 - SUMMARY**

	CUMULAT	VE PAID NET	LOSSES AND	DEFENSE AN	D COST CON	TAINMENT EX	PENSES REP	ORTED AT YE	AR END (\$000	OMITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Payment	Payment
1. Prior	000	97,059	284,840	420,899	443,091	449,103	453,307	455,342	457,888	458,109	XXX	XXX
2. 2010	10,706	14,827	16,987	18,413	18,437	18,572	18,328	18,328	18,328	18,328	XXX	XXX
3. 2011	XXX	77,392	88,433	95,197	95,726	96,316	96,493	96,814	96,814	96,814	XXX	XXX
4. 2012	XXX	XXX	47,906	63,347	65,653	66,047	66,299	67,561	67,570	67,570	XXX	XXX
5. 2013	XXX	XXX	XXX	67,645	71,138	71,467	71,583	71,676	71,712	71,712	XXX	XXX
6. 2014	XXX	XXX	XXX	XXX	4,880	7,312	7,706	8,043	8,019	8,019	XXX	XXX
7. 2015	XXX	XXX	XXX	XXX	XXX	127,928	138,288	139,087	140,663	141,262	XXX	XXX
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	24,665	28,353	28,821	28,875	XXX	XXX
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	945,431	1,243,600	1,344,403	XXX	XXX
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,076	11,730	XXX	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,885	XXX	XXX

## SCHEDULE P - PART 4 - SUMMARY

	BULK /	AND IBNR RESE	RVES ON NET LO	DSSES AND DEF	ENSE AND COST	CONTAINMENT	EXPENSES REF	PORTED AT YEA	R END (\$000 OM	ITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	94,494	107,570	220,310	89,421	46,234	35,161	31,534	20,187	18,437	17,81
2. 2010	832	83		219	36		15	47	25	
3. 2011	XXX	4,424	2,912	1,826	917	483		259	201	
4. 2012	XXX	XXX	7,378	4,349	1,467	622	52	190	126	1
5. 2013	XXX	XXX	XXX	8,794	4,270	1,875	1,205	580	322	
6. 2014	XXX	XXX	XXX	XXX	1,536	232	85	99	65	
7. 2015	XXX	XXX	XXX	XXX	XXX	15,183	1,081	1,589	1,333	16
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	5,435	1,344	589	13
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	267,831	78,255	63,92
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,175	28
11. 2019	xxx	XXX	XXX	XXX	xxx	XXX	xxx	XXX	XXX	3,89

NONE Schedule P - Part 1A Homeowners/Farmowners

NONE Schedule P - Part 1B Private Passenger

NONE Schedule P - Part 1C Commercial Auto

NONE Schedule P - Part 1D Workers Compensation

NONE Schedule P - Part 1E Commercial Multiple Peril

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

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

NONE Schedule P - Part 1G Special Liability

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

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

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

(\$000 omitted)

	Pr	emiums Earne	ed			Lo	Loss and Loss Expense Payments					
Years in	1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	yments	Containmer	nent Payments and Other		Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	-7+8-9)	Assumed
1. Prior	XXX	XXX	XXX	96,562	17	5,134	2	19,532		61	121,209	XXX
2. 2018	409,954	108,439	301,515	11,663	50	117		6,280	20	18	17,990	XXX
3. 2019	381,571	94,094	287,477	12,936	56	7	2	7,053	20	3	19,918	XXX
4. Totals	XXX	XXX	XXX	121,161	123	5,258	4	32,865	40	82	159,117	XXX

			Losses	Unpaid		Defens	se and Cost (	Containment I	inment Unpaid Adjusting and				24	25
		Case Basis		Bulk +	IBNR	Case	Basis	Bulk +	· IBNR	Other I	Unpaid			Number of
		13	14	15	16	17	18	19	20	21	22		Total Net	Claims
												Salvage	Losses	Outstanding
		Direct		Direct		Direct		Direct		Direct		and	and	Direct
		and		and		and		and		and		Subrogation	Expenses	and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	52,908		73,103	3	8,659	15	8,980		17,960			161,592	1,053
2.	2018	396		267	1	228		16		98			1,004	82
3.	2019	1,313	8	3,906	17	34	18	7		1,325	6		6,536	341
4.	Totals	54,617	8	77,276	21	8,921	33	9,003		19,383	6		169,132	1,476

		Т	otal Losses an	d	Loss and L	oss Expense F	Percentage			34	Net Bala	nce Sheet
		Loss	Expenses Incu	ırred	(Incurr	ed/Premiums E	arned)	Nontabula	r Discount	Inter-	Reserves A	fter Discount
		26	27	28	29	30	31	32	33	Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	126,008	35,584
2.	2018	19,065	71	18,994	4.651	0.065	6.300			[	662	342
3.	2019	26,581	127	26,454	6.966	0.135	9.202				5,194	1,342
4.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	131,864	37,268

NONE Schedule P - Part 1J Auto Physical Damage

NONE Schedule P - Part 1K Fidelity/Surety

NONE Schedule P - Part 1L Other

NONE Schedule P - Part 1M International

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

NONE Schedule P - Part 10 Nonproportional Assumed Liab.

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

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

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

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

NONE Schedule P - Part 1T - Warranty

NONE Schedule P - Part 2A, 2B, 2C, 2D, 2E

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

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

Years in	INCURRE	D NET LOSS	ES AND DEF	ENSE AND CO	OST CONTAIN	IMENT EXPE	NSES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	364,349	473,527	548,089	74,562	183,740
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13,463	12,636	(827)	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,102	XXX	XXX
								4 Totals			73 735	183 740

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

Years in	INCURRE	D NET LOSS	ES AND DEFE	ENSE AND CO	OST CONTAIN	MENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 (	OMITTED)	DEVELC	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX					
2. 2018	XXX	XXX	XXX	XXX	XXX			XXX				XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX	XXX		XXX	XXX
								4 Totals				

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

Years in	INCURRE	D NET LOSS	ES AND DEF	ENSE AND CO	OST CONTAIN	MENT EXPE	ISES REPOR	TED AT YEAR	R END (\$000 (	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Year	Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX					
2. 2018	XXX	XXX	XXX	XXX	XXX		) Nk F	XXX				XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
								4. Totals				

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

Years in	INCURRE	D NET LOSS	ES AND DEFE	NSE AND CO	OST CONTAIN	MENT EXPEN	ISES REPOR	TED AT YEAR	R END (\$000 (	OMITTED)	DEVELO	PMENT			
Which	1	2	3	4	5	6	7	8	9	10	11	12			
Losses Were											One	Two			
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Year	Year			
1. Prior	XXX	XXX	XXX	XXX	XXX	XIX	XXX								
2. 2018	XXX	XXX	XXX	XXX	XXX			XXX				XXX			
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX	XXX		XXX	XXX			
			4. Totals												

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

Years in	INCURRE	D NET LOSS	ES AND DEFI	ENSE AND CO	ST CONTAIN	IMENT EXPEN	ISES REPOR	TED AT YEAR	R END (\$000 C	OMITTED)	DEVELO	PMENT
Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were											One	Two
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Year	Year
1. Prior												
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX					_				
6. 2014	XXX	XXX	XXX	XXX		N(	)NF					
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2019	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

NONE Schedule P - Part 3A, 3B, 3C, 3D, 3E

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)

		-	-	-	-			-	-		l .	1
	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE A	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 OM	IITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	302,780	404,457	XXX	XXX
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,076	11,730	XXX	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,885	xxx	XXX

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

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE AI	ND COST CON	TAINMENT EXF	PENSES REPO	RTED AT YEAR	R END (\$000 OM	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	. X.	000				
2. 2018	XXX	XXX	XXX	XXX	XXX	. XX	JMt	XXX				
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

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

	CUMUI	ATIVE PAID N	ET LOSSES AN	D DEFENSE A	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 ON	IITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX.	000			XXX	XXX
2. 2018	XXX	XXX	XXX	XXX	XXX	. Avx	)NH	XXX			XXX	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	xxx

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

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE A	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	END (\$000 ON	IITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Payment	Payment
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	X. X. I	000			XXX	XXX
2. 2018	XXX	XXX	XXX	XXX	XXX	A XX	) N i	XXX			XXX	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		xxx	XXX

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

	CUMUI	LATIVE PAID N	ET LOSSES AN	ID DEFENSE AI	ND COST CON	TAINMENT EXF	ENSES REPO	RTED AT YEAR	R END (\$000 ON	(ITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Payment	Payment
1. Prior	000										XXX	XXX
2. 2010											XXX	XXX
3. 2011	XXX										XXX	XXX
4. 2012	XXX	XXX									XXX	XXX
5. 2013	XXX	XXX	XXX			. N.I.	N. N. I. F				XXX	XXX
6. 2014	XXX	XXX	XXX	XXX		N(	)NE				XXX	XXX
7. 2015	XXX	XXX	XXX	XXX	XXX	110					XXX	XXX
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2019	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

NONE Schedule P - Part 4A, 4B, 4C, 4D, 4E

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

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

	BULK AN	D IBNR RESER\	ES ON NET LO	SSES AND DEFE	ENSE AND COS	T CONTAINMEN	T EXPENSES RE	PORTED AT YE	AR END (\$000 C	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	271,939	80,916	82,080
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,175	282
3. 2019	xxx	xxx	xxx	xxx	xxx	xxx	xxx	XXX	xxx	3,896

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

	BULK AN	D IBNR RESERV	ES ON NET LO	SSES AND DEFE	ENSE AND COST	T CONTAINMEN	T EXPENSES R	EPORTED AT YE	EAR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	XXX	XXX	XXX	XXX	XIX	XXX	XXX			
2. 2018	XXX	XXX	XXX	XXX		N X K	XXX	XXX		
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

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

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

	BULK AN	D IBNR RESERV	ES ON NET LO	SSES AND DEFE	ENSE AND COST	T CONTAINMEN	T EXPENSES RE	EPORTED AT YE	EAR END (\$000 (	OMITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	XXX	XXX	XXX	XXX	XIX	. XXX	XXX			
2. 2018	XXX	XXX	XXX	XXX		NX T	XXX	XXX		
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**NONE** Schedule P - Part 5T - Warranty

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

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

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

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

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

NONE Schedule P - Part 7A

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

NONE Schedule P - Part 7B

NONE Schedule P - Part 7B (Continued)

#### SCHEDULE PINTERROGATORIES

	ЭСПЕРО	ILE P INTERROGAT	URIES						
1.	The following questions relate to yet-to-be-issued Extended Report provisions in Medical Professional Liability Claims Made insurance								
1.1	Does the company issue Medical Professional Liability Claims Mad endorsement, or "ERE") benefits in the event of Death, Disability, or			Yes[] No[X]					
	If the answer to question 1.1 is "no", leave the following questions by	plank. If the answer to question 1.1 is "y	res", please answer the following questions	3:					
1.2	What is the total amount of the reserve for that provision (DDR Res	serve), as reported, explicitly or not, else	where in this statement (in dollars)?	\$					
1.3	Does the company report any DDR reserve as Unearned Premium	Reserve per SSAP #65?		Yes [ ] No [ ]					
1.4	Does the company report any DDR reserve as loss or loss adjustm	ent expense reserve?		Yes [ ] No [ ]					
1.5	If the company reports DDR reserve as Unearned Premium Reserve Part 1A – Recapitulation of all Premiums (Page 7) Column 2, Lines		n the Underwriting and Investment Exhibit,	Yes[] No[] N/A[X]					
1.6	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:								
		DDD Dagas	ve Included in						
	ļ		dical Professional Liability						
			ses and Expenses Unpaid						
	Years in Which Premiums Were Earned and	1	2						
	Losses Were Incurred  1.601 Prior	Section 1: Occurrence	Section 2: Claims-Made						
	1.602 2010								
	1.604 2012								
	1.605 2013								
	1.606 2014								
	1.607 2015								
	1.608 2016								
	1.609 2017								
	1.610 2018 1.611 2019								
	1.612 Totals								
	The definition of allocated loss adjustment expenses (ALAE) and, the January 1, 1998. This change in definition applies to both paid and Containment" and "Adjusting and Other") reported in compliance with the compliance with the compliance of the compliance with the compliance of t	d unpaid expenses. Are these expenses ith these definitions in this statement?	s (now reported as "Defense and Cost	Yes[X] No[]					
3.	The Adjusting and Other expense payments and reserves should be of claims reported, closed and outstanding in those years. When a the Adjusting and Other expense should be allocated in the same p. Adjusting and Other expense assumed should be reported according reinsurers, or in those situations where suitable claim count informations are considered to the company and described in the company and the company and the co	allocating Adjusting and Other expense be bercentage used for the loss amounts ar ing to the reinsurance contract. For Adju ation is not available, Adjusting and Othe	between companies in a group or a pool, and the claim counts. For reinsurers, listing and Other expense incurred by the expense should be allocated by a	Voc I V I No. I 1					
	reasonable method determined by the company and described in Ir	nterrogatory 7, below. Are they so report	rteu iii tiiis Statement?	Yes [X] No []					
4.	Do any lines in Schedule P include reserves that are reported gross net of such discounts on Page 10?	s of any discount to present value of futo	ure payments, and that are reported	Yes[]No[X]					
	If yes, proper disclosure must be made in the Notes to Financial Strin Schedule P - Part 1, Columns 32 and 33.	atements, as specified in the Instruction	s. Also, the discounts must be reported						
	Schedule P must be completed gross of non-tabular discounting. W upon request.	Vork papers relating to discount calculati	ions must be available for examination						
	Discounting is allowed only if expressly permitted by the state insur	rance department to which this Annual S	Statement is being filed.						
5.	What were the net premiums in force at the end of the year for: (in thousands of dollars)		Fidelity Surety	\$ \$					
6.	Claim count information is reported per claim or per claimant. (indic	cate which).		Per Claim					
	If not the same in all years, explain in Interrogatory 7.								
7.1	The information provided in Schedule P will be used by many personant things. Are there any especially significant events, coverage, when making such analyses?			Yes [X] No[]					
7.2	An extended statement may be attached Claims reopened in 2019 are included in the 2019 reported claim or	ounts.							

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

		1	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to	5 Direct Losses	6	7	8 Finance and Service Charges Not	9 Direct Premium Written for Federal
	States, Etc.	Active Status (a)	2 Direct Premiums Written	3 Direct Premiums Earned	Policyholders on Direct Business	Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Charges Not Included in Premiums	Purchasing Groups (Included in Col. 2)
1.	Alabama AL	N								
2.	Alaska AK	N								
3.	Arizona AZ	N.								
4. 5.	Arkansas AR California CA	N N								
6.	Colorado CO	N N								
7.	Connecticut CT	N	1					1	l	l
8.	Delaware DE	N								
9. 10.	District of Columbia DC Florida FL	N N								
10.	Florida FL Georgia GA	! <u>N</u>								
12.	Hawaii HI									
13.	Idaho ID	N N								
14.	Illinois IL	N								
15.	Indiana IN	N.								
16. 17.	lowa IA Kansas KS	N N								
18.	Kentucky KY	! <u>N</u>								
19.	Louisiana LA	Ň	1					1		1
20.	Maine ME	N								
21.	Maryland MD	N								
22. 23.	Massachusetts MA Michigan MI	N N								
24.	Minnesota MN	! <mark>N</mark>								
25.	Mississippi MS	N N								
26.	Missouri MO	N								
27.	Montana MT	N								
28.	Nebraska NE	N								
29. 30.	Nevada NV New Hampshire NH	N N								
31.	New Jersey NJ	! <mark>N</mark>								
32.	New Mexico NM	N								
33.	New York NY	N	I					1::::::::::::::::::::::::::::::::::::::	l : : : : : : : : : : : : : : : : : : :	l : : : : : : : : : : : : : : :
34.	North Carolina NC	N								
35. 36.	North Dakota ND Ohio OH	N N								
30. 37.	Ohio OH Oklahoma OK	! <u>N</u>								
38.	Oregon OR									
39.	Pennsylvania PA	N								
40.	Rhode Island RI	N								
41.	South Carolina SC	N								
42. 43.	South Dakota SD Tennessee TN	N N								
44.	Texas TX	· · :     · · ·	372,016,601	381,571,182		112,071,468	86,725,260	131,890,367		
45.	Utah ÜT	N N								
46.	Vermont VT	N								
47.	Virginia VA	N								
48. 49.	Washington WA West Virginia WV	N N								
49. 50.	Wisconsin WI	! <u>N</u>								
51.	Wyoming WY									
52.	American Samoa AS	N	l							1
53.	Guam GU	N								
54.	Puerto Rico PR U.S. Virgin Islands VI	N								
55. 56.	U.S. Virgin Islands VI Northern Mariana Islands MP	N N								
57.	Canada CAN	! <mark>N</mark>								
58.	Aggregate Other Alien OT	XXX								<u> </u>
59.	Totals	(a) 1	372,016,601	381,571,182		112,071,468	86,725,260	131,890,367		
	DETAILS OF WRITE-INS	1								
58001.	DETAILS OF WALLE-INS	XXX	-							
58002.		XXX				K . II. III.				
58003.		XXX				NIL				
58998.	Summary of remaining write-ins					NE				
50000	for Line 58 from overflow page	XXX								
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX								

#### $\label{prop:eq:explanation} \textbf{Explanation of basis of allocation of premiums by states, etc.}$

L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG	1
E – Eligible - Reporting entities eligble or approved to write surplus lines in the state	
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile	
R - Registered - Non-domiciled RRGs	
Q - Qualified - Qualified or accredited reinsurer	
N – None of the above - Not allowed to write business in the state (other than their state of domicile - See DSLI)	56

Explanation of basis of allocation of premiums by states, etc.								
The Texas Windstorm Insurance association only writes premium in Texas.								

### NONE Schedule T - Part 2

# **PART 1 - ORGANIZATIONAL CHART** Texas Windstorm Insurance Association Texas FAIR Plan Association Fed ID 74-6189303 Fed ID 43-1982873 NAIC 30040 NAIC 11543

## **SCHEDULE Y**

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

							ANTI IN DEIME OF INCOMM								
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of					Type of Control				1
						Securities					(Ownership,	If Control			1 1
		NAIC				Exchange if					Board,	is		Is an SCA	1
		Com-				Publicly	Names of		Relationship to		Management,	Ownership		Filing	1
Group		pany	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	ı I
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	(Name of Entity / Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	·
									22						
4766		30040	74-6189303				Texas Windstorm Insurance Association	TX	OTH	Unaffiliated	Service Contract			N	10
4766		11543	43-1982873				Texas FAIR Plan Association	!X	OIH	Unaffiliated	Service Contract			N	0

Asterik	Explanation
	Contract between Associations
	Contract between Associations

### **SCHEDULE Y**

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

1		3	4	T =		7	0		10 1 11	40	12
	2	3	4	5	6 Purchases,	7	8	9	10 11	12	13
					Sales or	Income/			Any Other		
					Exchanges of	(Disbursements)			Material		Reinsurance
		Names of			Loans,	Incurred in			Activity Not		Recoverable/
		Insurers		•	Securities,	Connection with	Management	Income/	in the		(Payable) on
		and		•	Real Estate,	Guarantees or	Agreements	(Disbursements)	Ordinary		Losses and/or
NAIC		Parent,			Mortgage Loans	Undertakings for	and	Incurred Under	Course of the		Reserve Credit
Company	ID	Subsidiaries	Shareholder	Capital	or Other	the Benefit of	Service	Reinsurance	Insurer's		Taken/
Code	Number	or Affiliates	Dividends	Contributions	Investments	any Affiliate(s)	Contracts	Agreements	* Business	Totals	(Liability)
								- g.comonic		1 2 13.10	(=:-::,)
30040	74-6189303	Texas Windstorm Insurance Association					14,133,008			14,133,008	
11543	43-1982873	Texas FAIR Plan Association					(14,133,008)			(14,133,008)	
11040	45-1302075	1 exas i Airt i air Association					(14,133,000)			(14,155,000)	
	1										
	1						1				
8											
1											
	1										
	1										
	1										
	1										
	1						l		l l		
									l l		
							1				
							1				
9999999	Control Totals						-		XXX		
שששששש	Control Totals			1					^ ^ ^		

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	MARCH FILING	Responses
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	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
	AUGUST FILING	
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES
supp inte	following supplemental reports are required to be filed as part of your annual statement filing if your company is enganged in the type of business blement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response trogatory 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 whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.	of NO to the specific
	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplemental A to Schedule T (Medical Professional Liablity Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	NO
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	See Explanation
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO .
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27.	Will an approval from the reporting entity's state of domicle for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO .
28.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception – Asbestos and Pollution contracts be filed with the state of domicile and the NAIC by March 1?	NO .
	APRIL FILING	
29.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
35.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April?	NO
36.	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if require	NO

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

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

#### **AUGUST FILING**

37. Will Ma	anagement's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
Explanation 4:	Not applicable.	
Explanation 8:	Not applicable.	
Explanation 6.	Not applicable.	
Explanation 9:	The Association is required to file by June 30th.	
Explanation 10:	The Association is required to file by June 30th.	
E deselle 40	Not an all and a	
Explanation 13:	Not applicable	
Explanation 14:	Not applicable	
Explanation 15:	Not applicable	
·		
Explanation 16:	Not applicable	
Explanation 17:	Not applicable	
Explanation 18:	Not applicable	
	V21766V277	
Explanation 19:	Not applicable	
Explanation 20:	Not applicable	
Explanation 22:	There were no exceptions to the Reinsurance Supplement.	
Explanation 23:	Not applicable	
Explanation 24:	Not applicable	
Explanation 25:	Not applicable	
·		
Explanation 26:	Not applicable	
Explanation 27:	Not applicable	
Explanation 28:	Not applicable	
<b>F</b> · · · · ·		
Explanation 29:	Not applicable	
Explanation 30:	Not applicable	
Explanation 31:	Not applicable	
	TORK TITE	

#### 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	
Bar Code:		
	30040201939000000	30040201920100000
	30040201922000000	30040201922100000
	3004020192200000	30040201922100000
	30040201942000000	30040201924000000
	30040201936000000	30040201945500000
	30040201949000000	30040201938500000
	30040201940100000	30040201936500000
	30040201944100000	3004020194000000
	30040201950000000	30040201950500000
	30040201922400000	30040201922500000
	30040201922600000	30040201955500000
	30040201923000000	3004020193060000
	30040201921000000	30040201921600000
	30040201921700000 30040201921100000	30040201955000000

## Page 2 - Continuation

## **ASSETS**

	Current Year			Prior Year
	1	2	3	4
			Net Admitted	
REMAINING WRITE-INS AGGREGATED AT LINE 25		Nonadmitted	Assets	Net Admitted
FOR OTHER THAN INVESTED ASSETS	Assets	Assets	(Cols. 1 - 2)	Assets
2504. Accounts Receivable - Premium Finance	67,900		67,900	61,170
2505. Due from Depop Carriers - Assumption	23,133		23,133	11,774
2597. Totals (Lines 2504 through 2596) (Page 2, Line 2598)	91,033		91,033	72,944

## Page 3 - Continuation

## LIABILITIES, SURPLUS AND OTHER FUNDS

	1	2
REMAINING WRITE-INS AGGREGATED AT LINE 25 FOR LIABILITIES	Current Year	Prior Year
2504. Deferred rent liability	406,157	488,893
2505. Lease incentive obligation	377,536	503,381
2506. Surcharge payable	227,134	245,859
2597. Totals (Lines 2504 through 2596) (Page 3, Line 2598)	1,010,827	1,238,133

## Page 11 - Continuation

## **UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 3 - EXPENSES

	1	2	3	4
REMAINING WRITE-INS AGGREGATED AT LINE 24	Loss Adjustment	Other Underwriting	Investment	
FOR OTHER LINES OF BUSINESS	Expenses	Expenses	Expenses	Total
2404. Line of Credit Issuance Expenses			526,856	526,856
2405. Investment Expenses			274,082	274,082
2406. HB3 Ombudsman Program		132,297		132,297
2407. Claim Storm Reports and Assignments	93,860			93,860
2408. Miscellaneous Expense		14,778		14,778
2409. Depopulation Service Fees		(120,463)		(120,463)
2497. Totals (Lines 2404 through 2496)				
(Page 11, Line 24)	93,860	26,612	800,938	921,410

## Page 13 - Continuation

## **EXHIBIT OF NONADMITTED ASSETS**

	1	2	3
	Current Year		
	Total	Prior Year	Change in Total
DETAILS OF WRITE-IN LINES FOR	Nonadmitted	Total	Nonadmitted Assets
OTHER THAN INVESTED ASSETS AT LINE 25	Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
2504. Miscellaneous Receivable		5,865	5,865
2505. Prepaid Reinsurance			
2597. Totals (Lines 2504 through 2596) (Page 13, Line 2598)		5,865	5,865

## **SUMMARY INVESTMENT SCHEDULE**

	Gross Inve		Admitted Assets as Reported in				
	Holdin	gs I	the Annual Statement				
Investment Categories	1 Amount	Percentage of Column 1	3 Amount	4 Securities Lending Reinvested Collateral Amount	Total (Col. 3 + 4) Amount	Percentage of Column 5	
	7	20	7	7	7	20	
1. Long-Term Bonds (Schedule D, Part 1):							
1.01 U.S. Governments							
1.02 All other governments							
1.03 U.S. states, territories and possessions, etc. guaranteed							
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed							
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed							
1.06 Industrial and miscellaneous							
1.07 Hybrid securities							
1.08 Parent, subsidiaries and affiliates							
1.09 SVO identified funds							
1.10 Unaffiliated bank loans							
1.11 Total long-term bonds							
Preferred stocks (Schedule D, Part 2, Section 1):							
2.01 Industrial and miscellaneous (Unaffiliated)							
2.02 Parent, subsidiaries and affiliates							
2.03 Total preferred stocks							
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 Total common stocks							
Mortgage loans (Schedule B):							
4.01 Farm mortgages							
4.02 Residential mortgages							
4.03 Commercial mortgages							
4.04 Mezzanine real estate loans							
4.05 Total 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							
Cash, cash equivalents and short-term investments:							
6.01 Cash (Schedule E, Part 1)	209,839,812	40.78	209,839,812		209,839,812	40.78	
6.02 Cash equivalents (Schedule E, Part 2)	304,771,310	59.22	304,771,310		304,771,310	59.22	
6.02 Short term investments (Schodule DA)							
6.04 Total cash, cash equivalents and short-term investments	514,611,122	100.00	514,611,122		514,611,122	100.00	
7.0.1.11		.50.00	31.,311,122		3,511,122	.30.30	
8. Derivatives (Schedule DB)  9. Other invested assets (Schedule BA)							
9. Other invested assets (Schedule BA)  10. Receivables for excurities.							
10. Receivables for securities							
11. Securities Lending (Schedule DL, Part 1)				X X X	X X X	XXX	
12. Other invested assets (Page 2, Line 11)	_		_		_		
13. Total invested assets	514,611,122	100.00	514,611,122		514,611,122	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
				Money Market	
		Total	Bonds	Mutual Funds	Other (a)
1.	Book/adjusted carrying value, December 31 of prior year	381,519,678		288,945,965	92,573,713
2.	Cost of cash equivalents acquired				
3.	Accrual of discount				
4.	Unrealized valuation increase (decrease)				
5.	Total gain (loss) on disposals				
6.	Deduct consideration received on disposals	76,748,368		66,190,705	10,557,663
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)	304,771,310		222,755,260	82,016,050
11.	Deduct total nonadmitted amounts				
12.	Statement value at end of current period (Line 10 minus Line 11)	304,771,310		222,755,260	82,016,050

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

NONE Schedule A - Part 1

NONE Schedule A - Part 2

NONE Schedule A - Part 3

NONE Schedule B - Part 1

NONE Schedule B - Part 2

NONE Schedule B - Part 3

NONE Schedule BA - Part 1

NONE Schedule BA - Part 2

NONE Schedule BA - Part 3

NONE Schedule D - Part 1

NONE Schedule D - Part 2 - Section 1

NONE Schedule D - Part 2 - Section 2

NONE Schedule D - Part 3

NONE Schedule D - Part 4

NONE Schedule D - Part 5

NONE Schedule D - Part 6 - Section 1 and 2

NONE Schedule DA - Part 1

NONE Schedule DB - Part A - Section 1

NONE Schedule DB - Part A - Section 2

NONE Schedule DB - Part B - Section 1

NONE Schedule DB - Part B - Section 2

NONE Schedule DB - Part D - Section 1

NONE Schedule DB - Part D - Section 2

NONE Schedule DB - Part E

NONE Schedule DL - Part 1

NONE Schedule DL - Part 2

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

1 Depository	2 Code	Rate of Interest	4 Amount of Interest Received During Year	5 Amount of Interest Accrued December 31 of Current Year	6 Balance	7
ODEN DEDOCITORIES						
OPEN DEPOSITORIES  Bank of America N.A. Austin, TX Citibank, N.A. Dallas, TX Citibank, N.A MMDA Dallas, TX JP Morgan Chase Bank, N.A. San Antonio, TX		0.750 1.400	1,835,970 759,012		146,625,003 4,635 47,001,598 16,208,576	
0199998 Deposits in ( 0) depositories that do not exceed the allowable limit in any one depository (See Instructions) - open depositories	XXX	XXX				XXX
0199999 Totals - Open Depositories	XXX	XXX	2,594,982		209,839,812	XXX
SUSPENDED DEPOSITORIES						
0299998 Deposits in ( 0) depositories that do not exceed the allowable limit in any one depository						
(See Instructions) - suspended depositories	XXX	XXX				XXX
0299999 Totals - Suspended Depositories	XXX	XXX				XXX
0399999 Total Cash on Deposit	XXX	XXX	2,594,982		209,839,812	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX		XXX
0599999 Total Cash	XXX	XXX	2,594,982		209,839,812	XXX

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

1. January	257,639,986	4. April	235,360,428	7. July	202,614,267	10. October	210,371,762
2. February	256,274,268	5. May	223,099,792	8. August	217,062,941	11. November	202,175,704
3. March	243.136.681	6. June	211.606.533	9. September	207.313.594	12. December	209.839.812

### SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
09248U-71-8 4812C2-73-4	BlackRock Money Market Fund JP Morgan US Treasury Plus Money Market Fund - Inst Shares - Fund 3918		12/31/2019 12/31/2019	0.940 0.015	01/02/2020 01/02/2020	113,076,100 109,679,160	75,855 135,925	1,409,257 3,177,537
8599999 Exempt Money I	Market Mutual Funds – as Identified by SVO					222,755,260	211,780	4,586,794
99999-99-9	Assets Subject to Reverse Repurchase Agreement at Tx Treasury Safekeeping		12/31/2019	0.879	01/02/2020	82,016,050	4,000	1,713,716
8699999 All Other Money	Market Mutual Funds					82,016,050	4,000	1,713,716
3899999 Total Cash Equi	valente					304,771,310	215,780	6,300,510

### NONE Schedule E - Part 3

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