QUARTERLY STATEMENT

OF THE

TO THE

Insurance Department

OF THE

STATE OF

Texas

FOR THE QUARTER ENDED

June 30, 2023

PROPERTY AND CASUALTY



30040202320100102

QUARTERLY STATEMENT

AS OF JUNE 30, 2023 OF THE CONDITION AND AFFAIRS OF THE

Texas Windstorm Insurance Association

	766 ,	4766 (Prior Period)	NAIC Company Code	e 30040	Employer's ID Number	r 74-6189303
Organized under the Laws of	Texas USA	,	,	State of Domicile or Por	rt of EntryTX	
Incorporated/Organized		June 1, 1	971	Commenced Bus	siness June	1, 1971
Statutory Home Office	4801 Southwe	est Parkway Building 1, S (Street and			US 78735 (City or Town, State, Country and 2	Zin Code)
Main Administrative Office	4801 Sou	thwest Parkway Building	'	(Street and Number)	City of Town, State, Country and 2	
	Austin, TX		Country and Zin Code)	512-899-4		
Mail Address P.O. Bo	ox 99090	(Street and Number or	Country and Zip Code)	, Austin, TX	(Telephone Number) US 78709 (City or Town, State, Country and 2	Zin Codo)
Primary Location of Books and F	Records	4801 Southwes	t Parkway Building 1, Suite 20 Street and Number)	,	8735 512-	-899-4900 (Telephone Number)
Internet Website Address Statutory Statement Contact		vw.twia.org/ David Fulkerson		512-899-4988		
,			Name)		(Telephone Number) (Extensi 512-899-4952	on)
	aluike		ail Address)		(Fax Number)	
			OFFICE	45		
		Name	Chandra Franklir	n Womack Title		
1	David Patrick Du	ırden		General Manager		_
2	Georgia Rutherfo	ord Neblett		Vice Chairman		_
3. 4.	Karen Guard Stuart Keith Hark	oour		Secretary-Treasurer Chief Financial Officer		_
·· <u>-</u> -			VICE-PRESID			-
Name		Т	itle	Name		Title
Michael Ledwik #		VP Underwriting		David Scott Williams	VP Claims	
Camron Malik Jessica Crass #		VP IT VP Legal & Compliance		Juanita Deloris Lester James Murphy	VP HR and Adm	inistration nd VP Enterprise Analytics
		Tr. Logal a Compilation		camee marphy		a Tr Enterprise 7 mary use
			DIDECTORS OF T	TOUETER		
Karen Guard		Ron Walenta	DIRECTORS OR T	Tony Schrader	Michael Frank G	erik
Georgia Rutherford Neblett		Chandra Franklin Woma	ck	Peggy Gonzalez	Tim Garrett	OTIK
Esther Grossman #						
						
State of Texas						
County of Travis	SS					
oddity of the state of the stat						
The officers of this reporting entity be	eina dulv sworn. e	each depose and say that	they are the described officer	rs of said reporting entity, and that on	the reporting period stated above	all of the herein described
	•		•	on, except as herein stated, and that	. •.	
•				es and of the condition and affairs of the		
			•	h the NAIC Annual Statement Instruction	•	•
		-		ing not related to accounting practice cludes the related corresponding electr	·	
				e requested by various regulators in li	•	
1. 1	1 1/1/1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				_
100-		~ V.V~		Stuarts	Keith Harl	MILLE
	(Signature)	- Index			(Signature)	
	David Patrick Du				Stuart Keith Harbour	
	(Printed Name 1.	e)			(Printed Name) 2.	
	General Mana	ger			Chief Financial Officer	
_	(Title)				(Title)	
State of Nevada, Cou	nty of Clar	k //_			is an adam to the co	17/17/
Subscribed and sworn to before me the 25th day of July	nis	ana by David F	Patrick Durdon on		is an original filing?	[X]Yes []No
25th day of July		, 2023 by David F	Patrick Durden and Stuart Ke	a eith Harbour. 🏳 b. If no:	 State the amendment number Date filed 	
atherine &	Dent /		Claure	J 1 141.50411		
- Company			SEAL OF JA	KATHERINE J. CORTEZ	Number of pages attached	
)		NOTARY PUBLIC		
			E	STATE OF NEVADA		
				Appt. 21-3048-01		

Expires August 7, 2025

ASSETS

		C			
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds				
2.	Stocks:				
	2.1 Preferred stocks				
	2.2 Common stocks				
	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
	Real estate:				
	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)				
	Cash (\$ 116,312,642), cash equivalents (\$ 401,234,653), and short-term	E17 E17 20E		517,547,295	483,869,657
	investments (\$ 0) Contract loans (including \$ 0 premium notes)			517,547,295	403,009,037
	Other invested assets Receivables for securities				
	Securities lending reinvested collateral assets				
	A consecte white inc fee invested consts				
		517,547,295		517,547,295	483,869,657
	Title plants less \$ 0 charged off (for Title insurers only)			017,047,230	400,000,007
		1,496,390		1,496,390	797,441
	Investment income due and accrued Premiums and considerations:	1,400,000		1,400,000	
	15.1 Uncollected premiums and agents' balances in the course of collection	4,173,470	383,276	3,790,194	2,879,907
	15.2 Deferred premiums, agents' balances and installments booked but deferred				
	and not yet due (including \$ 0 earned but unbilled premiums)	29,963,182		29,963,182	22,089,801
	15.3 Accrued retrospective premiums (\$ 0) and contracts	 .			
	subject to redetermination (\$ 0)				•
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
19.					
20.		12,290,166	12,290,166		
21.	Furniture and equipment, including health care delivery assets (\$ 0)	2,146,196	2,146,196		
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates	962,185		962,185	1,215,014
24.	Health care (\$0) and other amounts receivable				
25.	Aggregate write-ins for other-than-invested assets	6,674,150	6,673,324	826	387
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	575,253,034	21,492,962	553,760,072	510,852,207
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)	575,253,034	21,492,962	553,760,072	510,852,207

DETAILS OF WRITE-IN LINES				
1101.				
1102				
1103. N () N F				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501. Prepaid assets	4,355,863	4,355,863		
2502. Member Assessment Receivable	2,199,241	2,199,241		
2503. Security deposit - lease	118,220	118,220		
2598. Summary of remaining write-ins for Line 25 from overflow page	826		826	387
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	6,674,150	6,673,324	826	387

LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
		Current Statement Date	December 31, Prior Year
1.	Losses (current accident year \$ 32,203,394)	53,119,397	39,511,834
2.	Reinsurance payable on paid losses and loss adjustment expenses		
3.	Loss adjustment expenses	20,510,874	18,663,506
4.	Commissions payable, contingent commissions and other similar charges	11,713,096	5,678,649
5.	Other expenses (excluding taxes, licenses and fees)	5,872,451	5,890,292
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	l .	3,131,787
7.1.	Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))		
7.2.			
	Borrowed money \$ 0 and interest thereon \$ 0 Unearned premiums (after deducting unearned premiums for ceded reinsurance of		
Э.	\$ 170,296,810 and including warranty reserves of \$ 0 and accrued accident and health		
	experience rating refunds including \$ 0 for medical loss ratio rebate per		
	the Public Health Service Act)	134,289,212	277,334,168
10.	Advance premium	19,016,743	6,731,801
	Dividends declared and unpaid:		
	11.1. Stockholders		
	11.2. Policyholders		
12.			33,330,735
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated	386,399	758,010
16.	Provision for reinsurance (including \$ 0 certified)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		
20.	Derivatives		
21.	* * * * * * * * * * * * * * * * * * * *		1
22.	Payable for securities lending		
	Liability for amounts held under uninsured plans		
	Capital notes \$ 0 and interest thereon \$ 0 Aggregate write-ins for liabilities	86,488,209	
25. 26.	Aggregate write-ins for liabilities Total liabilities excluding protected cell liabilities (Lines 1 through 25)		472,209,348
27.	District district Palence		472,200,040
28.	Total liabilities (Lines 26 and 27)	400,000,005	472,209,348
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock		
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)	04 557 007	38,642,859
36.	Less treasury stock, at cost:		
	36.1. O shares common (value included in Line 30 \$ 0)		
	36.2. 0 shares preferred (value included in Line 31 \$ 0)		
37.	7	61,557,007	38,642,859
38.	Totals (Page 2, Line 28, Col. 3)	553,760,072	510,852,207
	DETAILS OF WRITE-IN LINES		
2501.	Statutory fund payable	80,199,522	74,961,815
2502.	Pension benefits liability	0.004.404	2,821,434
2503.	Lease incentive obligation	0.405.400	2,272,838
2598.	Summary of remaining write-ins for Line 25 from overflow page	1,301,793	1,122,479
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	86,488,209	81,178,566
2901.			
2902.	NONE		
2903.	NONE		
	Summary of remaining write-ins for Line 29 from overflow page		
2998.		1	
2998. 2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
2999.	· · · · · · · · · · · · · · · · · · ·		
2999. 3201.	MANE		
2999. 3201. 3202.	· · · · · · · · · · · · · · · · · · ·		

STATEMENT OF INCOME

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	UNDERWRITING INCOME			
1.	Premiums earned: 1.1 Direct (written \$ 300,468,646)	273,216,791	201,722,421	443,490,204
	1.1 Direct (witter) \$ 300,408,040) 1.2 Assumed (written \$ 0)			110, 100,201
	1.3 Ceded (written \$ 204,356,173)	34,059,362	20,471,638	132,095,174
	1.4 Net (written \$ 96,112,473)	239,157,429	181,250,783	311,395,030
•	DEDUCTIONS:			
2.	Losses incurred (current accident year \$ 63,962,375): 2.1 Direct	67,584,057	16,136,005	28,872,966
	2.1 Direct 2.2 Assumed			
	2.3 Ceded	309	2,751	(21,284)
2	2.4 Net	67,583,748	16,133,254	28,894,250
	Loss adjustment expenses incurred	13,268,492	16,101,068	22,353,663
	Other underwriting expenses incurred Aggregate write-ins for underwriting deductions	61,793,781 80,199,522	52,113,849 53,150,325	120,049,584 74,961,815
5. 6	Aggregate write-ins for underwriting deductions Total underwriting deductions (Lines 2 through 5)		137,498,496	246,259,312
7.	Net income of protected cells	222,040,040	137,490,490	240,233,312
8.	Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	16,311,886	43,752,287	65,135,718
	INVESTMENT INCOME			
9.	Net investment income earned	8,293,337	(5 000 412)	(3 395 909)
	Net realized capital gains (losses) less capital gains tax of \$ 0	0,293,337	(5,900,412)	(3,385,898)
	Net investment gain (loss) (Lines 9 + 10)	8,293,337	(5,900,412)	(3,385,898)
11.	OTHER INCOME	0,233,337	(0,500,712)	(0,500,050)
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered	(405.004)		
10	\$ 0 amount charged off \$ 125,834)	(125,834)		
13.	Finance and service charges not included in premiums Aggregate write-ins for miscellaneous income	6,132		35,300
		(119,702)		35,300
16	Total other income (Lines 12 through 14) Net income before dividends to policyholders, after capital gains tax and before all other	(113,702)		33,300
10.	federal and foreign income taxes (Lines 8 + 11 + 15)	24,485,521	37,851,875	61,785,120
17.	Dividends to policyholders			
18.	Net income, after dividends to policyholders, after capital gains tax and before			
	all other federal and foreign income taxes (Line 16 minus Line 17)	24,485,521	37,851,875	61,785,120
	Federal and foreign income taxes incurred			
20.	Net income (Line 18 minus Line 19) (to Line 22)	24,485,521	37,851,875	61,785,120
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year	38,642,860	(24,584,392)	(24,584,392)
	Net income (from Line 20)	24,485,521	37,851,875	61,785,120
23.	Net transfers (to) from Protected Cell accounts			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ 0			
25.	Change in net unrealized foreign exchange capital gain (loss)			
26.	Change in net deferred income tax			
	Change in nonadmitted assets	(1,571,374)	(1,874,210)	(1,632,566)
29. 30.	Change in surplus notes Surplus (contributed to) withdrawn from protected cells			
31	Cumulative effect of changes in accounting principles			
32.	Capital changes:			
	32.1 Paid in			
	32.2 Transferred from surplus (Stock Dividend)			
	32.3 Transferred to surplus			
33.	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			
	Dividende te etceloheldere			
	Change in treasury stock			
	Aggregate write-ins for gains and losses in surplus			3,074,698
38.	Change in surplus as regards policyholders (Lines 22 through 37)	22,914,147	35,977,665	63,227,252
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	61,557,007	11,393,273	38,642,860
	DETAILS OF WRITE-IN LINES			

	DETAILS OF WRITE-IN LINES			
0501.	Statutory Fund Expense	80,199,522	53,150,325	74,961,815
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)	80,199,522	53,150,325	74,961,815
1401.	Other Income (loss)	6,132		35,300
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page			
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	6,132		35,300
3701.	Pension unassigned funds - unrecognized liability			3,074,698
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)			3,074,698

CASH FLOW

		1	2	3
	Cook from Operations	0	D. V.	Divivi
	Cash from Operations	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Descriptions collected act of minorman			
	Premiums collected net of reinsurance	225,722,687	178,230,602 (6,785,592)	366,302,134
	Net investment income	7,792,304	(0,700,592)	(5,067,315)
3.	Miscellaneous income	6,132	474 445 040	203,348
	Total (Lines 1 to 3)	233,521,123	171,445,010	361,438,167
5.	Benefit and loss related payments	53,976,184	27,250,764	47,047,223
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	144,143,046	59,516,418	140,781,923
8.	Dividends paid to policyholders			
	Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)			
	Total (Lines 5 through 9)	198,119,230	86,767,182	187,829,146
11.	Net cash from operations (Line 4 minus Line 10)	35,401,893	84,677,828	173,609,021
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds			
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains (or losses) on cash, cash equivalents and short-term investments			
	40.7. Minutes and the second of			
	12.7 Miscellaneous proceeds 12.8 Total investment proceeds (Lines 12.1 to 12.7)			
13	Cost of investments acquired (long-term only):			
13.	42.4 Panda			
	13.2 Stocks			
	13.3 Mortgage loans			
	13.5 Other invested assets			
	13.6 Miscellaneous applications			
	13.7 Total investments acquired (Lines 13.1 to 13.6)			
14.	Net increase (or decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)			
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes			
	16.2 Capital and paid in surplus, less treasury stock			
	16.3 Borrowed funds		(160,091,077)	(184,301,250)
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
	16.5 Dividends to stockholders			
	40.0 Other and provided (and lind)	(1,724,255)	(2,121,459)	734,999
17	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus	(1,724,200)	(2,121,403)	704,000
17.	Line 16 E plue Line 16 GV	(1,724,255)	(162,212,536)	(183,566,251)
	Life 10.5 plus Life 10.6)	(1,724,233)	(102,212,000)	(100,000,201)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	33,677,638	(77,534,708)	(9,957,230)
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	483,869,657	493,826,887	493,826,887
	19.2 End of period (Line 18 plus Line 19.1)	517,547,295	416,292,179	483,869,657
Note: Sup	pplemental disclosures of cash flow information for non-cash transactions:			
20.0001				
20.0002				
20.0003				

	Note: Supplemental disclosures of cash flow information for non-cash transactions:	
2	0.0001	
2	0.0002	
2	0.0003	

Note 1 - Summary of Significant Accounting Policies and Going Concern

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:

		F/S	F/S		
Net Income	SSAP#	Page	Line #	June 30, 2023	December 31, 2022
1. Company state basis (P 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$24,485,521	\$61,785,119
2. State Prescribed Practices that is an increase / (decrease)					
from NAIC SAP				-	-
3. State Permitted Practices that is an increase / (decrease)					
from NAIC SAP				-	-
4. NAIC SAP $(1-2-3=4)$	XXX	XXX	XXX	\$24,485,521	\$61,785,119

Surplus	SSAP#	F/S Page	F/S Line #	June 30, 2023	December 31, 2022
 5. Company state basis (Page 3, Line 37, Columns 1 & 2) 6. State Prescribed Practices that is an increase / (decrease) from NAIC SAP 7. State Permitted Practices that is an increase / (decrease) from NAIC SAP 	XXX	XXX	XXX	\$61,557,007 - -	\$38,642,859 - -
8. NAIC SAP $(5-6-7=8)$	XXX	XXX	XXX	\$61,557,007	\$38,642,859

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 insurance policies issued by the Association have a maximum term of one year from date of issuance. Premiums are earned over the terms of the related policies whereas the related acquisition costs such as sales commissions are expensed when incurred. Unearned premiums, net of deductions for reinsurance, are computed on a pro-rata basis to cover the unexpired portion of premiums written. Premiums receivable are primarily due from agents and policyholders and are charged off when specific balances are determined to be uncollectible. Net investment income consists primarily of interest income recognized on an accrual basis and is reduced by investment related expenses.

In addition, the company uses the following accounting policies:

- 1. Short-term investments are stated at amortized cost, which approximates market value. Reverse repurchase agreements, when used, 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 liabilities 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

None

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. Troubled Debt Restructuring for Creditors

None

C. Reverse Mortgages

None

D. Loan-Backed and Structured Securities

None

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

None

F. Repurchase Agreements Transactions Accounted for as a Secured Borrowing

None

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

None

H. Repurchase Agreements Transactions Accounted for as a Sale

None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

None

J. Real Estate

None

K. Low-Income Housing Tax Credits

None

L. Restricted Assets

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.

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

B. Significant Transactions and Changes in Terms of Intercompany Arrangements

None

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

None

D. Amounts Due to or from Related Parties

No significant change

E. Management, Service Contracts, Cost Sharing Arrangements

During 2002, the Association entered into a service contract with the Texas Fair Plan Association 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.

F. Guarantees or Undertakings for Related Parties

Not applicable

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. Debt

The Association obtained a \$500,000,000 line of credit with two of its primary financial institutions effective June 1, 2023. The facility will terminate on March 28, 2024 if no funds are borrowed. There is an option for the borrower to terminate the facility early on December 27, 2023 at the borrowers option. The Association pays the lender a 0.475% commitment fee against the unused portion of the line of credit.

B. FHLB (Federal Home Loan Bank) Agreements

Not applicable

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

No change

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

No change

Note 14 – Liabilities, Contingencies and Assessments

A. Contingent 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

No change

E. Product Warranties

Not applicable

F. Joint and Several Liabilities

Not applicable

G. Other Contingencies

No change

Note 15 – Leases

A. Lessee Leasing Arrangements

No significant change

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

<u>Note 20 – Fair Value Measurements</u>

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

Not applicable

B. Other Fair Value Disclosures

Not applicable

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

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

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

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

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

Cash and cash equivalents are the only financial instruments held by the Association.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Lev	vel 3	Net Ass Value (N	_	<u>Not</u> <u>Practica</u> (Carryi Value	ing
Cash, cash equivalents and short-term investments	\$ 116,312,642	\$ 116,312,642	\$ 116,312,642	\$	- \$		\$	-	\$	-
Exempt Money Market Mutual Funds – as Identified by SVO	401,234,653	401,234,653	-		-	-	\$401,234	,653		-
Total Cash, cash equivalents and short-term investments	\$ 517,547,295	\$ 517,547,295	\$ 116,312,642	\$	- \$	_	\$401,234	,653	\$	

D. Items for which Not Practicable to Estimate Fair Values

Not applicable

E. Instruments Measured at Net Asset Value (NAV)

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

Note 21 – Other Items

A. Unusual or Infrequent Items

No change

B. Troubled Debt Restructuring for Debtors

Not applicable

C. Other Disclosures

Not applicable

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-transferable Tax Credits

Not applicable

F. Subprime Mortgage Related Risk Exposure

Not applicable

G. Insurance Linked Securities (ILS) Contracts

No change

Note 22 – Events Subsequent

The Association has evaluated subsequent events through August 11, 2023, the date of issuance of these statutory financial statements. There were no events occurring subsequent to the end of the second quarter 2023 that merited recognition or disclosure in these statements.

Note 23 - Reinsurance

A. Unsecured Reinsurance Recoverables

No change

B. Reinsurance Recoverables in Dispute

None

C. Reinsurance Assumed and Ceded

No Change

D. Uncollectible Reinsurance

None

E. Commutation of Ceded Reinsurance

Not applicable

F. Retroactive Reinsurance

Not applicable

G. Reinsurance Accounted for as a Deposit

Not applicable

H. Run-off Agreements

Not applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable

K. Reinsurance Credit on Contracts Covering Health Business

Not applicable

Note 24 - Retrospectively Rated Contracts and Contracts Subject to Redetermination

Not applicable

Note 25 - Changes in Incurred Losses and Loss Adjustment Expenses

A. Current year changes in estimates of the costs of prior year losses and loss adjustment expenses (LAE) affect the current year Statement of Income. Increases in those estimates increase current year expense and are referred to as unfavorable development or prior year reserve shortages. Decreases in those estimates decrease current year expense and are referred to as favorable development or prior year reserve redundancies. Current calendar year losses and LAE reflected on the Statement of Income of \$80,852,240 had \$1,486,894 of favorable prior year 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 reserves as of June 30, 2023 make a reasonable provision for the Association's claims liabilities.

Rollforward of unpaid losses and LAE	June 30, 2023	December 31, 2022
Balance as of January 1,	58,181,307	77,625,971
Less: Reinsurance Recoverable	5,967	40,877
Net Balance at January 1,	58,175,340	77,585,094
Incurred, net of reinsurance, related to:		
Current year	82,339,134	40,637,331
Prior years	(1,486,894)	10,610,583
Net Incurred	80,852,240	51,247,914
Paid, net of reinsurance, related to:		
Current year	(39,681,167)	(28,938,058)
Prior years	(25,716,142)	(41,719,610)
Net Paid Losses	(65,397,309)	(70,657,668)
Net Balance at end of period,	73,630,271	58,175,340
Plus: Reinsurance Recoverable	6,511	5,967
Balance at end of period,	\$ 73,636,782	\$ 58,181,307

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

No change

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

No change

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	Did the reporting entity experience any material transactions requiring the with the State of Domicile, as required by the Model Act?	sactions	Yes[]No[X]	
1.2	If yes, has the report been filed with the domiciliary state?	Yes [] No []		
2.1	Has any change been made during the year of this statement in the charte settlement of the reporting entity?	or deed of	Yes[]No[X]	
2.2	If yes, date of change:			
3.1	Is the reporting entity a member of an Insurance Holding Company System one or more of which is an insurer?	m consisting of two or more affiliated	d persons,	Yes[]No[X]
	If yes, complete Schedule Y, Parts 1 and 1A.			
3.2	Have there been any substantial changes in the organizational chart since	e the prior quarter end?		Yes[]No[X]
3.3	If the response to 3.2 is yes, provide a brief description of those changes.			
3.4	Is the reporting entity publicly traded or a member of a publicly traded gro	up?		Yes[]No[X]
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code iss	ued by the SEC for the entity/group		
4.1	Has the reporting entity been a party to a merger or consolidation during t	he period covered by this statement	?	Yes[]No[X]
4.2	If yes, provide the name of entity, NAIC Company Code, and state of dom entity that has ceased to exist as a result of the merger or consolidation.	on) for any		
	1	2	3	
	Name of Entity	NAIC Company Code	State of Domicile	
	If the reporting entity is subject to a management agreement, including thi general agent(s), attorney-in-fact, or similar agreement, have there been a terms of the agreement or principals involved? If yes, attach an explanation. State as of what date the latest financial examination of the reporting entity	any significant changes regarding th	е	Yes[]No[X]N/A[]
			ieile er	
0.2	State the as of date that the latest financial examination report became average the reporting entity. This date should be the date of the examined balance completed or released.			12/31/2017
6.3	State as of what date the latest financial examination report became avail- the state of domicile or the reporting entity. This is the release date or co not the date of the examination (balance sheet date).	·		02/12/2019
6.4	By what department or departments? Texas Department of Insurance			
6.5	Llove all formatical attenuant - division and a division at the division of the division at th	alian month be a second of the second		
0.5	Have all financial statement adjustments within the latest financial examin subsequent financial statement filed with Departments?	ation report been accounted for in a	l	Yes[X]No[]N/A[]
6.6	Have all of the recommendations within the latest financial examination re	port been complied with?		Yes [X] No [] N/A []
7.1	Has this reporting entity had any Certificates of Authority, licenses or regis if applicable) suspended or revoked by any governmental entity during the	, , , ,	ation,	Yes[]No[X]
7.2	If yes, give full information			

8.1	s the company a subsidiary of a bank holding company regulated	by the Federal Reserve Board?				Yes[]No[X]			
8.2	2 If response to 8.1 is yes, please identify the name of the bank holding company.									
8.3	s the company affiliated with one or more banks, thrifts or securities	es firms?				Yes[]No[X]			
8.4	If response to 8.3 is yes, please provide below the names and loca	ation (city and state of the main offic	e) of any							
	affiliates regulated by a federal regulatory services agency [i.e. the Comptroller of the Currency (OCC), the Federal Deposit Insurance									
	Commission (SEC)] and identify the affiliate's primary federal regu	lator.								
	1	2	3	4	5	6				
	Affiliate	Location	FD 0		- FD10	050				
	Name	(City, State)	FRB	OCC	FDIC	SEC				
9.1	Are the senior officers (principal executive officer, principal financia	al officer, principal accounting office	r or controlle	er, or						
	persons performing similar functions) of the reporting entity subject standards?	t to a code of ethics, which includes	the following	ng						
	 (a) Honest and ethical conduct, including the ethical handling of ac personal and professional relationships; 	ctual or apparent conflicts of interes	between							
	 (b) Full, fair, accurate, timely and understandable disclosure in the entity; 	periodic reports required to be filed	by the repo	orting						
	(c) Compliance with applicable governmental laws, rules, and regu	ulations;								
	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code. Ye									
.11	If the response to 9.1 is No, please explain:									
9.2	Has the code of ethics for senior managers been amended?					Yes[]No[X]			
.21	If the response to 9.2 is Yes, provide information related to amend									
9.3	Have any provisions of the code of ethics been waived for any of the	he specified officers?				Yes[]No[X]			
.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).									
.01										
		FINANCIAL								
0.1	Does the reporting entity report any amounts due from parent, sub	sidiaries or affiliates on Page 2 of the	nis statemer	nt?		Yes [X] No	[]			
0.2	If yes, indicate any amounts receivable from parent included in the	e Page 2 amount:			\$_					
	Management the state to be sale as the state of the state	INVESTMENT								
ı.1	Were any of the stocks, bonds, or other assets of the reporting ent otherwise made available for use by another person? (Exclude sec					Yes[]No[X]			
1.2	If yes, give full and complete information relating thereto:									
12	Amount of real estate and mortgages held in other invested assets	s in Schedule RA:			¢					
14.	minount of real estate and mortgages held in other invested assets	o in Outeuule DA.			Φ_					
13.	Amount of real estate and mortgages held in short-term investmen	nts:			\$					

.1 Does the reporting	g entity have any invest	tments in parent, subsidiaries a	ind affiliates?		Yes[]No[X]
2 If yes, please com	plete the following:		1	2	
			Prior Year-	End Current Quarter	
			Book/Adjus		
			Carrying Va		
14.21 Bonds					
		ate			
14.26 All Oth			\$	\$	
		Subsidiaries and Affiliates			
		26)	\$	\$	
		cluded in Lines 14.21 to			
14.26	above		\$	\$	•
1 Has the reporting	entity entered into any	hedging transactions reported	on Schedule DB?		Yes[]No[X]
2 If yes, has a comp	prehensive description	of the hedging program been m	nade available to the d	omiciliary state?	Yes[]No[]N/A[X
	cription with this staten			•	
i. For the reporting ε	entity's security lending	program, state the amount of t	the following as of the	current statement date:	
16 1 T-1-1	foir volue of rotarrants d	colleteral access recorded as 2	shadula DL Darta 4 -	nd 2	¢
		collateral assets reported on S			\$
		value of reinvested collateral a ending reported on the liability p		euule DL, FailS Tällü Z	\$ \$
10.5 Total p	payable for securilles is	maing reported on the liability p	page		Ψ
7. Excluding items in	Schedule E - Part 3 -	Special Deposits, real estate, n	nortgage loans and inv	restments held	
_		vaults or safety deposit boxes			
		oursuant to a custodial agreeme			
_	· · · · · · · · · · · · · · · · · · ·	Examination Considerations, F.		• •	
		the NAIC Financial Condition E	=		Yes[]No[X]
_	* *	equirements of the NAIC Finan	ncial Condition Examin	ers Handbook,	
complete the follo	owing:				
	1			2	
	Name of Custoo	dian(s)		Custodian Address	
.2 For all agreements	s that do not comply wi	th the requirements of the NAIC	C Financial Condition I	Examiners Handbook,	
provide the name	, location and a comple	ete explanation:			
	1	2		3	
	Name(s)	Location(s)		Complete Explanation(s)	
3 Have there hoose	any changes including	name changes, in the custodia	in(s) identified in 17 1	during the current	
quarter?	any changes, including	name changes, in the custodia	iii(s) ideiliiiled iii 17.1	during the current	Yes[]No[X]
4					[][]
4 If yes, give full and	d complete information	relating thereto:			
1		2	3	4	
Old Cust	todian	New Custodian	Date of Change	Reason	
1				1	

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

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

17.5097 For those firms/individuals listed in the table for Question 17.5, 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]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, the total assets under management aggregate to more than 50% of the reporting entity's invested assets?

Yes[]No[X]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the

information for the table below.

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

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office	
been followed?	Yes [X] No []
18.2 If no list exceptions:	

- 19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
 - Documentation necessary to permit a full credit analysis of the security does not exist a. or an NAIC CRP credit rating for an FE or PL security is not available.
 - Issuer or obligor is current on all contracted interest and principal payments.
 - The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?

Yes[]No[X]

- 20. 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. b.
 - The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is C. shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - 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]

- 21. 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:
 - The shares were purchased prior to January 1, 2019. a.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO C. prior to January 1, 2019.
 - The fund only or predominantly holds bonds in its portfolio. d.
 - The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC e. 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]

GENERAL INTERROGATORIES PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting entity If yes, attach an expl	Yes[]No[]N	I/A [X]									
2.	Has the reporting en or in part, from any lo If yes, attach an expl	Yes [] No [X]										
3.1	Have any of the reporting entity's primary reinsurance contracts been canceled?									Yes[]No[X]		
3.2	If yes, give full and complete information thereto:											
	Are any of the liabilitireserves (see Annua at a rate of interest g	al Statement preater than :	Instructions zero?	•						Yes[]No[X]		
4.2	ii yes, complete the i	lollowing sci	leddie.		TOTAL D	IOOOLINIT.		Ι ,		L DUDING DEDIG	D	
	1	2	3		TOTAL D	ISCOUNT	I		DISCOUNT TAKEN	I DURING PERIOD		
	Line of Business	Maximum Interest	Discount Rate	4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 TOTAL	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 TOTAL	
			TOTAL									
5.	Operating Percentag 5.1. A&H loss perc 5.2. A&H cost con 5.3. A&H expense	cent tainment pe		containment ex	penses						_ % _ % _ %	
6.1	Do you act as a cust	odian for he	alth savings	accounts?						Yes[]No[X]		
6.2	If yes, please provide	e the amoun	t of custodia	al funds held as	of the reporting	g date.			\$		_	
6.3	Do you act as an adr	ministrator fo	or health sav	vings accounts?	•					Yes[]No[X]		
6.4	If yes, please provide	e the balanc	e of the fund	ds administered	as of the repor	ting date.			\$		_	
7.	Is the reporting entity	y licensed or	chartered,	registered, qual	ified, eligible or	writing busines	ss in at least two	o states?		Yes[]No[X]		
7.1	If no, does the report	ting entity as	sume reins	urance busines	s that covers ris	sks residing in a	it least one stat	e other than the	e state			

Yes[]No[X]

of domicile of the reporting entity

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1	2	3	4	5 Type	6 Certified Reinsurer	7 Effective Date of
NAIC			Domiciliary	of	Rating	Certified
Company Code	ID Number	Name of Reinsurer	Jurisdiction	Reinsurer	(1 through 6)	Reinsurer Rating
		Arry				
		Affiliates				
40452	42 5040075	Transatlantic Reinsurance Company	NN			
19453	13-5616275	Transadanuc Reinsurance Company	NY	Authorized		
		Pools and Associations				
		Pools and Associations				
	AA-3191298	Antares Reinsurance Company Limited	BMU	Unauthorized		
0	AA-3191239	Lumen Re Ltd.	BMU	Unauthorized		
· · · · · · · · · · · · · · · · · · ·	7.7-3131239	Lunen Ne Liu.				
		1				

9

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year To Date - Allocated by States and Territories

			Direct Prem	iums Written	Direct Losses Paid	(Deducting Salvage)	Direct Los	ses Unpaid
		1 Active	2	3	4	5	6	7
	States, Etc.	Status (a)	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date	Current Year to Date	Prior Year to Date
1.	Alabama AL	N						
2.	Alaska AK Arizona AZ	N N						
4.	Arkansas AR	N						
	California CA Colorado CO	N N						
7.	Connecticut CT	N.						
	Delaware DE District of Columbia DC	<u>Ņ</u> N						
10.	Florida FL	N.						
	Georgia GA Hawaii HI	<u>N</u>						
	Hawaii HI ID	!N N						
14.	Illinois IL	N						
	Indiana IN IA	N N						
17.	Kansas KS	N						
	Kentucky KY Louisiana LA	N N						
20.	Maine ME	N						
	Maryland MD Massachusetts MA	<u>N</u>						
	Michigan MI	N N						
24.	Minnesota MN	N						
	Mississippi MS Missouri MO	N N						
	Montana MT	N						
	Nebraska NE Nevada NV	N						
	New Hampshire NH	N.						
	New Jersey NJ	<u>N</u>						
	New Mexico NM New York NY	N N						
34.	North Carolina NC	N						
	North Dakota ND Ohio OH	N						
37.	Oklahoma OK	N.						
38. 39.	Oregon OR Pennsylvania PA	N N						
	Rhode Island RI	! <u>N</u> N						
41.		N						
42. 43.	South Dakota SD Tennessee TN	N N						
44.	Texas TX	Ļ	300,468,646	225,574,344	53,976,184	27,250,764	53,124,656	46,576,28
45. 46.	Utah UT Vermont VT	N						
47.	Virginia VA	N						
48.	Washington WA West Virginia WV	N						
49. 50.		N						
51.	Wyoming WY	N						
52. 53.		N N						
54.	Puerto Rico PR	N						
	U.S. Virgin Islands VI Northern Mariana Islands MP	N						
	Canada CAN	N						
58. 59	Aggregate Other Alien OT Totals	XXX	300,468,646	225,574,344	53,976,184	27,250,764	53,124,656	46,576,28
		XXX	000,400,040	220,014,044	00,370,104	27,200,704	00,124,000	10,070,20
	DETAILS OF WRITE-INS							
8001. 8002.		XXX						
8003.		XXX		NOI	NE			
8998.	Summary of remaining write-ins for Line 58 from overflow page	XXX						
8999.		XXX						

Ÿ.		🗀	9.5.0	′'.`	opo.	9			9.19.010	· ~ ·	app.	· • • •	٠.	
4	C) - O	ualifie	- he	Quali	fied	or a	ccre	hatibe	reir	nsure	r		

- ! -	E - Electrised of Orlantered - Electrised insulative carrier of dominence title	
2.	R - Registered - Non-domiciled RRGs	
3.	E – Eligible - Reporting entities eligble or approved to write surplus lines in the state	
	Q - Qualified - Qualified or accredited reinsurer	
5.	D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile	
6	N. None of the above. Not allowed to write business in the state (other than their state of demicile. See DSLI)	56

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
4766		30040	74-6189303				Texas Windstorm Insurance Association	TX	OTH	Unaffiliated	Service Contract			NO .	
4766		11543	43-1982873				Texas FAIR Plan Association	TX	ОТН	Unaffiliated	Service Contract			NO	

Anton	all.	Fuelessins
Aster	:rik	Explanation
1		Contract between Associations
;		Contract between Associations
3		

PART 1 – LOSS EXPERIENCE

2.2 M 2.3 F 2.4 P 2.5 P 3. F 4. H 5.1 C 5.2 C 6. M 8. C 9. Ir	Allied lines Aultiple peril crop iederal flood Private crop Private flood armowners multiple peril domeowners multiple peril commercial multiple peril (non-liability portion) commercial multiple peril (liability portion) Aortgage guaranty Ocean marine	1 Direct Premiums Earned 273,216,791	Direct Losses Incurred 67,584,057	Direct Loss Percentage	Prior Year to Date Direct Loss Percentage 7.99
2.1 A 2.2 M 2.3 F 2.4 P 2.5 P 3. F 4. H 5.1 C 5.2 C 6. M 8. C 9. Ir	Allied lines Aultiple peril crop iederal flood Private crop Private flood armowners multiple peril domeowners multiple peril commercial multiple peril (non-liability portion) commercial multiple peril (liability portion) Aortgage guaranty Ocean marine	273,216,791	67,584,057	24.736	7.99
2.2 M 2.3 F 2.4 P 2.5 P 3. F 4. H 5.1 C 5.2 C 6. M 8. C 9. Ir	Multiple peril crop Gederal flood Private crop Private flood Garmowners multiple peril Commercial multiple peril (non-liability portion) Commercial multiple peril (liability portion) Mortgage guaranty Ocean marine	2/3,210,791	07,304,037	24.130	7.31
2.3 F 2.4 P 2.5 P 3. F 4. H 5.1 C 5.2 C 6. M 9. Ir	ederal flood rivate crop rivate flood armowners multiple peril commercial multiple peril (non-liability portion) commercial multiple peril (liability portion) flortgage guaranty cean marine				
2.4 P 2.5 P 3. F 4. H 5.1 C 5.2 C 6. M 8. C 9. Ir	Private crop Private flood Formula flood For				
2.5 P 3. F 4. H 5.1 C 5.2 C 6. M 8. C 9. Ir	Private flood armowners multiple peril Homeowners multiple peril Commercial multiple peril (non-liability portion) Commercial multiple peril (liability portion) Hortgage guaranty Ocean marine				
3. F 4. H 5.1 C 5.2 C 6. M 8. C 9. Ir	armowners multiple peril lomeowners multiple peril Commercial multiple peril (non-liability portion) Commercial multiple peril (liability portion) Mortgage guaranty Ocean marine				
4. H 5.1 C 5.2 C 6. M 8. C 9. Ir	lomeowners multiple peril Commercial multiple peril (non-liability portion) Commercial multiple peril (liability portion) Mortgage guaranty Ocean marine				
5.1 C 5.2 C 6. M 8. C 9. Ir	Commercial multiple peril (non-liability portion) Commercial multiple peril (liability portion) Mortgage guaranty Ocean marine			1	
5.2 C 6. M 8. C 9. Ir	Commercial multiple peril (liability portion) Nortgage guaranty Ocean marine				
6. M 8. C 9. Ir	Nortgage guaranty Ocean marine				
8. C 9. Ir	Ocean marine				
0. F	nland marine				
	inancial guaranty				
.1 M	Medical professional liability-occurrence				
.2 N	Medical professional liability-claims made				
2. E	arthquake				
	Comprehensive (hospital and medical) individual				
	Comprehensive (hospital and medical) group				
	Credit accident and health				Í
	ision only				
	Dental only				
	Disability income				
	Medicare supplement				
	Medicaid Title XIX				
	Medicaid Title XVIII				
)./ L	ong-term care				
	ederal employees health benefits plan				
	Other health				
0. V	Vorkers' compensation Other liability-occurrence				
יו כ	Other liability-claims made				
	xcess Workers' Compensation				
	Products liability-occurrence				
	Products liability-claims made				
).Z I	Private passenger auto no-fault (personal injury protection)				
). I I	Other private passenger auto liability				
3 (Commercial auto no-fault (personal injury protection)				
	Other commercial auto liability				
	Private passenger auto physical damage				
.2 C	Commercial auto physical damage				
2. A	ircraft (all perils)				
	idelity				
	Surety				
	Burglary and theft				
	Boiler and machinery		1	1	
8. C	Credit	[1	1	[
	nternational		1		
	Varranty		1		
	Reinsurance-Nonproportional Assumed Property	XXX	XXX	XXX	XXX
	Reinsurance-Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33. R	Reinsurance-Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
	ggregate write-ins for other lines of business				
35. T	OTALS	273,216,791	67,584,057	24.736	7.9
01.	DETAILS OF WRITE-INS				

DETAILS OF WRITE-INS	
3401. 3402.	
3403.	
3498. Summary of remaining write-ins for Line 34 from overflow page 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34)	

PART 2 – DIRECT PREMIUMS WRITTEN

•	Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
	Fire			
2.1	Allied lines	183,937,623	300,468,646	225,574,34
	Multiple peril crop			
	Federal flood			
	Private crop			
	Private flood			
	Farmowners multiple peril			
	Homeowners multiple peril			
5.1	Commercial multiple peril (non-liability portion)			
	Commercial multiple peril (liability portion)			
	Mortgage guaranty			
	Ocean marine			
	Inland marine			
10.	Financial guaranty			
1.1	Medical professional liability-occurrence			
	Medical professional liability-claims made			
	Earthquake			
	Comprehensive (hospital and medical) individual			
3.2	Comprehensive (hospital and medical) group			
	Credit accident and health			
	Vision only			
	Dental only			
5.3	Disability income			
5.4	Medicare supplement			
5.5	Medicaid Title XIX			
5.6	Medicaid Title XVIII			
5.7	Long-term care			
5.8	Federal employees health benefits plan			
	Other health			
16.	Workers' compensation			
	Other liability-occurrence			
7.2	Other liability-claims made			
7.3	Excess Workers' Compensation			
8.1	Products liability-occurrence			
22	Producte liability-claims made			
9.1	Private passenger auto no-fault (personal injury protection)			
\sim	Other 12 of 1 or 1			
9.3	Other commercial auto liability Commercial auto no-fault (personal injury protection) Other commercial auto liability			
9.4	Other commercial auto liability			
11	Private passenger auto physical damage			
12	Commercial auto physical damage			
22	Aircraft (all perils)			
23	Fidelity			
	Surety			
	Burglary and theft			
20. 27	Boiler and machinery			
	Credit			
	International			
20	Warranty			
ე∪. ვ1	Warranty Reinsurance-Nonproportional Assumed Property	XXX	XXX	XXX
ა I. ვე	Reinsurance-Nonproportional Assumed Property Reinsurance-Nonproportional Assumed Liability	XXX		
ა∠. ვვ	Reinsurance Nonpreportional Assumed Figure 1 inco		XXX	XXX XXX
აპ. ა	Reinsurance-Nonproportional Assumed Financial Lines	XXX	XXX	,
34. ar	Aggregate write-ins for other lines of business	402 027 002	200 400 040	000 074 0
<i>ა</i> ა.	TOTALS	183,937,623	300,468,646	225,574,3
	DETAILS OF WRITE-INS			
01.				

DETAILS OF WRITE-INS	_	
3401.		
3402.	J	
3403.		
3498. Summary of remaining write-ins for Line 34 from overflow page		 [
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34)		

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
				2023 Loss and	2023 Loss and		Q.S. Date Known	Q.S. Date Known			Prior Year-End		
			Total	LAE	LAE Payments		Case Loss and	Case Loss and			Known Case Loss	Prior Year-End	Prior Year-End
	Prior Year-End	Prior Year-End	Prior Year-End	Payments on	on Claims	Total 2023	LAE Reserves on	LAE Reserves on	Q.S. Date	Total Q.S.	and LAE Reserves	IBNR Loss and LAE	Total Loss and LAE
Years in Which	Known Case	IBNR	Loss and LAE	Claims Reported	Unreported	Loss and LAE	Claims Reported	Claims Reported or	IBNR	Loss and LAE	Developed	Reserves Developed	Reserve Developed
Losses	Loss and LAE	Loss and LAE	Reserves	as of Prior	as of Prior	Payments	and Open as of	Reopened Subsequent	Loss & LAE	Reserves	(Savings)/Deficiency	(Savings)/Deficiency	(Savings)/Deficiency
Occurred	Reserves	Reserves	(Cols. 1 + 2)	Year-End	Year-End	(Cols 4 + 5)	Prior Year-End	to Prior Year-End	Reserves	(Cols 7 + 8 + 9)	(Cols. 4 + 7 - 1)	(Cols. 5 + 8 + 9 - 2)	(Cols. 11 + 12)
1. 2020 + prior	9,483	25,414	34,897	14,098		14,098	4,050		16,102	20,152	8,665	(9,312)	(647)
2. 2021	7,268	4,312	11,580	3,146		3,146	3,282		1,705	4,987	(840)	(2,607)	(3,447)
3. Subtotals 2021 + prior	16,751	29,726	46,477	17,244		17,244	7,332		17,807	25,139	7,825	(11,919)	(4,094
4. 2022	4,234	7,464	11,698	7,072	1,400	8,472	2,868	203	2,762	5,833	5,706	(3,099)	2,607
5. Subtotals 2022 + prior	20,985	37,190	58,175	24,316	1,400	25,716	10,200	203	20,569	30,972	13,531	(15,018)	(1,487)
6. 2023	XXX	XXX	XXX	XXX	39,681	39,681	XXX	11,172	31,486	42,658	XXX	XXX	XXX
7. Totals	20,985	37,190	58,175	24,316	41,081	65,397	10,200	11,375	52,055	73,630	13,531	(15,018)	(1,487

8. Prior Year-End Surplus As

Regards Policyholders _______ 38,643

Col. 11, Line 7
 As % of Col. 1, As % of Col. 2, As % of Col. 3, Line 7
 Line 7
 Line 7
 Line 7
 Col. 13, Line 7
 Line 7

1. 64.479
 2. -40.382
 3. -2.556
 Col. 13, Line 7
 Line 8

4. -3.848

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

				Response
1. Wil	I the Trus	teed Surplus Statement be filed with the state of domicile and the NA	IC with this statement?	NO
2. Wil	l Supplen	nent A to Schedule T (Medical Professional Liability Supplement) be f	iled with this statement?	NO
3. Wil	I the Med	care Part D Coverage Supplement be filed with the state of domicile	and the NAIC with this statement?	NO
4. Wil	I the Dire	ctor and Officer Insurance Coverage Supplement be filed with the sta	te of domicile and the NAIC with this statement?	NO
		AUGUS	ST FILING	
	and elect	egulator-only (non-public) Communication of Internal Control Related ronically with the NAIC (as a regulator-only non-public document) by D response resulting with a bar code is only appropriate in the 2nd qu	August 1? The response for 1st and 3rd quarters should be	N/A
Expla	anation:			
Questi	on 1:	Not required.		
Questi	on 2:	TWIA does not provide medical professional liability coverage.		
Questi	on 3:	TWIA does not provide Medicare Part D coverage.		
Questi	on 4:	TWIA does not provide D&O coverage.		
Bar C	ode:			
		30040202349000020	30040202345500020	
		300402020	30040202343300020	

30040202350500020

30040202336500020

OVERFLOW PAGE FOR WRITE-INS

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. Due from Depop Carriers - Assumption	826		826	387
2597. Totals (Lines 2501 through 2596) (Page 2, Line 2598)	826		826	387

OVERFLOW PAGE FOR WRITE-INS

Page 3 - Continuation

LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
		Current	December 31, Prior Year
REMAINING WRITE-INS AGGREGA	ATED AT LINE 25 FOR LIABILITIES	Statement Date	Prior Year
2504. Surcharge payable		563,935	261,193
2505. Deferred rent liability		466,167	
2506. Outstanding Checks Payable		271,691	861,286
2597. Totals (Lines 2504 through 2596) (Page 3, Line	e 2598)	1,301,793	1,122,479

NONE Schedule A, B, BA and D Verification

NONE Schedule D - Part 1B

NONE Schedule DA - Part 1 and 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

(Cash Equivalents)

		1	2
			Prior Year
		Year To Date	Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	261,863,803	316,389,491
2.	Cost of cash equivalents acquired	268,457,852	14,475,955
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.			
6.		400 007 000	69,001,643
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)	401,234,653	261,863,803
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	401,234,653	261,863,803

NONE Schedule A - Part 2 and 3

NONE Schedule B - Part 2 and 3

NONE Schedule BA - Part 2 and 3

NONE Schedule D - Part 3

NONE Schedule D - Part 4

NONE Schedule DB - Part A - Section 1

NONE Schedule DB - Part B - Section 1

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

Month End Depository Balances

1	2	3	4 Amount of	5 Amount of		Balance at End of the During Current Q		9
		Rate of	Interest Received During Current	Interest Accrued at Current	6	7	8	
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
Bank of America, N.A. Austin, TX		3.820	502,716		35,513,406	63,153,979	52,293,914	
Citibank, N.A. Dallas, TX Citibank, N.A IMMA Dallas, TX	0	1.750	39,727		197,025 17,164,556	196,862 114,891	196,684 115,056	
JP Morgan Chase Bank, N.A San Antonio, TX					33,665,782	48,128,984	63,706,988	
0199998 Deposits in (0) depositories that do								
not exceed the allowable limit in any one depository		V V V						
(see Instructions) - Open Depositories 0199999 Total - Open Depositories	XXX	XXX	542,443		86,540,769	111,594,716	116,312,642	XXX
Suspended Depositories								
0299998 Deposits in (0) depositories that do								
not exceed the allowable limit in any one depository		V V V						
(see Instructions) - Suspended Depositories 0299999 Total Suspended Depositories	XXX	XXX						XXX
0399999 Total Cash on Deposit	XXX	XXX	542,443		86,540,769	111,594,716	116,312,642	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
								1

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

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
1812C2-23-9 11747C-52-5 161941-10-8 18142B-50-0 11607A-80-2	JP Morgan US Treasury Plus Money Market Fund - Capital Shares 4110 Morgan Stanley Inst Liquidity FDS Treas Secs Dreyfus Treasury Securities Instutional Shares Goldman Sachs Fin'l SQ Treas - Inst Shares Fund 506 Fidelity Treasury Only 2643		06/30/2023 06/30/2023 06/30/2023 06/30/2023 06/30/2023	5.100 4.988 4.974 5.020 4.866	XXX XXX XXX XXX XXX	132,766,801 46,252,698 116,097,868 89,031,860 17,085,426	541,801 188,087 335,623 363,481 67,398	3,382,898 696,276 1,097,868 1,061,725 20,870
32099999999 Exempt Moi	ney Market Mutual Funds – as Identified by SVO		1			401,234,653	1,496,390	6,259,637
3609999999 Total Cash						401,234,653	1,496,390	6,259,637

NONE Trusteed Surplus Statement

NONE Medicare Part D

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



SUPPLEMENT "A" TO SCHEDULE T

EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN ALLOCATED BY STATES AND TERRITORIES

		1	2	Direct Lo	sses Paid	5	Direct Loss	ses Unpaid	8
				3	4		6	7	Direct
	States, Etc.	Direct Premiums Written	Direct Premiums Earned	Amount	Number of Claims	Direct Losses Incurred	Amount Reported	Number of Claims	Losses Incurred But Not Reported
1.	Alabama AL	0	0	0	0	0	0	0	0
2.	Alaska AK	0	0	0	0	0	0	0	0
3.	Arizona AZ	0	0	0	0	0	0	0	0
4.	Arkansas AR	0	0	0	0	0	0	0	0
5.	California CA	0	0	0	0	0	0	0	0
6. 7.	Colorado CO Connecticut CT	0	0	0	0	0	0	0	0
1		0	0	0	0	0	0	0	0
	District of Columbia DC	0	0	0	0	0	0	0	0
	Florida FL	0	0	0	0	0	0	0	0
11.	Georgia GA	0	0	0	0	0	0	0	
12.		0	0	0	0	0	0	0	0
13.	Idaho ID	0	0	0	0	0	0	0	0
14.	Illinois IL		0	0	0 0	0	0		0
15. 16.	Indiana IN lowa IA		0 0		0	0		0	0
	Kansas KS	0	0	0	0	0	0	0	0
	Kentucky KY	0	0	0	0	0	0	0	0
1	Louisiana LA	0	0	0	0	0	0	0	0
	Maine ME	0	0	0	0	0	0	0	
ı	Maryland MD	0	0	0	0	0	0	0	0
22.	Massachusetts MA			0	0	0	0	0	0
23.	Michigan MI	0	0	0	0	0	0	0	0
	Minnesota MN Mississippi MS		0		NE	0	0		0
26.	Missouri MO				/ I 📆 🖳			0	
		0	0	0	0		0	0	0
28.	Nebraska NE	0	0	0	0	0	0	0	0
29.	Nevada NV	0	0	0	0	0	0	0	0
	New Hampshire NH	00	0	0	0	0	0	0	0
1	New Jersey NJ	0	0	0	0	0	0	0	0
32.	New Mexico NM New York NY	0	0	0	0	0	0	0	0
1	New York NY North Carolina NC	0	0	0	0		0	0	0 0
	North Dakota ND	0		0	0		0	0	0
36.	Ohio OH	0	0	0	0	0	0	0	0
37.	Oklahoma OK	0	0	0	0	0	0	0	0
38.	Oregon OR	0	0	0	00	0	0	0	0
39.	Pennsylvania PA	0	0	0	0	0	0	0	0
40.	Rhode Island RI South Carolina SC	0	0 0	0	0	0	0	0	0
41. 42.	South Carolina SC South Dakota SD	0	0	0	0	0	0	0	0
43.		0	0	0	0	0	0	0	0
44.	Texas TX	0	0	0	0	0	0	0	0
45.	Utah UT	0	0	0	0	0	0	0	0
46.	Vermont VT	0	0	0	0	0	0	0	0
47.		0	0	0	0	0	0	0	0
48.	Washington WA	0	0	0	0	0	0	0	0
49.	West Virginia WV		0	0	0	0	0	0	0
50. 51.	Wisconsin WI Wyoming WY		0 0		0	0		0	0
52.	American Samoa AS	0	0	0	0	0	0	0	0
53.	Guam GU	0	0	0	0	0	0	0	0
54.	Puerto Rico PR	0	0	0	0	0	0	0	0
55.	US Virgin Islands VI	0	0	0	0	0	0	0	0
56.	Northern Mariana Islands MP	0	0	0	0	0	0	0	0
57.	Canada CAN	0	0	0	0	0	0	0	0
58. 50	Aggregate Other Alien OT	0	0	0	0	0	0	0	0
<u> </u>	Totals			. 0		. 0			U

	DETAILS OF WRITE-INS								
58001.		0	0	0	0	0	0	0	0
58002.		0	0	0		0	0	0	0
58003.		0	0	0		0	0	0	0
58998.	Summary of remaining write-ins								
	for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999.	for Line 58 from overflow page Totals (Lines 58001 through 58003								
	plus 58998) (Line 58 above)	0	0	0	0	0	0	0	0



DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

Year To Date For The Period Ended 2023

	NAIC Group Code	4766			NAIC Company Code	30040
	Company Name Te	xas Windstorm Insurance	Association			
	If the reporting entit	y writes any director and c	officer (D&O) business, please p	rovide the following:		
1.	Monoline Policies					
		1	2	3		
		Direct Written Premium	Direct Earned Premium	Direct Losses		
		\$	\$	Incurred \$		
2.	Commercial Multiple	e Peril (CMP) Packaged P	olicies			
2.1	Does the reporting	entity provide D&O liability	Yes] No [X]		
2.2	Can the direct prem be quantified or esti	nium earned for D&O liabili imated?	Yes] No [X]		
2.3		estion 2.2 is yes, provide the verage in CMP packaged p	ne quantified or estimated direct policies	premium earned amount		
			Amount quantified: Amount estimated using reaso	nable assumptions:	\$ \$	
2.4			irect losses incurred (losses pai ge provided in CMP packaged p		\$	