# **QUARTERLY STATEMENT**

OF THE

	ALTUS DENTAL	
	INSURANCE COMPANY, INC.	
of	PROVIDENCE	
in the state of	RHODE ISLAND	

**TO THE** 

**Insurance Department** 

**OF THE** 

**STATE OF** 

**RHODE ISLAND** 

FOR THE QUARTER ENDED

**September 30, 2020** 

**HEALTH** 

2020



# **QUARTERLY STATEMENT**

AS OF SEPTEMBER 30, 2020
OF THE CONDITION AND AFFAIRS OF THE

ALTUS DENTAL INSURANCE CO., INC.

NAIC Group Code 1571		NAIC Company Code	52632 Emp	oloyer's ID Number 05-0513223
(Current Period)	(Prior Period)	e	tota of Dominila or Dort of Entry	DI
Organized under the Laws of Country of Domicile US	KHODE ISLAND	,	tate of Domicile of Port of Entry_	RI
	, Accident and Health [X]	Property/Casualty	[ ] Hospital, Medical	& Dental Service or Indemnity [ ]
		Vision Service Corporation	• •	ce Organization [ ]
Incorporated/Organized		•		Santombar 1, 2001
		<u> </u>	<del></del>	
		mber)		
Main Administrative Office 10	CHARLES STREET	(0)		
PF	ROVIDENCE RI LIS 02904	(Street a	*	
<del></del>		untry and Zip Code)		umber)
Mail Address 10 CHARLES STR		Dev	, PROVIDENCE, RI US	02904
Primary Location of Books and Records	•	,	, ,	
,				
Statutory Statement Contact		ne)		umber) (Extension)
	gbedard@altusdental.com	,	(100p)1011011	401-457-7260
	(E-Mail A	ddress)		(Fax Number)
		OFFICERS		
	Name		Title	
		VICE-PRESIDENTS		
Name	Title		Name	Title
RICHARD A. FRITZ	VP & CFO			VP - CHIEF OPERATING OFFICER
BLAINE CARROLL  JAMES KINNEY		<u>'ES</u> <u>WENDY DL</u>	JNCAN	VP - CHIEF MARKETING OFFICER
JAINES RINNET	VF - SALES			
		<b>DIRECTORS OR TRUSTEE</b>	S	
JULIE G. DUFFY	THOMAS P. ENRIGHT		-	JONATHAN W. HALL
EDWARD O. HANDY LINDA R. McGOLDRICK				
JOHN T. RUGGEIRI				JAIVIES V. ROSATI
		<del></del>		
State of RHODE ISLAND				
County of PROVIDENCE	SS			
				•
		•		_
-				
to the extent that: (1) state law may differ; or, (	(2) that state rules or regulations re	quire differences in reporting not relate	ed to accounting practices and proced	dures, according to the best of their information,
(except for formatting differences due to electron	nic filing) of the enclosed statement.	The electronic filing may be requested	by various regulators in lieu of or in ad	dition to the enclosed statement.
	Use Accident and Health   Image: Spread   Denial Service Corporation   Image: Spread   Denial Service Corpora			
, ,		, ,		
(Title)		(Title)		(Title)
Subscribed and owers to before the			a la Meiro de Calente de la Ca	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Subscribed and sworn to before me this	2020		=	
13th day ofNOVEMBER	, حاكا			
KRISTEN MEIZOSO			O. IAUIIDI	Fadaa armanaa
My commission expires 8/1/24				

# **ASSETS**

Current Statement Date

			dirent Statement Da		
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1	Danda	40 E9E 666		40 E9E 666	44 744 047
	Bonds Charles	40,585,666		40,585,666	41,741,947
Ζ.	Stocks:				
	2.1 Preferred stocks				
•	2.2 Common stocks				
3.	Mortgage loans on real estate:		•		
	3.1 First liens				
	3.2 Other than first liens				
4.	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)				
5.	Cash (\$ 7,099,722), cash equivalents (\$ 2,466,060), and short-term		•		
	investments (\$ 0)	9,565,782		9,565,782	2,605,490
6.	Contract loans (including \$0 premium notes)				
7.	Derivatives				
8.	Other invested assets	1,012,000		1,012,000	1,118,458
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	51,163,448		51,163,448	45,465,895
13.	Title plants less \$ 0 charged off (for Title insurers only)				
14.	Investment income due and accrued	386,559		386,559	342,970
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	326,755	6,561	320,194	718,983
	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 redetermination (\$ 0)		•		
16	Reinsurance:				
10.	16.1 Amounts recoverable from reincurers				
	16.0 Funds held by as deposited with reincured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17.				605,081	570,545
18.1	Amounts receivable relating to uninsured plans  Current federal and foreign income tax recoverable and interest thereon				370,343
18.2	No. 16 The Control of			00 750	00 750
19.				88,759	88,759
	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$ 0)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$ 0) and other amounts receivable				
25.	Aggregate write-ins for other-than-invested assets	15,453		15,453	
26. 	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	52,636,223	56,729	52,579,494	47,187,152
	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)	52,636,223	56,729	52,579,494	47,187,152
	DETAILS OF WRITE-IN LINES				
1101.					
1101.					
1102.					
	Summary of remaining write ine for Line 11 from everflow page				
	Summary of remaining write-ins for Line 11 from overflow page  Totals (Lines 1101 through 1103 plus 1109) (Line 11 phone)				
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	45 450		45 450	
1	ADVANCE CLAIM PAYMENTS DUE TO COVID 19	15,453		15,453	
2502.					
2503.	0				
	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	15,453		15,453	

# LIABILITIES, CAPITAL AND SURPLUS

			Current Period		Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
	Claims unpaid (less \$ 0 reinsurance ceded)	2,441,890		2,441,890	1,747,320
2.	Accrued medical incentive pool and bonus amounts				
3.	Unpaid claims adjustment expenses	118,715		118,715	91,805
4.	Aggregate health policy reserves, including the liability of \$ 0 for medical				
	loss ratio rebate per the Public Health Service Act				
	Aggregate life policy reserves				
6.					
7.	Aggregate health claim reserves				
8.	Premiums received in advance	1,177,228		1,177,228	781,409
	General expenses due or accrued	2,087,769		2,087,769	2,882,948
10.1	Current federal and foreign income tax payable and interest thereon				
	(including \$ 0 on realized gains (losses))				
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others				
13.	Remittances and items not allocated				
	Borrowed money (including \$ 0 current) and interest				
	thereon \$ 0 (including \$ 0 current)				
15.	Amounts due to parent, subsidiaries and affiliates	423,317		423,317	2,194,648
	Derivatives				
17.	Payable for securities				
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties (with \$ 0 authorized reinsurers,				
	\$ 0 unauthorized reinsurers, and \$ 0 certified reinsurers)				
20.	Reinsurance in unauthorized and certified (\$ 0) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
	Liability for amounts held under uninsured plans				
23.	Aggregate write-ins for other liabilities (including \$ 0 current)	1,455,767		1,455,767	438.900
24.	Total liabilities (Lines 1 to 23)	7 704 686		7,704,686	8,137,030
	Aggregate write-ins for special surplus funds	V V V	XXX		1,089,121
	Common capital stock	XXX	XXX	3,000,000	3,000,000
	Desferred control starts	XXX	XXX		
28	Gross paid in and contributed surplus	XXX	XXX	3,319,861	3,319,861
29	Surplus notes	XXX	XXX	,	, , , , , , , , , , , , , , , , , , , ,
	Aggregate write-ins for other than special surplus funds	XXX	XXX		
		XXX	XXX	38,554,947	31,641,140
	Unassigned funds (surplus) Less treasury stock, at cost:				
٥٤.	32.1 0 shares common (value included in Line 26 \$ 0)	xxx	xxx		
	32.2 0 shares preferred (value included in Line 27 \$ 0)	XXX	XXX		
33	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	44,874,808	39,050,122
3 <i>1</i> /	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	52,579,494	47,187,152
J4.	i otal liabilities, capital and sulpids (Lines 24 and 33)	^^^	^ ^ ^	32,313,494	41,101,132

	DETAILS OF WRITE-IN LINES				
2301.	COVID PREMIUM CREDITS NOT YET TAKEN BY GROUPS	941,953		941,953	
2302.	ADVANCE DEPOSITS	513,814		513,814	438,900
2303.	2019 ACA TAX ASSESSMENT LIABILITY				
2398.	Summary of remaining write-ins for Line 23 from overflow page				
2399.	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	1,455,767		1,455,767	438,900
2501.	RESTRICTED RESERVES ACA ASSESSMENT	XXX	XXX		1,089,121
2502.		XXX	XXX		
2503.		XXX	XXX		
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX		
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX		1,089,121
3001.		XXX	XXX		
3002.		XXX	XXX		
3003.		XXX	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX		

# **STATEMENT OF REVENUE AND EXPENSES**

			nt Year Date	Prior Year To Date	Prior Year Ended December 31
		1	2	3	4
		Uncovered	Total	Total	Total
1.	Member Months	XXX	1,497,718	1,445,827	1,942,167
2.	Net premium income (including \$ 0 non-health premium income)	XXX	50,242,544	53,342,328	71,620,113
3.	Change in unearned premium reserves and reserve for rate credits	XXX			
	Fee-for-service (net of \$ 0 medical expenses)	XXX			
5.	Risk revenue	XXX			
6.	Aggregate write-ins for other health care related revenues				
7	Aggregate write-ins for other non-health revenues				
8	Total revenues (Lines 2 to 7)	XXX	50,242,544	53,342,328	71,620,113
Hosp	ital and Medical:				
9.	Hospital/medical benefits				
10.	Other professional services		33,811,604	40,499,914	53,219,888
11.	Outside referrals				
12.	Emergency room and out-of-area				
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				
15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)		33,811,604	40,499,914	53,219,888
Less					
17.	Net reinsurance recoveries				
18.	Total hospital and medical (Lines 16 minus 17)		33,811,604	40,499,914	53,219,888
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$ 187,720 cost containment expenses		1,643,786	2,141,339	2,796,198
21.	General administrative expenses		8,231,854	6,643,506	9,083,553
22.					
	\$ 0 increase in reserves for life only)				
23.			43,687,244	49,284,759	65,099,639
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	6,555,300	4,057,569	6,520,474
25.	Net investment income earned		773,695	718,129	918,034
26.	Net realized capital gains (losses) less capital gains tax of \$ 0		4,111	(19,408)	1,582
	Net investment gains (losses) (Lines 25 plus 26)		777,806	698,721	919,616
	Net gain or (loss) from agents' or premium balances charged off [ (amount				
	recovered \$ 0) (amount charged off \$ 0) ]				
29.	Aggregate write-ins for other income or expenses				89,481
	Net income or (loss) after capital gains tax and before all other federal income taxes				
	(Lines 24 plus 27 plus 28 plus 29)	XXX	7,333,106	4,756,290	7,529,571
31.	Federal and foreign income taxes incurred	XXX	1,746,509	1,019,253	1,581,210
	Net income (loss) (Lines 30 minus 31)	XXX	5,586,597	3,737,037	5,948,361

DETAILS OF WRITE-IN LINES		
0601.	XXX	
0602.	XXX	
0603.	XXX	
0698. Summary of remaining write-ins for Line 06 from overflow page	XXX	
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 06 above)	XXX	
0701.	XXX	
0702.	XXX	 
0703.	XXX	 
0798. Summary of remaining write-ins for Line 07 from overflow page	XXX	
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 07 above)	XXX	
1401.		
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)		
2901. GAIN ON PURCHASE OF MASSACHUSETTS TAX CREDITS		89,481
2902.		 
2903.		 
2998. Summary of remaining write-ins for Line 29 from overflow page		 
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		89,481

# **STATEMENT OF REVENUE AND EXPENSES (Continued)**

•		1	2	3
		Current Year	Prior Year	Prior Year Ended
		To Date	To Date	December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	39,050,122	33,299,811	33,299,811
34.	Net income or (loss) from Line 32	5 500 507	3,737,037	5,948,361
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$ 0	256	20,011	20,698
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			19,085
39.	Change in nonadmitted assets		(90,231)	(247,887)
40.	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in			
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in			
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	(17,908)	90,231	10,054
48.	Net change in capital and surplus (Lines 34 to 47)	5,824,686	3,757,048	5,750,311
49.	Capital and surplus end of reporting period (Line 33 plus 48)	44,874,808	37,056,859	39,050,122

DETAILS OF WRITE-IN LINES			
4701. INCLUSION OF BAD DEBT RESERVE IN THE NON ADMITTED ASSET	(17,908)	90,231	10,054
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page			
4799 Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	(17 908)	90 231	10 054

# **CASH FLOW**

	Cash from Operations	0		
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Premiums collected net of reinsurance	51,002,616	53,350,737	71,516,68
	Net investment income	734,217	673,405	884,78
3.	Miscellaneous income			
	Total (Lines 1 to 3)	51,736,833	54,024,142	72,401,4
	Benefit and loss related payments	33,117,034	40,682,894	53,323,8
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	10,643,909	8,878,767	11,160,2
	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)	1,746,509	1,019,253	1,581,2
	Total (Lines 5 through 9)	45,507,452	50,580,914	66,065,2
	Net cash from operations (Line 4 minus Line 10)	6,229,381	3,443,228	6,336,2
	Cash from Investments	, ,	, ,	
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	4,466,778	4,977,395	6,567,2
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
		1,285,006	1,521,004	1,521,0
	12.6 Net gains (or losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds			ı
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	5,751,784	6,498,399	8,088,2
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	3,515,310	9,758,487	15,708,5
	13.2 Stocks			
	13.3 Mortgage loans			
	13.4 Real estate			
	13.5 Other invested assets	1,178,548	966,000	966,0
	13.6 Miscellaneous applications			
	13.7 Total investments acquired (Lines 13.1 to 13.6)	4,693,858	10,724,487	16,674,5
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)	1,057,926	(4,226,088)	(8,586,2
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes			
	16.2 Capital and paid in surplus, less treasury stock			,
	16.3 Borrowed funds			,
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			,
	16.5 Dividends to stockholders			,
	16.6 Other cash provided (applied)	(327,015)	(316,852)	(294,3
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus			
ı	Line 16.5 plus Line 16.6)	(327,015)	(316,852)	(294,3
	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)	6,960,292	(1,099,712)	(2,544,4
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	2,605,490	5,149,907	5,149,9
	19.2 End of period (Line 18 plus Line 19.1)	9,565,782	4,050,195	2,605,4
	plemental disclosures of cash flow information for non-cash transactions:			

Note: Supplemental disclosures of cash flow information for non-cash transactions:  20.0001			
20.0001			
20.0002			
20.0003			

# **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1	Comprehensive (	(Hospital & Medical)	4	5	6	7	8	9	10
		2	3							
				Medicare	Vision	Dental	Federal Employees	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Health Benefit Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	165,661					165,661				
2. First Quarter	165,712					165,712				
Second Quarter	165,497					165,497				
4. Third Quarter	168,243					168,243				
5. Current Year				1						
6. Current Year Member Months	1,497,718					1,497,718				
Total Member Ambulatory Encounters for Period: 7. Physician										
8 Non-Physician										
g Totals										
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (a)	51,002,616					51,002,616				
13 Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned										
16. Property/Casualty Premiums Earned	50,242,544					50,242,544				
17. Amount Paid for Provision of Health Care Services	33,117,034					33,117,034				
Amount Incurred for Provision of Health Care Services	33,811,604					33,811,604				

1-	\ For booth promiums written.	amount of Madisors Title VVIII ava	mont from otata tayon or food (	^
(č	) For nealth premiums written:	amount of Medicare Title XVIII exe	mpt from state taxes or fees \$	U

# CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported) Aging Analysis of Unpaid Claims

			Aging Analysis of Unpaid Claims							
2	3	4	5	6	7					
1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total					
1,558,208	437,074	216,412	93,285	136,911	2,441,89					
1,558,208	437,074	216,412	93,285	136,911	2,441,89					
					2,441,8					
	1 - 30 Days  1,558,208  1,558,208	1 - 30 Days 31 - 60 Days  1,558,208 437,074  1,558,208 437,074	1 - 30 Days 31 - 60 Days 61 - 90 Days  1,558,208 437,074 216,412  1,558,208 437,074 216,412	1-30 Days 31-60 Days 61-90 Days 91-120 Days  1,558,208 437,074 216,412 93,285  1,558,208 437,074 216,412 93,285	1-30 Days 31-60 Days 61-90 Days 91-120 Days Over 120 Days  1.558.208 437.074 216.412 93.285 136.911  1.558.208 437.074 216.412 93.285 136.911					

# **UNDERWRITING AND INVESTMENT EXHIBIT**

### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

	Claims Paid	Year to Date	Liability End of Current Quarter		5	6
	1	2	3	4		Estimated Claim
Line	On Claims Incurred	On Claims Incurred	On Claims Unpaid	On Claims Incurred	Claims Incurred in	Reserve and Claim
of	Prior to January 1	During the	Dec. 31 of	During the	Prior Years	Liability Dec. 31
Business	of Current Year	Year	Prior Year	Year	(Columns 1 + 3)	of Prior Year
Comprehensive (hospital and medical)						
2. Medicare Supplement						
3. Dental only	1 500 700		48,174	2,393,716	1,630,896	1,747,320
4. Vision only						
5. Federal Employees Health Benefits Plan						
6. Title XVIII - Medicare						
7. Title XIX - Medicaid						
8. Other health						
9. Health subtotal (Lines 1 to 8)	1,582,722	31,534,312	48,174	2,393,716	1,630,896	1,747,320
10. Health care receivables (a)						
11. Other non-health						
12. Medical incentive pools and bonus amounts						
13. Totals (Lines 9 - 10 + 11 + 12)	1,582,722	31,534,312	48,174	2,393,716	1,630,896	1,747,320

(a) Excludes \$ 0 loans or advances to providers not yet expensed.

### NOTE 1 - - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### (A) Basis of Presentation

The Quarterly Statement of Altus Dental Insurance Company, Inc. for the quarter ended September 30, 2020 has been completed in accordance with the NAIC *Annual Statement Instructions* and the *Accounting Practices and Procedures Manual* and are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Department of Business Regulations. Note management is not aware of any deviations from this NAIC guidance, as interpreted by the Rhode Island Department of Business Regulation, as it relates to the financial information contained in this statement.

NOTES TO FINANCIAL STATEMENTS

#### Summary of Significant Accounting Policies and Going Concern Reconciliation of the Company's net inc. and capital & surplus between NAIC SAP and the state of ... is shown below NET INCOME F/S F/S SSAP# Line # 2020 2019 ALTUS DENTAL INSURANCE CO., INC. state basis (Page 4, Line 32, 02. State Prescribed Practices that increase/(decrease) NAIC SAP Net Income Net Income e.g. Depreciation of Fixed Assets 2019 SSAP# Page Line # 2020 Totals (Lines 01A0200 thru 01A0200 State Permitted Practices that increase/(decrease) NAIC SAF F/S F/S Net Income Net Income e.g.Depreciation of Home Office Property Line # Page 2020 2019 Totals (Lines 01A0300 thru 01A0300 04 NAIC SAP XXX XXX XXX 5,586,597 5,948,361 (1 - 2 - 3 = 4)SURPLUS F/S F/S Page SSAP# 2020 2019 Company state basis (Page 3, Line 33, Columns 3 & 4) 44,874,808 39,050,122 XXX State Prescribed Practices that increase/(decrease) NAIC SAP F/S F/S Surplus Surplus 2019 e.g., Goodwill, net, Fixed Assets, net SSAP# 2020 Page Line # Totals (Lines 01A0600 thru 01A0600 07. State Permitted Practices that increase/(decrease) NAIC SAP F/S F/S SSAP# e.g., Home Office Property Page Line # 2020 2019

## (B) Use of Estimates in the Preparation of the Financial Statements

The preparation of the financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates. Therefore there is no effect on the reported net income, statutory surplus and risk based capital from utilizing an accounting practice that differs from the NAIC statutory accounting practices and procedures.

XXX

### (C) Accounting Policy

**Investment Income and Declines in Fair Value** 

Totals (Lines 01A0700 thru 01A0700

NAIC SAP

The Company periodically reviews its bonds to determine whether a decline in fair value below the amortized cost basis is other than temporary. The process for identifying declines in the fair value of investments that are other than temporary involves consideration of several factors. These factors include (1) the period in which there has been a significant decline in value; (2) an analysis of the liquidity, business prospects, and overall financial condition of the issuer; (3) the significance of the decline; and (4) our intent and ability to hold the investment for a sufficient period for the value to recover. When our analysis of the above factors results in the conclusion that declines in fair values are other than temporary, the cost of the securities is written down to fair value and is reflected as a realized loss.

#### **Bonds**

Bond investments are stated at amortized cost and consist of United States Treasury and government agency securities as well as "Investment Grade" corporate notes with fixed rates and maturities. Interest income is accrued as earned. The Company has both the intent and ability to hold all securities until maturity and, accordingly, has categorized all investments as "held-to-maturity" securities. As a result, unrealized gains and losses are excluded from net income.

### **Claims and Claims Adjudication Expenses**

The estimated liability for claims incurred but unpaid is actuarially determined based on an analysis of historical claims experience, modified for changes in enrollment, inflation and benefit coverage. The estimated liability for accrued claims adjudication expense represents the anticipated cost of processing claims incurred but unpaid at the balance sheet date. The estimates for claims and claims adjudication expenses may be more or less than the amount ultimately paid when claims are settled. Such changes in estimates are reflected in current period operations.

Additionally, in accordance with NAIC guidelines, the following accounting policies are either utilized or are not applicable to the company.

- 1. Short term investments are stated at amortized cost.
- 2. Bonds are stated at amortized value using the constant yield / scientific method.
- 3. The company does not own common stocks; however, in accordance with NAIC guidelines, money market funds are now reported as Cash on Schedule E and the Balance Sheet, per the NAIC guidance.
- 4. The company does not own preferred stocks; hence this accounting policy is not applicable.
- 5. The company does not have mortgage loans; hence this accounting policy is not applicable.
- 6. Loan-backed securities are stated at amortized value using the constant yield / scientific method
- 7. Investments in subsidiaries, controlled and affiliated entities would be reported using the equity method.
- 8. The company does not have investments in joint ventures, partnerships and limited liability companies; hence this accounting policy is not applicable.
- 9. The company does not own derivatives; hence this accounting policy is not applicable.
- 10. The company does utilize anticipated investment income as a factor in the premium deficiency calculation.
- 11. The company methodologies for estimating the liabilities for losses and loss/claim adjustment expenses are actuarially derived as described above.
- 12. The capitalization policy and the predefined thresholds did not change from the prior period.
- 13. The company does not use pharmaceutical rebate receivables; hence this accounting policy is not applicable.

## (D) Going Concerns

There are no conditions or events that raise substantial doubt about the Company's ability to continue as a going concern.

### NOTE 2 - - ACCOUNTING CHANGES AND CORRECTION OF ERRORS

As part of the 2020 annual statement preparation, the Company's financial statements contain no items that resulted from corrections of errors or changes in accounting principles. Additionally, as required the Company's financial statements are prepared in accordance with the Codification of the NAIC Accounting Practices and Procedures Manual. This had no material impact on the 2020 and 2019 accounting practices or resulting statutory income and surplus as reported by the Company.

### NOTE 3 - - BUSINESS COMBINATIONS AND GOODWILL

During 2020, the Company had no business combinations, direct purchases or mergers with other companies. The related disclosures, specifically including 3A, are all not applicable.

### NOTE 4 - - DISCONTINUED OPERATIONS

During 2020, the Company's financial results include no gains or losses from discontinued operations. The related note disclosures, specifically including 4A(1), 4A(3) and 4A(4), are all not applicable.

### NOTE 5 - - INVESTMENTS

The Company's bond investments described in Note 1 represent all of the Company's statutory recorded investments at September 30, 2020 and December 31, 2019.

Additionally, in accordance with NAIC guidelines, the following accounting policies are either utilized or are not applicable to the company. The related note disclosures, specifically including 5A(3) through 5A(8), 5B(1) through 5B(3), 5D(2) through 5D(4), 5E(3)a, 5E(3)b, 5E(5)a, 5E(7), 5F(2), 5F(3), 5F(5) through 5F(11), 5G(2), 5G(3), 5G(5) through 5G(10), 5H(2), 5H(3), 5H(5) through 5H(9), 5I(2), 5I(3), 5I(5) through 5I(8), 5L, 5M(1), 5M(2), 5N, 5O, 5P and 5Q are all not applicable.

- A. Mortgage Loans, including Mezzanine Real Estate Loans This is not applicable.
- B. Debt Restructuring This is not applicable.
- C. Reverse Mortgages This is not applicable.
- D. Loan Backed Securities This is not applicable.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions This is not applicable.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing This is not applicable.
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing This is not applicable.
- H. Repurchase Agreements Transactions Accounted for as a Sale This is not applicable.
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale This is not applicable.
- J. Real Estate The Company's parent through one of its subsidiaries, Altus Realty, owns the building that functions as corporate headquarters for the parent and all subsidiaries. In December 2018, the Company's parent purchased an adjacent building to its existing corporate headquarters. This new entity, First Circle Realty, was incorporated as a subsidiary of The Altus Group.
- K. Low-Income Housing Tax Credits (LIHTC) The Company does utilize state tax credits, which may include low-income housing tax credits. See footnote number 21, where accounting for tax credits is addressed.
- L. Restricted Assets This is not applicable, so no table is needed.
- M. Working Capital Finance Investments This is not applicable.

- N. Offsetting and Netting of Assets and Liabilities This is not applicable.
- O. 5GI\* Securities This is not applicable.
- P. Short Sales This is not applicable.
- Q. Prepayment Penalty and Acceleration Fees This is not applicable.

### NOTE 6 - - JOINT VENTURES, PARTNERSHIPS and LIMITED LIABILITY COMPANIES

During 2020 and 2019, the Company did not participate in any joint ventures, partnerships or LLCs. The related disclosures are all not applicable.

### NOTE 7 - - INVESTMENT INCOME

Interest income is accrued as earned. At September 30, 2020 and December 31, 2019, the Company had no income due or accrued that it considered a nonadmitted asset, as collection on accrued interest is reasonably assured for all Company investments. There was no income excluded. There were no statutory temporarily impaired adjustments at September 30, 2020. There was a statutory temporarily impaired adjustment of \$256 at December 31, 2019, which reduced investments, and increased reserves in 2020.

### NOTE 8 - - DERIVATIVE INSTRUMENTS

As disclosed in Note 1 above, investments consist of United States government and government agency securities, and "investment grade" corporate notes with fixed rates and maturities. During the periods ended September 30, 2020 and December 31, 2019, the Company had not utilized any derivative financial instruments. The related disclosures, specifically 8A(8) and 8B(2) through 8B(4), are all not applicable.

### NOTE 9 - - FEDERAL INCOME TAXES

The Company adopted SSAP No. 101, a replacement of SSAP No. 10R, effective January 1, 2012. The September 30, 2020 and December 31, 2019 balances and related disclosures are calculated and presented pursuant to SSAP No. 101.

### NOTES TO FINANCIAL STATEMENTS

	income raxes							
A.	The components of the net deferred tax asset/(liability) at Septemb	oer 30	are as follows:					
r <sub>1.</sub>		Г	09/	30/2020		12/	31/2019	
			(1)	(2)	(3)	(4)	(5)	(6)
					(Col 1 + 2)			(Col 4 + 5)
			Ordinary	Capital	Total	Ordinary	Capital	Total
a.	Gross Deferred Tax Assets	\$	88,759		88,759	88,759		88,759
b.	Statutory Valuation Allowance Adjustment	\$						
C.	Adjusted Gross Deferred Tax Assets (1a - 1b)	\$	88,759		88,759	88,759		88,759
d.	Deferred Tax Assets Nonadmitted	\$						
e.	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$	88,759		88,759	88,759		88,759
f.	Deferred Tax Liabilities	\$						
g.	Net Admitted Deferred Tax Asset /							
	(Net Admitted Deferred Tax Liability) (1e - 1f)	\$	88,759		88,759	88,759		88,759

1.		Change	
	(7)	(8)	(9)
	(Col 1 - 4)	(Col 2-5)	(Col 7 + 8)
	Ordinary	Capital	Total
a. Gross Deferred Tax Assets	\$		
o. Statutory Valuation Allowance Adjustment	\$		
. Adjusted Gross Deferred Tax Assets (1a - 1b)	\$		
d. Deferred Tax Assets Nonadmitted	\$		
e. Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$		
Deferred Tax Liabilities	\$ 		
g. Net Admitted Deferred Tax Asset /			
(Net Admitted Deferred Tax Liability) (1e - 1f)	\$		

2.		09/	30/2020		12/3	31/2019	
		(1)	(2)	(3)	(4)	(5)	(6)
				(Col 1 + 2)			(Col 4 + 5)
Admission Calculation Components SSAP No. 101		Ordinary	Capital	Total	Ordinary	Capital	Total
a. Federal Income Taxes Paid In Prior Years Recoverable							
Through Loss Carrybacks.	\$						
b. Adjusted Gross Deferred Tax Assets Expected To Be Realized	_						
(Excluding The Amount Of Deferred Tax Assets From 2(a) above)							
After Application of the Threshold Limitation. (The Lesser of							
2(b)1 and 2(b)2 Below)	\$	88,759		88,759	88,759		88,759
1. Adjusted Gross Deferred Tax Assets to be Realized Following	_						
the Balance Sheet Date.	\$						
Adjusted Gross Deferred Tax Assets Allowed per	_						
Limitation Threshold	\$	XXX	XXX		XXX	XXX	
c. Adjusted Gross Deferred Tax Assets (Excluding the Amount	_						
Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by							
Gross Deferred Tax Liabilities.	\$						
d. Deferred Tax Assets Admitted as the result of application of SSAP							***************************************
No. 101. Total ( 2(a) + 2(b) + 2(c) )	\$	88.759		88.759	88.759		88,759

2.				Change	
			(7)	(8)	(9)
			(Col 1 - 4)	(Col 2 - 5)	(Col 7 + 8)
	Admission Calculation Components SSAP No. 101		Ordinary	Capital	Total
a.	Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$			
b.	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above)				
	After Application of the Threshold Limitation. (The Lesser of				
	2(b)1 and 2(b)2 Below)	\$			
1	Adjusted Gross Deferred Tax Assets to be Realized Following	- Ŭ			
	the Balance Sheet Date.	\$			
2	Adjusted Gross Deferred Tax Assets Allowed per				
	Limitation Threshold	\$	XXX	xxx	
C.	Adjusted Gross Deferred Tax Assets (Excluding the Amount	-			
	Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by				
	Gross Deferred Tax Liabilities.	\$			
d.	Deferred Tax Assets Admitted as the result of application of SSAP				
	No. 101. Total ( 2(a) + 2(b) + 2(c) )	\$			
3.		Г	2020	2019	1
а.	Ratio Percentage Used to Determine Recover Period	-	2020	2019	-
cı.	Natio Fercentage osed to Determine Necover Feriod				

а.	And Threshold Limitation Amount.				
b.	Amount Of Adjusted Capital And Surplus Used To Determine				
	Recovery Period And Threshold Limitation In 2(b)2 Above.	\$			
4.		09/30/20	20	12/3	1/2019
	Impact of Tax Planning Strategies	(1)	(2)	(3)	(4
(a)	Determination of Adjusted Gross Deferred Tax				
	Assets and Net Admitted Deferred Tax Assets,				
	By Tax Character As A Percentage.	Ordinary	Capital	Ordinary	Cap
1.	. Adjusted Gross DTAs Amount From Note 9A1(c)	88,759		88,759	
2	Percentage of Adjusted Gross DTAs By Tax				
	Character Attributable To The Impact of Tax Planning Strategies				
3	Net Admitted Adjusted Gross DTAs Amount from Note 9A1(e)	88,759		88,759	
4	Percentage of Net Admitted Adjusted Gross DTAs by Tax				
	Character Attributable To The Impact of Tax Planning Strategies				

b.	Does the Company's Tax-planning Strategies include
	the use of reinsurance?

<sup>\*</sup> As reported on the statutory balance sheet for the most recently filed statement with the domilicary state commissioner adjusted in accordance with SSAP N

(Col 1 - 3) (Col 2 - 4) Capital Total

C.		Current income taxes incurred consist of the following major component	ents.		
			(1)	(2)	(3)
			09/30/2020	12/31/2019	(Col 1 - 2) Change
٩.		Current Income Tax			
	a.	Federal \$	1,746,509	1,581,210	165,299
	b.	Foreign \$			
	C.	Subtotal \$	1,746,509	1,581,210	165,299
	d.	Federal Income Tax on net capital gains \$			
	e.	Utilization of capital loss carry-forwards \$			
	f.	Other \$			
	g.	Federal and foreign income taxes incurred \$	1,746,509	1,581,210	165,299
2.		Deferred Tax Assets:			
	a.	Ordinary			
	(1)	Discounting of unpaid losses \$	7,609	7,609	
	(2)	Unearned premium reserve \$	51,253	51,253	
		Policyholder reserves \$			
	, ,	Investments \$			
		Deferred acquisition costs \$			
		Policyholder dividends accrual \$			***************************************
		Fixed assets \$			
		Compensation and benefits accrual \$		ļ	
		Pension accrual \$	15.017	45.047	
		Receivables - nonadmitted \$	15,617	15,617	
		Net operating loss carry-forward \$ Tax credit carry-forward \$			
		Tax credit carry-forward \$ Other (including items <5% of total ordinary tax assets) \$	14 200	14,280	
		Subtotal \$	14,280 88,759	88.759	
	(99)	Subiotal	00,759	00,709	
	b.	Statutory valuation allowance adjustment \$			
	C.	Nonadmitted \$			
	d.	Admitted ordinary deferred tax assets (2a99 - 2b - 2c) \$	88,759	88,759	
			23,122		
	e.	Capital:			
	(1)	Investments \$			
	(2)	Net capital loss carry-forward \$			***************************************
	(3)	Real estate \$			
	(4)	Other (including items <5% of total capital tax assets)			
	(99)	Subtotal \$			
	f.	Statutory valuation allowance adjustment \$			
	g.	Nonadmitted \$			
	h.	Admitted capital deferred tax assets (2e99 - 2f - 2g) \$			
	i.	Admitted deferred tax assets (2d + 2h)	88,759	88,759	
3.		Deferred Tax Liabilities:			
-	a.	Ordinary			
		•			
	(1)	Investments \$			
		Fixed assets \$			
	(3)	Deferred and uncollected premium \$			
	(4)	Policyholder reserves \$			
	(5)	Other (including items <5% of total ordinary tax liabilities)			
	(99)	Subtotal \$			
	b.	Capital:			
	/11	Investments \$			
		Real Estate \$	ļ		
		Other (including items <5% of total capital tax liabilities)  \$ \$ \]			
		Subtotal \$	-		
	,00)				
	C.	Deferred tax liabilities (3a99 + 3b99)			
4.		Net deferred tax assets/liabilities (2i - 3c) \$	88,759	88,759	

The Company is not utilizing tax planning strategies.

There are no temporary differences for which deferred tax liabilities are not recognized.

There was no valuation allowance adjustment to gross deferred tax assets as of September 30, 2020 and no net change in the total valuation allowance adjustments for the periods ended September 30, 2020 and December 31, 2019, respectively.

The realization of the deferred tax asset is dependent upon the Company's ability to generate sufficient taxable income in future periods. Based on historical results and the prospects for

future current operations, management anticipates that it is more likely than not that future taxable income will be sufficient for the realization of the remaining deferred tax assets.

As of September 30, 2020 and December 31, 2019, there are no operating losses or tax credit carryforwards available for federal tax purposes.

The following are income taxes incurred in the current and prior years that will be available for recoupment in the event of future losses:

	Ordinary	Capital	Total
Year:			
2020	\$ 1,746,509	_	2,432,993
2019	\$ 1,562,125	_	1,562,125
2018	\$ 1,822,805	_	1,822,805
2017	\$ 2,431,284	_	2,431,284
2016	\$ 1,920,841	_	1,920,841

There are no deposits held under Section 6603 of the Internal Revenue Code.

Altus Dental Insurance Company, Inc. is incorporated in the State of Rhode Island as a for-profit company. The Company pays premium taxes to the State of Massachusetts as opposed to state income tax.

Additionally, for federal tax purposes the Company's taxable operations are included within the consolidated group tax filings of its parent, The Altus Group, Inc. The other subsidiaries of The Altus Group, Inc. are Altus Systems, Inc., Altus Dental, Inc., Altus Ventures, Inc., First Circle, Inc. and First Circle Realty, Inc, which are included in the consolidated returns for both federal and state tax reporting.

The Company's income tax returns that remain open to examination are for the years 2015 and subsequent.

### NOTE 10 - - INFORMATION CONCERNING PARENT, SUBSIDIARIES AND AFFILIATES

A. In December of 2018, a new entity within the Altus Group, First Circle Realty, Inc. was formed to purchase the land and building at 10 Orms Street in Providence. The purchase was capitalized with \$6,500,000 and recorded as an intercompany transfer from the ultimate parent Company, Delta Dental of Rhode Island.

Previously, in the fourth quarter of 2016, a new entity within the Altus Group, First Circle, Inc. was also established and was capitalized with \$10,000,000 in the first quarter of 2017. In March of 2019, additional capital in the amount of \$5,000,000 was transferred to this new company. These amounts were recorded as intercompany transfers, as these capitalizations were from the ultimate parent Company, Delta Dental of Rhode Island. First Circle, Inc., a for-profit subsidiary, remains in the development stage. The Company is a services company that connects consumers with dentists for services not payable by insurance, and assists dental offices in promoting and increasing the efficiency of their offerings of such services through its proprietary Chewsi technological, transactional, payment processing and marketing services platform.

- B. See section A above.
- C. See section A above.
- D. At September 30, 2020 and December 31, 2019 the Company has payables with/to the Altus Group, Inc. and other affiliates. Some of these balances resulted from the fact that Altus Dental Insurance Company maintained a sweep banking arrangement for the Altus Group and its subsidiaries. The remainder of these balances are related to allocated expenses.

Management's cash flow projections for The Altus Group, Inc. and its subsidiaries are made based on a number of factors, which affect the changes in the intercompany balances over the period of time being analyzed. The most significant factors include: the relative and absolute growth in enrollment levels for Altus Dental Insurance Company, Inc.; the amount and rate of increase in operating and administrative expenses; the level of success Altus Dental, Inc. experiences in developing and maintaining its dental network; and the level of resources required by Altus Dental, Inc. for recruitment and marketing functions. Management's current cash flow projections for the dental operations of The Altus Group, Inc. and its subsidiaries projects profitability going forward and that the intercompany advances will be reduced gradually over time

See Schedule Y of the 2019 Annual Statement – Part 2 – Summary of Insurers Transactions with any Affiliates.

# ALTUS DENTAL INSURANCE CO., INC. INTERCOMPANY BALANCES SEPTEMBER 30, 2020

### Assets (Page 2)

Line #	Account #	Description	Amount
23	2166-0000-001	A/R from The Altus Group. Inc.	\$881,015.55
		Total	\$881,015.55

### Liabilities (Page 3)

Line #	Account #	Description	Amount
15	2166-0000-000	A/P to Delta Dental of RI	\$505,670.55
	2166-0000-002	A/P to Altus Dental, Inc.	507,379.21
	2166-0000-003	A/P to Altus Systems, Inc.	291,283.16
		Total	\$1,304,332.92

- E. The company maintains no guarantees or undertakings in accordance with SSAP #5 not applicable.
- F. Altus Dental Insurance Company and Delta Dental of RI (DDRI) are allocated expenses from Altus Systems, Inc., a subsidiary within the Altus Group. Altus Systems (AS) is the company that employs the operations staff necessary to administer the dental business of both DDRI and Altus Dental Insurance Company. As a for-profit company, AS "sells" its dental related services to its sister and ultimate parent company at a 2% markup over its costs (to satisfy IRS requirements); therefore AS generates net income on its dental operations. The allocations from Altus Systems are based on the Company's member enrollment levels as a percentage of total consolidated dental member enrollment.

The Parent Company's one dental insurance subsidiary, Altus Dental Insurance Company, is allocated expenses from three affiliated Companies, the ultimate Parent, Delta Dental of RI and two sister companies (Altus Systems, Inc. and Altus Dental, Inc.) within the Altus Group. The allocations from Delta and Altus Systems are based on the Company's member enrollment levels as a percentage of total consolidated dental member enrollment. Expenses from Altus Dental are based on the number of subscribers under contract by the Company. The main allocated expenses from each source are as follows:

• Expenses are allocated from Delta Dental (DDRI), for costs associated with a portion of consolidated expenses incurred by DDRI that should be spread between the two insurance companies. The main costs in this category would be

- rent, depreciation and payroll and fringe benefit costs for the various departments that service both insurance Companies, such as Underwriting and Finance.
- Altus Systems (AS) is the company that employs the operations staff necessary to administer the dental business of both DDRI and this Company, such as claims processing and customer service.
- Altus Dental incurs costs related to: (1) advertising, (2) recruiting and servicing the provider network, and (3) sales and marketing activities. These costs are then allocated to the Company based on the volume of subscriber dental contracts.

For the periods ended September 30, 2020 and December 31, 2019, after elimination of intercompany transactions, The Altus Group, Inc. generated income of \$4,963,867 and \$4,832,878, respectively.

Altus Dental Insurance Company, Inc. is allocated expenses from affiliated entities based on allocation methods, which are analyzed and updated by management on an annual basis. The resulting total expense allocations are disclosed on Schedule Y of the 2019 Annual Statement filing. Total expenses, including these allocated expenses, are disclosed in more descriptive detail in the year end Underwriting and Investment Exhibit Part 3 – Analysis of Expenses.

- G. Altus Dental Insurance Company, Inc. is a wholly owned subsidiary of The Altus Group, Inc. which itself is a wholly owned subsidiary of Delta Dental of Rhode Island. This group of affiliated for-profit entities was established in 1999 for the purpose of expanding the ultimate parent company's offering of prepaid dental care products to organizations based outside the State of Rhode Island.
- H. The consolidated holding company maintains no upstream intermediate entities. This type of structured entity is not applicable to the corporate structure of Delta Dental of Rhode Island and all subsidiaries.
- I. The Company has no ownership of SCA entities. The parent company, Delta Dental of Rhode Island, does have an SCA annual filing for its subsidiary, The Altus Group.
- J. SCA impairment is not applicable to the Delta Dental of Rhode Island and Altus Dental Insurance Company as all subsidiaries are healthy and profitable.
- K. Foreign Insurance Subsidiaries are not applicable to the operations of the Company.
- L. Investments in a downstream noninsurance holding Company are not applicable to the operations of the Company.
- M. The Company maintains no SCA investments, so the Balance Sheet valuation tables are not applicable.
- N. The NAIC guidance per this section relates to disclosing Insurance SCA investments where the statutory equity reflects a departure from the NAIC permitted or prescribed statutory accounting practices and procedures. This departure from NAIC entity valuation methodology is not applicable to the corporate structure of the Company, therefore the table disclosing an NAIC departure is not applicable.
- O. The company maintains no SCA investments, so there are no losses that would exceed its investment. No disclosure is needed.

### NOTE 11 - - DEBT

During the periods ended September 30, 2020 and December 31, 2019 the Company had no outstanding capital notes or any debt arrangements. The related note disclosures, specifically including 11B(2) through 11B(4), are all not applicable.

# NOTE 12 - - EMPLOYEE RETIREMENT PLANS AND OTHER POSTRETIREMENT BENEFIT PLANS

The Company maintains no retirement or other post retirement benefit plans. The related note disclosures, specifically including 12A(1) through 12A(7), 12A(10) and 12C(1), are all not applicable.

### NOTE 13 - - CAPITAL AND SURPLUS

Altus Dental Insurance Company, Inc. is a subsidiary of The Altus Group, Inc. and is a for-profit corporation. The Company's capital stock consists of 30 shares issued and outstanding. Each share has \$100,000 par value amounting to the \$3,000,000 total reflected on the balance sheet. All of the Company's outstanding shares of stock are owned by The Altus Group, Inc. The Company has no dividend restrictions, and has not been involved in any quasi-reorganization.

The contributed surplus of \$3,319,861 results from the additional capitalization of the Company when bond and fixed income notes (the investment portfolio) were transferred from its parent to the Company. The initial and subsequent additional capitalizations (from these investment portfolio transfers) were to fulfill capitalization requirements of the Rhode Island Department of Business Regulation and the Massachusetts Division of Insurance.

Note the following disclosures related to the company's capital and surplus. The related note disclosures, specifically including 13(11) and 13(12), are all not applicable.

- 1. 30 shares at \$100,000 per share.
- 2. Dividend rate Not applicable
- 3. Dividend restrictions Not applicable
- 4. Dividends paid Not applicable
- 5. Profits that may be paid as dividends Not applicable
- 6. Restrictions placed on unassigned funds A total of \$1,089,121 of reserves were restricted at December 31, 2019 for the estimated twelve months of the 2020 ACA assessment, based on the actual 2019 premiums in the December 31, 2019 filing. This amount was expensed in the first quarter of 2020. The final actual amount of \$1,096,027 from the IRS was paid in September 2020.
- 7. Total amount of advances to surplus Not applicable
- 8. Amount of stock held by reporting entity for special purposes Not applicable
- 9. Changes in the balances of special surplus funds from the prior year Not applicable
- 10. Portion of unassigned funds represented or reduced by unrealized gains and losses within the bond investments is \$0 at September 30, 2020 and \$256 at December 31, 2019 as discussed in note 7.
- 11. Surplus notes Not applicable
- 12. Impact of the restatement in a quasi-reorganization Not applicable
- 13. Effective date of quasi-reorganization Not applicable

### NOTE 14 - - CONTINGENT LIABILITIES

There are no contingent liabilities arising from litigation which would be considered material in relation to the Company's financial position. Accordingly, the Company has no reserves committed to cover any contingent liabilities. The related note disclosures, specifically including 14A(2), 14B(3), 14B(3) and 14D, are all not applicable.

The following are not applicable to the company.

- A. Contingent commitments Not applicable
- B. Assessments Not applicable, other than the ACA Assessment addressed above
- C. Gain contingencies Not applicable

- D. Claims related extra contractual obligation Not applicable
- E. Joint and several liabilities Not applicable
- F. All other contingencies Not applicable

### NOTE 15 - - LEASES

The Company has no lease obligations for office space or other such commitments, as it is allocated expenses from the ultimate parent Delta Dental of Rhode Island. The related note disclosures, specifically including 15A(2)a, 15B(1)c, 15B(2)b and 15B(2)c, are all not applicable.

# NOTE 16 - - INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK

The Company maintains no financial instruments with off-balance sheet risk or any financial instruments with concentrations of credit risk. The related note disclosures, specifically including 16(1), are all not applicable.

### NOTE 17 - - SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS

The Company has no transactions relating to transfers of receivables reported as sales, transfer and servicing of financial assets or wash sales. The related note disclosures, specifically including 17C(2), are all not applicable.

### NOTE 18 - - GAIN OR LOSS FROM UNINSURED ACCIDENT & HEALTH PLANS

The Company's policy regarding underwriting and pricing for uninsured or partially insured accident and health plans has been to determine that the administrative premium charged to each account covers all incremental costs (directly associated with servicing the specific account) plus a share of fixed and variable operating expenses to be incurred by the Company during the contract period.

As discussed in Note 1 and 2, for the 2020 and 2019 annual filings, the Company's financial statements are prepared in accordance with the Codification of the NAIC Accounting Practices and Procedures Manual. This included the implementation of Statement on Statutory Accounting Principles (SSAP) # 47 "Uninsured Plans". The Company's September 30, 2020 and December 31, 2019 financial operations respectively exclude approximately \$4,065,741 and \$6,225,291 of revenues from such plans and there are no significant gains or losses related to such transactions. The company does not have any ASO plans and Medicare or similarly structured cost based reimbursement contracts. The company does have ASC plan information, which is included in the following illustration.

18.

## **NOTES TO FINANCIAL STATEMENTS**

## NOTES TO FINANCIAL STATEMENTS

		Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsure	ed	Portion of P	artially Insured Plar	าร
A		ASO Plans The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during 2020: (years as seen in Notes text)		ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
	a.	Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$			
	b.	Total net other income or expenses (including interest paid to or received fro	\$			
	C.	Net gain or (loss) from operations (a + b)	\$			
	d.	Total claim payment volume	\$			
B.		ASC Plans				
		The gain from operations from Administrative Services Contract (ASC) uninsu	ire		Uninsured Portion	
		plans and the uninsured portion of partially insured plans was as follows		Uninsured		Total
		during 2020: (years as seen in Notes text)		Plans	Plans	<u>ASC</u>
	a.	Gross reimbursement for medical cost incurred	\$	3,678,114		3,678,114
	b.	Gross administrative fees accrued	\$	387,627		387,627
	C.	Other income or expenses (including interest paid to or received from plans)	\$			
	d.	Gross expenses incurred (claims and administrative)	\$			
	0	Total net gain or loss from operations (a + b + c - d)	\$	4 065 741		4 065 741

# NOTE 19 - - DIRECT PREMIUM WRITTEN / PRODUCED BY MANAGING GENERAL AGENTS / THIRD PARTY ADMINISTRATORS

The Company maintains no relationships with managing general agents or third party administrators. The Company does utilize in-house sales efforts, as well as independent brokers to market its products. Premiums earned are reported gross of broker's commissions of approximately \$2,479,751 and \$3,264,868 for the periods ended September 30, 2020 and December 31, 2019. The related note disclosures are all not applicable.

### NOTE 20 - - FAIR VALUE MEASUREMENTS

The use of different assumptions or valuation methodologies may have a material impact on the estimated fair value amounts.

The Company's valuation techniques are based on observable and unobservable pricing inputs. Observable inputs reflect market data obtained from independent sources based on trades of securities while unobservable inputs reflect the Company's market assumptions. These inputs are comprised of the following fair value hierarchy:

Level 1 – Observable inputs in the form of quoted prices for identical instruments in active markets.

Level 2 – Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active or other inputs that are observable or can be derived from observable market data for substantially the full term of the assets or liabilities.

Level 3 – One or more unobservable inputs that are supported by little or no market activity and are significant to the fair value of the assets and liabilities. Level 3 assets and liabilities include financial instruments whose value is determined using internal models, as well as instruments for which the determination of fair value requires significant management judgment or estimation.

The Company does not currently have any financial assets that are measured at Level 3 fair value on a recurring basis. The following table provides information about the Company's financial assets and liabilities measured at fair value on a recurring basis:

		Level 1	Level 2	Level 3	Total
September 30, 2020					
Assets at fair value:					
Cash Equivalents - Money Market	\$	2,466,060			2,466,060
Investments - Bonds	П		42,217,395		42,217,395
December 31, 2019					
Assets at fair value:					
Cash Equivalents - Money Market	\$	530,827			530,827
Investments - Bonds			42,385,241		42,385,241

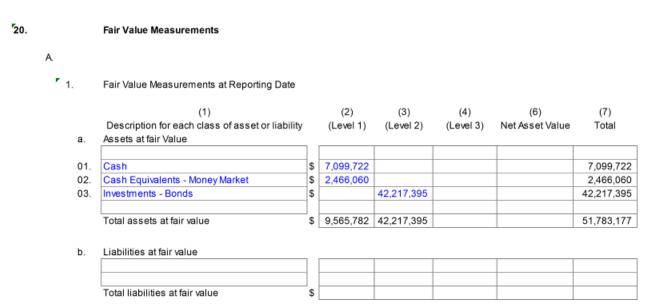
The book values and estimated fair values of the Company's financial instruments are as follows:

			Septemb	er 2020		Decemb	er 2019
			Book value	Estimated fair value		Book value	Estimated fair value
Assets:							
Cash		\$	7,099,722	7,099,722	\$	2,074,663	2,074,663
Cash E	quivalents - Money N	Market	2,466,060	2,466,060		530,827	530,827
Investr	nents - Bonds		40,585,666	42,217,395		41,741,947	42,385,241
					П		

Cash and Cash Equivalents – The carrying value of cash and cash equivalents are presented at cost, which approximates fair value.

Investments – Investment securities are reported at amortized cost. The Company obtains fair value measurements from independent pricing sources, which base their fair value measurements upon observable inputs such as reported trades of comparable securities, broker quotes, the U.S. Treasury yield curve, benchmark interest rates, credit information, and the securities' terms and conditions. These prices are deemed to be Level 2.

## NOTES TO FINANCIAL STATEMENTS



Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

### **NOTES TO FINANCIAL STATEMENTS**

		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
		Beginning			Total gains and (losses)	Total gains and (losses)					Ending Balance for
	Description		Transfers in	Transfers out	included in	included in					Current
	a. Assets	01/01/2020	Level 3	of Level 3	Net Income	Surplus	Purchases	Issuances	Sales	Settlements	
	Total \$										
	Total										
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
	Description b. Liability  Total \$	Beginning Balance at 01/01/2020	Transfers in Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus		Issuances	Sales	Settlements	Ending Balance for Current Quarter End
C.	Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)				
	Total \$										
								1			
		Comina	Effective	Maturity							
D.	Type or Class of Financial Instrument	Carrying Value	Interest Rate	Maturity Date		Explanation					
	1, po o, olass of mandarmandment	value	Nate	Date		=np-arrauorr					
	Total \$										

### NOTE 21 - - OTHER ITEMS

The Company has no extraordinary items, subprime mortgage related risk exposure, troubled debt restructuring or other required disclosures of unusual items. Additionally, the Company has no additional disclosure requirements regarding Retirement Plans, Deferred Compensation and Postretirement Benefits.

The Company has entered into a signed and funded agreement to purchase state tax credits that will be utilized in 2020. Payment for 2019 occurred in Q2 2020. Accordingly, the Company maintains tax credits as net assets at September 30, 2020 and December 31, 2019. Before purchasing the tax credits the Company estimates the utilization of 2020 tax credits by projecting future premium levels taking into account policy growth and applicable rate changes.

Other than the purchase of MA state tax credits, the remaining areas below are not applicable to the company, specifically 21H and 21I.

- A. Unusual or infrequent items Not applicable
- B. Troubled debt restructuring debtors Not applicable
- C. Other disclosures and unusual items Not applicable
- D. Business interruption insurance recoveries Not applicable
- E. State transferable and non-transferable tax credits The Company has entered into a signed and funded agreement to purchase state tax credits that will be utilized in 2020. Payment occurred in Q2 2020. One state tax credit purchase had been made in 2019 for 2019, along with a 2018 carryforward. The carrying value in the amount of \$1,012,000 is listed on the September 30, 2020 Balance Sheet. The carrying value in the amount of \$1,118,458 was listed on the December 31, 2019 Balance Sheet.
- F. Subprime-mortgage-related risk exposure Not applicable
- G. Retained assets Not applicable
- H. Insurance-Linked securities (ILS) Contracts Not applicable.

# NOTES TO FINANCIAL STATEMENTS

[	Description of State Transferable Tax Credits	State	Carrying Value	Unused Amount	
•	2020 MASSACHUSETTS TAX CREDIT	MA	1,012,000		]
02.	2020 W GO FOR CONTROLLED TO		1,012,000		
Ļ	Total	X X X	1,012,000		
	State Tax Credits Admitted and Nonadmitted	Total Admitted	Total Non-Admitted		
a.	Transferable			]	
b.	Non-transferable				
	Subprime Mortgage Related Risk Exposure				
2.	Direct exposure through investments in subprime mortgage loans.	1	2	3	4
		Book/Adjusted			Other Than Temporary
		Carrying Value			Impairment
		(excluding		Value of Land	Losses
		interest)	Fair Value	and Buildings	Recognized
	a. Mortgages in the process of foreclosure	***************************************	***************************************	***************************************	
	b. Mortgages in good standing c. Mortgages with restructure terms		***************************************		
	d. Total				
3.	Direct exposure through other investments.				
		1	2	3	4
			B 1- (4 - 1) 1 - 1		Other Than
			Book/Adjusted		Temporary
			Carrying Value (excluding		Impairment Losses
		Actual Cost	interest)	Fair Value	Recognized
	a. Residential mortgage-backed securities	Actual Cost	interesty	Tall value	recognized
	b. Commercial mortgage-backed securities	***************************************		***************************************	
	c. Collateralized debt obligations			•	***************************************
	d. Structured securities				
	e. Equity investment in SCAs *				
	f. Other assets				
	g. Total				
4.	Underwriting exposure to subprime mortgage risk through Mortgage Guara	anty or Financial Guar	anty insurance cover	age.	4
		Losses Paid	Losses Incurred	Case Reserves	IBNR Reserve
		in the Current Year	in the Current Year	at End of Current Period	at End of Current Perio
	a. Mortgage Guaranty Coverage	Culletit Teal	Current rear	Cullett Fellou	Cullent Fello
	b. Financial Guaranty Coverage			•••••	
	c. Other Lines (specify):				
[					
ļ				••••••	
-					
-					
o					
	d. Total				
	d. Total Retained Assets				
			In Fo	As of End o	
02.	Retained Assets	As of End of Number			f Prior Year Balance
02.	Retained Assets a. Up to and including 12 Months		of Current Year	As of End o	
02.	Retained Assets  a. Up to and including 12 Months b. 13 to 24 Months		of Current Year	As of End o	
02.	Retained Assets a. Up to and including 12 Months		of Current Year	As of End o	
02.	Retained Assets  a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months		of Current Year	As of End o	
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months		of Current Year	As of End o	
02.	Retained Assets  a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months		of Current Year	As of End o	
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months		of Current Year	As of End o	
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months	Number	of Current Year Balance	As of End o	Balance
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months	Number	of Current Year	As of End o	
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total	Number	of Current Year Balance	As of End o	Balance
02.	Retained Assets  a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the	Number	of Current Year Balance Balance	As of End o	Balance  bup  Balance/
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year	Number	of Current Year Balance Balance	As of End o	Balance  bup  Balance/
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Number/Balance of Retained Asset Accounts	Number	of Current Year Balance Balance	As of End o	Balance  bup  Balance/
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Number/Balance of Retained Asset Accounts Issued/Added During the Year	Number	of Current Year Balance  ividual Balance/	As of End o	Balance  bup  Balance/
02.	Retained Assets  a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Insuber/Balance of Retained Asset Accounts Issued/Added During the Year c. Investment Earnings Credited to Retained Asset	Number  Ind  Number	of Current Year Balance  ividual Balance/	As of End o Number  Gro Number	Balance  bup  Balance/
02.	Retained Assets  a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Number/Balance of Retained Asset Accounts Issued/Added During the Year c. Investment Earnings Credited to Retained Asset Accounts During the Year	Number	of Current Year Balance  ividual Balance/	As of End o	Balance  bup  Balance/
02.	Retained Assets  a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Insuber/Balance of Retained Asset Accounts Issued/Added During the Year c. Investment Earnings Credited to Retained Asset	Number  Ind  Number	of Current Year Balance  ividual Balance/	As of End o Number  Gro Number	Balance  bup  Balance/
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Number/Balance of Retained Asset Accounts Issued/Added During the Year c. Investment Earnings Credited to Retained Asset Accounts During the Year d. Fees and Other Charges Assessed to Retained	Number  Ind  Number	of Current Year Balance  ividual Balance/	As of End o Number  Gro Number	Balance  bup  Balance/
02.	a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Insuber/Balance of Retained Asset Accounts Issued/Added During the Year c. Investment Earnings Credited to Retained Asset Accounts During the Year d. Fees and Other Charges Assessed to Retained Asset Accounts During the Year e. Number/Monunt of Retained Asset Accounts Transferred to State Unclaimed Property funds During the Year	Number  Ind  Number	of Current Year Balance  ividual Balance/	As of End o Number  Gro Number	Balance  bup  Balance/
02.	Retained Assets  a. Up to and including 12 Months b. 13 to 24 Months c. 25 to 37 Months d. 37 to 48 Months e. 49 to 60 Months f. Over 60 Months g. Total  a. Number/Balance of Retained Asset Accounts at the Beginning of the Year b. Number/Balance of Retained Asset Accounts lsusued/Added During the Year c. Investment Earnings Credited to Retained Asset Accounts During the Year d. Fees and Other Charges Assessed to Retained Asset Accounts During the Year e. Number/Amount of Retained Asset Accounts	Number  Ind  Number	of Current Year Balance  ividual Balance/	As of End o Number  Gro Number	Balance  bup  Balance/

### NOTE 22 - - EVENTS SUBSEQUENT

The Company has two events subsequent to September 30, 2020 that would warrant disclosure in these statutory 2020 financial statements and are listed below.

In December 2019, a novel strain of coronavirus (SARS-CoV-2), which causes COVID-19, was reported to have surfaced in China. In March 2020, the World Health Organization declared the outbreak of COVID-19 to be a pandemic, and the U.S. economy began to experience pronounced effects. On March 16, 2020, in response to the COVID-19 outbreak the American Dental Association recommended dental providers nationwide postpone elective surgeries and remain open only for emergency dental procedures through April 30, 2020. On March 23, 2020, the Governors of the State of Rhode Island and the Commonwealth of Massachusetts issued Stay at Home advisories, requiring that all employees who can work from home do so and also the closure of all non-essential businesses and operations. The extent of the impact of these events and the broader COVID-19 outbreak on our operational and financial performance continues to depend on certain developments, including the duration and spread of the outbreak, impact on our customers, employees and vendors, and performance of our investment portfolio, all of which remain uncertain and unpredictable. Our consolidated investment portfolio which is comprised of bond and equity securities is subject to credit risks related to the underlying issuers of such securities as well as broader interest rate and market risks. At this point, the extent to which COVID-19 may impact our financial condition or results of operations remains uncertain.

In response to the COVID-19 pandemic, the Company has implemented an emergency interest-free Advance Claims Payment Program ("ACPP") that was available to its participating dentists across the Commonwealth of Massachusetts. The Company committed to funding advance claims payments to its participating dentists that have significant claims activity with the Company. The program was designed to provide up to approximately \$800,000 of financial relief to Massachusetts dentists, but only a few MA dentists elected to participate. Altus' commitment to funding advance claims payments to its participating dentists totaled \$27,280.

Given the additional procedures dentists are now required to follow it is Management's belief that claim volumes will be lower than what was forecasted. As a result, the Company instituted a premium credit for its fully insured accounts, equal to 90% of premiums for the month of August which appeared on the September invoices.

The company expensed \$1,089,121 for the full 2020 ACA assessment in the quarter ended March 31, 2020. The company recorded \$1,089,121 as restricted reserves in the December 31, 2019 filing, based on actual 2019 premiums.

# **NOTES TO FINANCIAL STATEMENTS**

#### 22. Events Subsequent Current Year Prior Year A. Did the reporting entity write accident and health insurance premium that subject to Section 9010 of the Federal Affordable Care Act (YES/NO)? YES B. ACA fee assessment payable for the upcoming year \$ C. ACA fee assessment paid 1.096.027 D. Premium written subject to ACA 9010 assessment \$ 50,242,544 71,620,113 Total Adjusted Capital before surplus adjustment (Five-Year Historical L \$ F. Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 14 minus 22B above) 39,050,122 G. Authorized Control Level after surplus adjustment (Five-Year Historical Line 15) 2,515,253 H. Would reporting the ACA assessment as of Dec. 31, 2020 have triggered an RBC action level (YES/NO)? NO

### NOTE 23 - - REINSURANCE

The Company utilizes no reinsurance arrangements in its underwriting of dental premiums. The related note disclosures, specifically including 23B, 23C, 23D(1)a, and 23D(2)a, are all not applicable.

### NOTE 24 - - RETROSPECTIVELY RATED CONTRACTS

The Company presently does not underwrite premiums that are subject to retrospective rating or are contingent premiums (based on actual claims incurred) for the periods ended September 30, 2020 and December 31, 2019. The related note disclosures, specifically including 24D and 24E, are all not applicable.

### NOTE 25 - - CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

Loss Reserves as of December 31, 2019 were \$1,747,320. As of September 30, 2020, \$1,582,722 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$48,174 as a result of re-estimation of unpaid claims and claim adjustment expenses on the dental line of insurance. Therefore, there has been a \$116,424 favorable prior-year development since December 31, 2019 to September 30, 2020. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. Included in this decrease, the Company experienced no unfavorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

### NOTE 26 - - INTERCOMPANY POOLING ARRANGEMENTS

The Company utilizes no intercompany pooling arrangements in its dental premium underwriting.

### NOTE 27 - - STRUCTURED SETTLEMENTS

As documented in the NAIC Annual Statement filing instructions for 2020 and 2019, this footnote is not applicable to health insurance insurers.

### NOTE 28 - - HEALTH CARE RECEIVABLES

The Company has no receivables that would be considered Health Care Receivables under SSAP #84. Accordingly, pharmacy rebates and risk sharing receivables are not currently applicable to the Company's operations.

The company does not have any risk sharing receivables. The related note disclosures are all not applicable.

### NOTE 29 - - PARTICIPATING POLICIES

The Company does not underwrite any business that would result in group accident or health participating policies. Accordingly, policy dividends are not applicable to the Company's operations.

### NOTE 30 - - PREMIUM DEFICIENCY RESERVES

The Company performed an analysis for premium deficiency reserves as of September 30, 2020 and December 31, 2019. This resulted in no additional liability for the current 2020 year as well as 2019. The related note disclosures are all not applicable.

### NOTE 31 - - ANTICIPATED SALVAGE AND SUBROGATION

The Company's liability for unpaid claims is actuarially determined based on an analysis of historical claims experience, modified for changes in enrollment, inflation and benefit coverage. This liability reflects no reductions for salvage and subrogation recoveries, which are recorded in the year of receipt.

## PART 1 – COMMON INTERROGATORIES

### **GENERAL**

1.1	Did the reporting entity experience any material transactions requiring the	filing of Disclosure of Material Trans	sactions	V
	with the State of Domicile, as required by the Model Act?			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?	Yes[X]No[]		
	If yes, complete Schedule Y, Parts 1 and 1A.			
3.2	Have there been any substantial changes in the organizational chart since	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 ground	ip?		Yes[]No[X]
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code is sufficient to the contract of the	ued by the SEC for the entity/group		
4.1	Has the reporting entity been a party to a merger or consolidation during the	?	Yes[]No[X]	
	If yes, complete and file the merger history data file with the NAIC.			
4.2	If yes, provide the name of entity, NAIC Company Code, and state of domi			
	entity that has ceased to exist as a result of the merger or consolidation.			
	entity that has ceased to exist as a result of the merger or consolidation.  1  Name of Entity	2 NAIC Company Code	3 State of Domicile	
	1			
	1 Name of Entity			
	1 Name of Entity	NAIC Company Code		
5.	1 Name of Entity  If the reporting entity is subject to a management agreement, including thir	NAIC Company Code	State of Domicile	
5.	1 Name of Entity	NAIC Company Code	State of Domicile	Yes[]No[]N/A[X]
5.	1 Name of Entity  If the reporting entity is subject to a management agreement, including thir general agent(s), attorney-in-fact, or similar agreement, have there been a	NAIC Company Code	State of Domicile	Yes[]No[]N/A[X]
	If the reporting entity is subject to a management agreement, including thir general agent(s), attorney-in-fact, or similar agreement, have there been a terms of the agreement or principals involved?	NAIC Company Code  d-party administrator(s), managing ny significant changes regarding th	State of Domicile	Yes[]No[]N/A[X] 12/31/2017
6.1	1 Name of Entity  If the reporting entity is subject to a management agreement, including thir 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.	NAIC Company Code  d-party administrator(s), managing ny significant changes regarding the was made or is being made.	State of Domicile	
6.1	If the reporting entity is subject to a management agreement, including thir 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.  State the as of date that the latest financial examination report became avaithe reporting entity. This date should be the date of the examined balance.	NAIC Company Code  d-party administrator(s), managing ny significant changes regarding the was made or is being made.	State of Domicile	12/31/2017
6.1	If the reporting entity is subject to a management agreement, including thir 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.	NAIC Company Code  d-party administrator(s), managing ny significant changes regarding the was made or is being made.	State of Domicile	
6.1	If the reporting entity is subject to a management agreement, including thir 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.  State the as of date that the latest financial examination report became avaithe reporting entity. This date should be the date of the examined balance completed or released.  State as of what date the latest financial examination report became availar	NAIC Company Code  d-party administrator(s), managing ny significant changes regarding the was made or is being made.  ailable from either the state of domine sheet and not the date the report	State of Domicile	12/31/2017
6.1	If the reporting entity is subject to a management agreement, including thir 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.  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.	NAIC Company Code  d-party administrator(s), managing ny significant changes regarding the was made or is being made.  ailable from either the state of domine sheet and not the date the report	State of Domicile	12/31/2017
6.1	If the reporting entity is subject to a management agreement, including thir 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. State the as of date that the latest financial examination report became available the reporting entity. This date should be the date of the examined balance completed or released.  State as of what date the latest financial examination report became available the state of domicile or the reporting entity. This is the release date or connot the date of the examination (balance sheet date).	NAIC Company Code  d-party administrator(s), managing ny significant changes regarding the was made or is being made.  ailable from either the state of domine sheet and not the date the report	State of Domicile	12/31/2017 12/31/2017
6.1	If the reporting entity is subject to a management agreement, including thir 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. State the as of date that the latest financial examination report became avaithe reporting entity. This date should be the date of the examined balance completed or released.  State as of what date the latest financial examination report became availate the state of domicile or the reporting entity. This is the release date or continuous control of the reporting entity. This is the release date or control of the reporting entity.	NAIC Company Code  d-party administrator(s), managing my significant changes regarding the was made or is being made.  ailable from either the state of domine sheet and not the date the report able to other states or the public from mpletion date of the examination results.	State of Domicile	12/31/2017 12/31/2017
6.1	If the reporting entity is subject to a management agreement, including thir 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. State the as of date that the latest financial examination report became avaithe reporting entity. This date should be the date of the examined balance completed or released.  State as of what date the latest financial examination report became availate the state of domicile or the reporting entity. This is the release date or connot the date of the examination (balance sheet date).  By what department or departments?	NAIC Company Code  d-party administrator(s), managing my significant changes regarding the was made or is being made.  ailable from either the state of domine sheet and not the date the report able to other states or the public from mpletion date of the examination results.	State of Domicile	12/31/2017 12/31/2017
6.1 6.2 6.3	If the reporting entity is subject to a management agreement, including thir 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. State the as of date that the latest financial examination report became avaithe reporting entity. This date should be the date of the examined balance completed or released.  State as of what date the latest financial examination report became availate the state of domicile or the reporting entity. This is the release date or connot the date of the examination (balance sheet date).  By what department or departments?	NAIC Company Code  d-party administrator(s), managing ny significant changes regarding the was made or is being made.  ailable from either the state of domite sheet and not the date the report table to other states or the public from mpletion date of the examination research.	e cile or was	12/31/2017 12/31/2017

7.1		eporting entity had any Certificates of Authority, licenses of le) suspended or revoked by any governmental entity dur	, , ,	e registration	,		Yes[]No[X]	
7.2	If yes, give	e full information						
8.1	1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?						Yes[]No[X]	
8.2	If response	e to 8.1 is yes, please identify the name of the bank holdi	ng company.					
ด 3	Is the com	pany affiliated with one or more banks, thrifts or securitie	s firms?				Yes[]No[X]	
0.0	is the com	party animated with one of more parks, tilling of securitie	5 III 1115 :				163[ ]NO[X]	
8.4	If response	e to $8.3$ is yes, please provide below the names and loca	tion (city and state of the main office	ce) of any				
		egulated by a federal regulatory services agency [i.e. the						
		er of the Currency (OCC), the Federal Deposit Insurance on (SEC)] and identify the affiliate's primary federal regula		ities Exchan	ge			
		, , , , , , , , , , , , , , , , , , ,						
		1	2	3	4	5	6	
		Affiliate Name	Location (City, State)	FRB	occ	FDIC	SEC	
		ivaille	(Oity, State)	IND	000	1 DIC	SLC	
	entity; (c) Compli	ir, accurate, timely and understandable disclosure in the ance with applicable governmental laws, rules, and regul compt internal reporting of violations to an appropriate per	ations;		orting			
	(e) Accour	ntability for adherence to the code.					Yes[X]No[]	
.11	If the resp	onse to 9.1 is No, please explain:						
9.2	Has the co							
21	If the reen	ode of ethics for senior managers been amended?					Yes[]No[X]	
'							Yes[]No[X]	
		ode of ethics for senior managers been amended? onse to 9.2 is Yes, provide information related to amendr					Yes[]No[X]	
			ment(s).				Yes[]No[X]	
9.3		onse to 9.2 is Yes, provide information related to amendr	ment(s).				Yes[]No[X] Yes[]No[X]	
	Have any	onse to 9.2 is Yes, provide information related to amendr	ment(s).					
	Have any	onse to 9.2 is Yes, provide information related to amendr	ment(s).					
	Have any	onse to 9.2 is Yes, provide information related to amendr	ment(s).					
	Have any	onse to 9.2 is Yes, provide information related to amendr	ment(s).					
).31	Have any	onse to 9.2 is Yes, provide information related to amendr	ment(s). The specified officers?					
31	Have any If the resp	provisions of the code of ethics been waived for any of the onse to 9.3 is Yes, provide the nature of any waiver(s).	ment(s).  The specified officers?  FINANCIAL  Sidiaries or affiliates on Page 2 of the sidiaries of the sidi				Yes[]No[X]	

## **INVESTMENT**

11.1	Were any of the stocks, bonds, or other assets of the reporting entity lo otherwise made available for use by another person? (Exclude securities)	Yes[]No[X]		
11.2	If yes, give full and complete information relating thereto:			
12.	Amount of real estate and mortgages held in other invested assets in S	\$		
13.	Amount of real estate and mortgages held in short-term investments:			\$
14.1	Does the reporting entity have any investments in parent, subsidiaries a	and affiliates?		Yes[]No[X]
14.2	If yes, please complete the following:	1	2	
		Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value	
	14.21 Bonds	\$	_ \$	
	14.22 Preferred Stock	\$	_ \$	
	14.23 Common Stock	\$	_ \$	
	14.24 Short-Term Investments			
	14.25 Mortgage Loans on Real Estate		_ \$	
	14.26 All Other	\$	_ \$	
	14.27 Total Investment in Parent, Subsidiaries and Affiliates	Φ.	Φ.	
	(Subtotal Lines 14.21 to 14.26)  14.28 Total Investment in Parent included in Lines 14.21 to	•	_ \$	
	14.26 above	\$	\$	
15.1	Has the reporting entity entered into any hedging transactions reported	on Schedule DB?		Yes [ ] No [X]
	If yes, has a comprehensive description of the hedging program been r If no, attach a description with this statement.	nade available to the domicili	ary state?	Yes[]No[]N/A[X]
16.	For the reporting entity's security lending program, state the amount of	the following as of the curren	at statement date:	
	16.1 Total fair value of reinvested collateral assets reported on S	Schedule DI Parts 1 and 2		\$
	16.2 Total book adjusted/carrying value of reinvested collateral a		DL, Parts 1 and 2	\$
	16.3 Total payable for securities lending reported on the liability	page		\$
	Excluding items in Schedule E - Part 3 - Special Deposits, real estate, in physically in the reporting entity's offices, vaults or safety deposit boxes owned throughout the current year held pursuant to a custodial agreem accordance with Section 1, III - General Examination Considerations, Foundation or Safekeeping Agreements of the NAIC Financial Condition	s, were all stocks, bonds and nent with a qualified bank or tr . Outsourcing of Critical Fund	other securities, rust company in	Yes [ X ] No [ ]
17.1	For all agreements that comply with the requirements of the NAIC Fina complete the following:		andbook,	100[V]110[ ]
			0	
	1		2	
	1 Name of Custodian(s)		2 Custodian Address	
	Name of Custodian(s)	ONE CITIZENS PLAZA, PRO	Custodian Address  OVIDENCE, RI 02903	

17.2 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)

17.3 Have there been any chan	iges, including name changes,	in the custodian(s) identi	fied in 17.1 during the currer	nt	
guarter?				Yes	[ ] No [ X ]

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

Ī	1	2	3	4
	Old Custodian	New Custodian	Date of Change	Reason
Ī				
İ				
ł				

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 access to the investment accounts", "...handle securities"]

1	2
Name of Firm or Individual	Affiliation
RICHARD A. FRITZ	1
GEORGE J. BEDARD	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.

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?						
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 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]

- 20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
  - a. The security was purchased prior to January 1, 2018.
  - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
  - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a 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]

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

- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

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

Yes[]No[X]

# PART 2 - HEALTH

1.	Operating Percentages:		
	1.1 A&H loss percent		67.67 %
	1.2 A&H cost containment percent		0.37 %
	1.3 A&H expense percent excluding cost containment expenses		17.51 %
2.1	Do you act as a custodian for health savings accounts?	Yes[]No[X]	
2.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$	
2.3	Do you act as an administrator for health savings accounts?	Yes[]No[X]	
2.4	If yes, please provide the balance of the funds administered as of the reporting date.	\$	
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible, or writing business in at least two states?	Yes[]No[X]	
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other		
	than the state of the reporting entity?	Yes[]No[X]	

# **SCHEDULE S - CEDED REINSURANCE**

Showing All New Reinsurance Treaties - Current Year to Date

1	2	3	4	5	6	7	8	9	10
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
				NONE					
				INUNE					

## SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

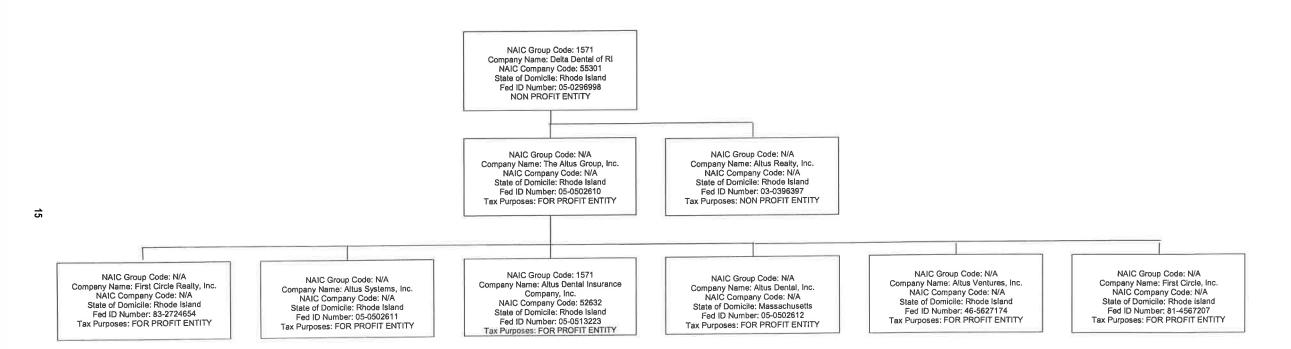
**Current Year To Date - Allocated by States and Territories** 

		Direct Business Only								
		'	2	3	4	5	6	7	8	9
		Active Status	Accident & Health	Medicare	Medicaid	Federal Employees Health Benefits Program	Life & Annuity Premiums & Other	Property / Casualty	Total Columns	Deposit-Type
-	States, Etc.	(a)	Premiums	Title XVIII	Ttle XIX	Premiums	Considerations	Premiums	2 Through 7	Contracts
	AlabamaAL	. N								
	Alaska AK Arizona AZ	N N								
	Arizona AZ Arkansas AR	N								
	California CA	N								
	Colorado CO	N								
	Connecticut CT Delaware DE	N N								
	District of Columbia DC	N N								
	Florida FL	N								
	Georgia GA	N.								
	Hawaii HI Idaho ID	N N								
14.	Illinois IL	N								
	Indiana IN	N								
	Iowa IA Kansas KS	N N								
	Kentucky KY	N .								
19.	Louisiana LA	N								
	Maine ME	. N								
	Maryland MD Massachusetts MA	N L	50,242,544						50,242,544	
	Michigan MI	N								
	Minnesota MN	N								
	Mississippi MS Missouri MO	N N								
	Montana MT	N								
	Nebraska NE	N								
	Nevada NV	N								
	New Hampshire NH New Jersey NJ	N N								
	New Mexico NM	N								
	New York NY	N								
	North Carolina NC	N.								
	North Dakota ND Ohio OH	N N								
	Oklahoma OK	N								
	Oregon OR	N								
	Pennsylvania PA Rhode Island RI	N N								
	South Carolina SC	N N								
	South Dakota SD	N								
	Tennessee TN	N.								
44. 45.	Texas TX Utah UT	N N								
	Vermont VT	N								
	Virginia VA	N								
	Washington WA West Virginia WV	N N								
	Wisconsin WI	N N								
51.	Wyoming WY	N								
	American Samoa AS	. N								
	Guam GU Puerto Rico PR	N N								
	U.S. Virgin Islands VI	N								
56.	Northern Mariana Islands MP	N								
	Canada CAN	N.								
	Aggregate other alien OT Subtotal	XXX	50,242,544						50,242,544	
	Reporting entity contributions		,,•.1						,_,_,	
61	for Employee Benefit Plans	XXX	50,242,544						50 242 544	
01.	Totals (Direct Business)	A A A	50,242,544						50,242,544	<u> </u>
	DETAILS OF WRITE-INS									
58001.		XXX								
58002. 58003.		XXX								
	Summary of remaining write-ins for Line 58	XXX								
	Totals (Lines 58001 through 58003 plus 58998)									
	(Line 58 above)	XXX								

(a)	Active Status Counts

L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG	<u>1</u>
E – Eligible - Reporting entities eligble or approved to write surplus lines in the state	
R - Registered - Non-domiciled RRGs	
Q - Qualified - Qualified or accredited reinsurer	

N – None of the above - Not allowed to write business in the state 56



# **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? (Y/N)	*
		00000	05-0502610				THE ALTUS GROUP, INC.	RI	UDP	DELTA DENTAL OF RHODE ISLAND	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	Y	
		00000	05-0502611				ALTUS SYSTEMS, INC.	RI	NIA	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	N	
1		00000	05-0502612				ALTUS DENTAL, INC.	MA	NIA	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	N	
1		00000	46-5627174				ALTUS VENTURES, INC.	RI	NIA	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	N .	
1571	DELTA DENTAL OF RHODE ISLAND	55301	05-0296998	I		I	DELTA DENTAL OF RHODE ISLAND	RI	UDP	DELTA DENTAL OF RHODE ISLAND	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	N N	1 1
1571	DELTA DENTAL OF RHODE ISLAND	52632	05-0513223			l	ALTUS DENTAL INSURANCE CO., INC.	RI	RE	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	N	
		00000	03-0396397			l	ALTUS REALTY, INC.	RI	NIA	DELTA DENTAL OF RHODE ISLAND	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	N	
		00000	81-4567207			l	FIRST CIRCLE, INC	RI	NIA	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	N	
1	1	00000	83-2724654	]		1	FIRST CIRCLE REALTY, INC	RI	NIA	THE ALTUS GROUP, INC.	BOARD OF DIRECTORS	100.000	DELTA DENTAL OF RHODE ISLAN	N	] [

Γ		
	Asterik	Explanation
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#### 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. Will the Med	licare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
Explanation:		
Question 1:	THE COMPANY DOES NOT TRANSACT THIS TYPE OF BUSINESS.	
Bar Code:		
	52632202036500103	

# **OVERFLOW PAGE FOR WRITE-INS**

## **SCHEDULE A - VERIFICATION**

Real Estate

		1	2 Prior Year
		Year To Date	Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted carrying value		
7.	Deduct amounts received on disposals  Total foreign exchange change in book/adjusted carrying value  Deduct current year's other-than-temporary impairment recognized		
	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 - 7 - 8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

# **SCHEDULE B - VERIFICATION**

Mortgage Loans

		1	2
			Prior Year
		Year To Date	Ended December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.			
7.	Total gain (loss) on disposals  Deduct amounts received on disposals  Deduct amounts received on disposals		
8.	Total gain (loss) on disposals  Deduct amounts received on disposals  Deduct amortization of premium and mortgage interest points and commune of the community		
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

# **SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

		1	2
			Prior Year
		Year To Date	Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	1,118,458	1,583,980
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition	1,178,548	966,000
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		89,482
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals	1,285,006	1,521,004
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)	1,012,000	1,118,458
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	1,012,000	1,118,458

## **SCHEDULE D - VERIFICATION**

**Bonds and Stocks** 

		1	2
			Prior Year
		Year To Date	Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	41,741,948	32,841,545
2.	Cost of bonds and stocks acquired	3,515,310	15,708,505
3.	Accrual of discount	29,986	39,403
4.	Unrealized valuation increase (decrease)	256	20,698
5.	Total gain (loss) on disposals	4,111	1,582
6.	Deduct consideration for bonds and stocks disposed of	4,470,890	6,596,370
7.	Deduct amortization of premium	235,055	300,939
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		27,524
11.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9 + 10)	40,585,666	41,741,948
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	40,585,666	41,741,948

## **SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	1 Book/Adjusted Carrying Value Beginning	2 Acquisitions During Current	3 Dispositions During Current	4 Non-Trading Activity During	5 Book/Adjusted Carrying Value End of	6 Book/Adjusted Carrying Value End of	7 Book/Adjusted Carrying Value End of	8 Book/Adjusted Carrying Value December 31
NAIC Designation	of Current Quarter	Quarter	Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	36,616,362	2,921,514	2,399,940	(50,802)	37,164,199	36,616,362	37,087,134	36,867,612
2. NAIC 2 (a)	4 224 027		816,642	(19,762)	4,254,280	4,334,937	3,498,533	4,374,245
3. NAIC 3 (a)					149,145			500,090
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	40,951,299	2,921,514	3,216,582	(70,564)	41,567,624	40,951,299	40,585,667	41,741,947
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	40,951,299	2,921,514	3,216,582	(70,564)	41,567,624	40,951,299	40,585,667	41,741,947

a)	Book/Adjusted Carrying	Value column for the	end of the current reporting	period includes the following	g amount of short-term and c	ash equivalent bonds by NAI	C designation
	NAIC 1 \$	0: NAIC 2 \$	0: NAIC 3 \$	0 NAIC 4 \$	0. NAIC 5 \$	0: NAIC 6.\$	0

# **SCHEDULE DA - PART 1**

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted	Par	Actual	Interest Collected	Paid for Accrued Interest
	Carrying Value		Cost	Year To Date	Year To Date
9199999		NUNE			

# **SCHEDULE DA - VERIFICATION**

Short-Term Investments

		1	2
			Prior Year
		Year To Date	Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of short-term investments acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		
7.	Deduct consideration received on disposals  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)		
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)		

# **SCHEDULE DB - PART A - VERIFICATION**

Options, Caps, Floors, Collars, Swaps and Forwards

1.	Book/Adjusted Carrying Value, December 31, prior year (Line 10, prior year)	
2.	Cost Paid/(Consideration Received) on additions	
3.	Unrealized Valuation increase/(decrease)	
4.	SSAP No. 108 adjustments	
5.		
_	Total gain (loss) on termination recognized  Considerations received ((soid) on terminations	
6.	Considerations received/(paid) on terminations	
7.	Amortization Adjustment to the Book/Adjusted Carrying Value of hedged item Total foreign exchange change in Book/Adjusted Carrying Value  Total foreign exchange change in Book/Adjusted Carrying Value	
8.	Adjustment to the Book/Adjusted Carrying Value of hedged item	
9.		
10.	Book/Adjusted Carrying Value at End of Current Period (Lines 1 + 2 + 3 + 4 + 5 - 6 + 7 + 8 + 9)	
11.	Deduct nonadmitted assets	
12.	Statement value at end of current period (Line 10 minus Line 11)	
	SCHEDULE DB - PART B - VERIFICATION  Future Contracts	
1.	Book/Adjusted carrying value, December 31 of prior year (Line 6, prior year)	
2.	Cumulative cash change (Section 1, Broker Name/Net Cash Deposits Footnote - Cumulative Cash Change column)	
3.1	Add:	
0.1	Change in variation margin on open contracts - Highly Effective Hedges	
	· · · · · · · · · · · · · · · · · · ·	
	3.12 Section 1, Column 15, prior year	
	Change in variation margin on open contracts - All Other	
	3.13 Section 1, Column 18, current year to date minus	
	3.14 Section 1, Column 18, prior year	
3.2	Add:	
	Change in adjustment to basis of hedged item	
	3.21 Section 1, Column 17, current year to date minus	
	3.22 Section 1, Column 17, prior year	
	Change in amount recognized	
	3.23 Section 1, Column 19, current year to date minus	
	3.24 Section 1, Column 19, prior year	
	3.25 SSAP No. 108 adjustments	
3.3	Subtotal (Line 3.1 minus Line 3.2)	
4.1	Computation registrates margin as terminated contracts during the years	
4.2	Less:	
4.2		
	· · · · · · · · · · · · · · · · · · ·	
	4.22 Amount recognized	
	4.23 SSAP No. 108 adjustments	
4.3	Subtotal (Line 4.1 minus Line 4.2)	
5.	Dispositions gains (losses) on contracts terminated in prior year:	
	5.1 Total gain (loss) recognized for terminations in prior year	
	5.2 Total gain (loss) adjusted into the hedged item(s) for terminations in prior year	
6.	Book/Adjusted carrying value at end of current period (Lines 1 + 2 + 3.3 - 4.3 - 5.1 - 5.2)	
7.	Deduct total nonadmitted amounts	
8.	Statement value at end of current period (Line 6 minus Line 7)	

# **SCHEDULE DB - PART C - SECTION 1**

Replication (Synthetic Asset) Transactions Open as of Current Statement Date

		Replicated (Sy	nthetic Asset) Tr	ransactions						Components of	f the Replication (Sy	nthetic Asset) Transactions			
1	2	3	4	5	6	7	8	Derivative Inst	rument(s) Open			Cash Ins	strument(s) Held		
		NAIC						9	10	11	12	13	14 NAIC	15	16
Number	Description	Designation or Other Description	Notional Amount	Book/Adjusted Carrying Value	Fair Value	Effective Date	Maturity Date	Description	Book/Adjusted Carrying Value	Fair Value	CUSIP	Description	Designation or Other Description	Book/Adjusted Carrying Value	Fair Value
								<u>·</u>	, ,			·			
							<b>.</b>	IONE							
						I									
															I
999999999	Totals					XXX	XXX	XXX			XXX	XXX	XXX		

# SCHEDULE DB - PART C - SECTION 2

Replication (Synthetic Asset) Transactions Open

		First C	Quarter	Second	Quarter	Third (	Quarter	Fourth	Quarter	Year t	o Date
		1 Number of Positions	2 Total Replication (Synthetic Asset) Transactions Statement Value	3  Number of Positions	4 Total Replication (Synthetic Asset) Transactions Statement Value	5 Number of Positions	6 Total Replication (Synthetic Asset) Transactions Statement Value	7 Number of Positions	8 Total Replication (Synthetic Asset) Transactions Statement Value	9 Number of Positions	10 Total Replication (Synthetic Asset) Transactions Statement Value
	oning Inventory Opened or Acquired Transactions Increases in Replication										
4. Less:	(Synthetic Asset) Transactions Statement Value Closed or Disposed of Transactions	xxx		xxx	NO	XXX		xxx		xxx	
	Positions Disposed of for Failing Effectiveness Criteria				NO						
	Decreases in Replication (Synthetic Asset) Transactions Statement Value	XXX		xxx		XXX		XXX		xxx	
7. Endir	ng Inventory										

## **SCHEDULE DB VERIFICATION**

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

Book/Adjusted Carrying Value Check

<ul><li>2.</li><li>3.</li><li>4.</li></ul>	Part A, Section 1, Column 14  Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance  Total (Line 1 plus Line 2)  Part D, Section 1, Column 5	
5.	Part D, Section 1, Column 6	
6.	Part D, Section 1, Column 6  Total (Line 3 minus Line 4 minus Line 5)  NONE  Fair Vi	alue Check
7.	Part A, Section 1, Column 16	
	Part B, Section 1, Column 13	
	Total (Line 7 plus Line 8)	
10.	Part D, Section 1, Column 8	
11.	Part D, Section 1, Column 9	
12.	Total (Line 9 minus Line 10 minus Line 11)	· · · · <u></u>
	Potential F	xposure Check
	Foterillai L	xposure oneck
13.	Part A, Section 1, Column 21	
14.	Part B, Section 1, Column 20	
15.	Part D, Section 1, Column 11	
16.	Total (Line 13 plus Line 14 minus Line 15)	

# **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	530,827	1,939,639
2.		E 40E 46E	16,316,771
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		17,725,583
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)	2,466,060	530,827
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	2,466,060	530,827

## SCHEDULE A - PART 2

Showing All Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Location	-	4	5	6	7	8	9
	2	3					Book/Adjusted	Additional
					Actual Cost		Carrying Value	Investment
			Date		at Time of	Amount of	Less	Made After
Description of Property	City	State	Acquired	Name of Vendor	Acquisition	Encumbrances	Encumbrances	Acquisition
								1
						1		
			1					1
			MAN					
			$\mathbf{N}()\mathbf{N}$					
			14014					
								1
0399999 Totals								

## **SCHEDULE A - PART 3**

Showing All Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract"

1	Location		4	5	6	7	8	Change	in Book/Adjust	ed Carrying Val	ue Less Encum	brances	14	15	16	17	18	19	20
	2	3						9	10	11	12	13							
						Expended for												Gross	
						Additions,	Book/Adjuste		Current Year'				Book/Adjuste		Foreign			Income	
						Permanent	Carrying Valu		Other Than			Total Foreign	Carrying Valu		Exchange	Realized	Total	Earned Less	Taxes,
						Improvement	Less		Temporary	Current Year'	Total Change	Exchange	Less	Amounts	Gain	Gain	Gain	Interest	Repairs and
			Disposal	Name of	Actual	and Changes	Encumbranc (	Current Year'	Impairment	Change in	in B./A.C.V.	Change in	Encumbranc	Received	(Loss) on	(Loss) on	(Loss) on	Incurred on	Expenses
Description of Property	City	Stat	Date	Purchaser	Cost	Encumbranc	Prior Year	Depreciation	Recognized	Encumbranc	(11 - 9 - 10)	B./A.C.V.	on Disposal	During Year	Disposal	Disposal	Disposal	Encumbranc	Incurred
						1													
		* *		1															
		* *		1															
							l · · <u>· · · · · · · · · · · · · · · · ·</u>	<u>.</u>											
		• •																	
		• •																	
		• •																	
		• •																	
		• •																	
0399999 Totals		ш																	

# SCHEDULE B - PART 2

#### Showing All Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter

1 1 '	Location		4	5	6	7	8	9
	2	3			Rate of	Actual Cost	Additional Investment	Value of Land
					1.000	at time	Made After	value of Land
Loan Number	City	State	Loan Type	Date Acquired	Interest	of Acquisition	Acquisitions	and Buildings
		1						
		1		.				
			· · · · · · · · · · · · · · · · · · ·	•   • <del>• • • • • • • • • • • • • • • • •</del>				
				.				
				.				
3399999 Totals				XXX	XXX			

## SCHEDULE B - PART 3

#### Showing All Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter

1	Location		4	5	6	7		Ch	ange in Book Value	e/Recorded Investr	ment		14	15	16	17	18
	2	3				Book Value/	8	9	10	11	12	13	Book Value/				
						Recorded			Current				Recorded				
						Investment			Year's Other				Investment		Foreign		
						Excluding	Unrealized	Current	than	Capitalized	Total	Total Foreign	Excluding		Exchange	Realized	Total
						Accrued	Valuation	Year's	Temporary	Deferred	Change in	Exchange	Accrued		Gain	Gain	Gain
				Date	Disposal	Interest	Increase	(Amortization) /	Impairment	Interest and	Book Value	Change in	Interest		(Loss) on	(Loss) on	(Loss) on
Loan Number	City	State	Loan Type	Acquired	Date	Prior Year	(Decrease)	Accretion	Recognized	Other	(8+9-10+11)	Book Value	on Disposal	Consideration	Disposal	Disposal	Disposal
									N     EE								
									<b>N</b> - <del>-</del>								
059999 Totals	-		1	ı	1												

E 0.2

## **SCHEDULE BA - PART 2**

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	2	Location	5	6	7	8	9	10	11	12	13
		3 4	Name of	NAIC							
CUSIP Ident- ification	Name or Description	City State	Vendor or General Partner	Designation and Administrative Symbol	Date Originally Acquired	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership
				NONE							
				INCINE							
				, <del>-</del> <del></del> <del></del>							
5099999 Totals			'		1	ı					XXX

## **SCHEDULE BA - PART 3**

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

1	2	Location		5	6	7	8		Ch	ange in Book/Adji	usted Carrying Va	alue		15	16	17	18	19	20
		3	4					9	10	11	12	13	14						
							Book/Adjusted		Current Year's	Current Year's			Total	Book/Adjusted					
				Name of			Carrying	Unrealized	(Depreciation)	Other Than	Capitalized	Total	Foreign	Carrying Value		Foreign	Realized	Total	
CUSIP				Purchaser	Date		Value Less	Valuation	or	Temporary	Deferred	Change in	Exchange	Less		Exchange	Gain	Gain	
Ident-	Name			or Nature of	Originally	Disposal	Encumbrances,	Increase	(Amortization)/	Impairment	Interest and	B./A.C.V.	Change in	Encumbrances		Gain (Loss)	(Loss) on	(Loss) on	Investment
ification	or Description	City	State	Disposal	Acquired	Date	Prior Year	(Decrease)	Accretion	Recognized	Other	(9+10-11+12)	B./A.C.V.	on Disposal	Consideration	on Disposal	Disposal	Disposal	Income
								N											
			1																
5099999 Tota	als																		

# SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP	2	3	4	5	6 Number	7	8	9 Paid for	10 NAIC
Ident- ification	Description	Foreign	Date Acquired	Name of Vendor	of Shares of Stock	Actual Cost	Par Value	Accrued Interest and Dividends	Designation and Administrative Symbol
02665W-DN-8	AMERICAN HONDA FINANCE CORP		09/14/2020	Citizens		300,801	300,000.00		
20030N-CS-8	COMCAST CORP		08/14/2020	Citizens		288,765	250,000.00	3,374   1F	. <del></del>
263534-CN-7	E I DU PONT DE NEMOURS AND CO		09/08/2020	Citizens		313,395	300,000.00	1,601 1	
29736R-AE-0	ESTEE LAUDER COMPANIES INC		07/24/2020	Citizens		228,705	220,000.00	2,341 1	E
459200-AM-3	INTERNATIONAL BUSINESS MACHINES CORP		09/22/2020	Citizens		327,665	250,000.00	6,903 1	E
67021C-AK-3	NSTAR ELECTRIC CO		07/17/2020	Citizens		335,331	300,000.00	1,788 1	E
872540-AR-0	TJX COMPANIES INC		09/22/2020	Citizens		559,071	500,000.00	7,729 1	Έ
25468P-DF-0	TWDC ENTERPRISES 18 CORP		08/19/2020	Citizens		279,595	250,000.00	3,369 1F	
91324P-DN-9	UNITEDHEALTH GROUP INC		08/14/2020	Citizens		288,185	250,000.00	1,619   1	E
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)				XXX	2,921,513	2,620,000.00	28,757	XXX
8399997	Subtotal - Bonds - Part 3				XXX	2,921,513	2,620,000	28,757	XXX
8399998	Summary Item from Part 5 for Bonds				XXX	XXX	XXX	XXX	XXX
8399999	Total - Bonds				XXX	2,921,513	2,620,000.00	28,757	XXX
					1				

# SCHEDULE D - PART 4

# Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	1	5	6	7	8	9	10		Change in Boo	ok/Adjusted Ca	rrving Value		16	17	18	19	20	21	22
'	2	"	7	J	"	'	0	, ,	10	11	12	13	14	15	10	''	10	13	20	21	22
		-						1		''	12	1	14	15					David		
		-									1	Current							Bond		-
		0							Prior		1	Year's			Book/				Interest/		
		r			Number				Year		Current	Other	Total	Total	Adjusted	Foreign			Stock		NAIC
		е			of				Book/	Unrealized	Year's	Than	Change	Foreign	Carrying	Exchange	Realized	Total	Dividends	Stated	Designation
CUSIP		i			Shares				Adjusted	Valuation	(Amort-	Temporary	in	Exchange	Value at	Gain	Gain	Gain	Received	Contractua	and
Ident-		g	Disposal	Name of	of	Consid-	Par	Actual	Carrying	Increase/	ization)/	Impairment	B./A.C.V.	Change in	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	Administrative
ification	Description	n	Date	Purchaser	Stock	eration	Value	Cost	Value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
018490-AN-2	ALLERGAN INC		09/15/2020	Maturity @ 100.00		500,000	500,000.00	496,715	499,578		422		422		500,000				16,875	09/15/2020	2FF
02666Q-G7-2	AMERICAN HONDA FINANCE CORP			Maturity @ 100.00		150,000	150,000.00	158,939	150,980		(980)	1	(980)		150,000				5,813	09/21/2020	
03523T-BP-2	ANHEUSER-BUSCH INBEV WORLDWIDE I			Call @ 104.26		69,854	67,000.00	66,011	66,532		110	′	110		66,642		3,211	3,211	1,801	07/15/2022	
36962G-4R-2	GENERAL ELECTRIC CO			Maturity @ 100.00		250,000	250,000.00	268,985	254,439		(4,439)		(4,439)		250,000				10,938	09/16/2020	•
38150A-DB-8	GOLDMAN SACHS GROUP INC			Call @ 100.00		500,000	500,000.00	500,000	500.000		(4,400)	'	(4,400)		500.000				13.125	08/30/2024	
751212-AB-7	RALPH LAUREN CORP			Maturity @ 100.00		1,000,000	1,000,000.00	1,005,968	1,001,102		(1,102)	1	(1,102)		1,000,000				26,250	08/18/2020	
89114Q-5B-0	TORONTO-DOMINION BANK	l c		Call @ 100.00		250,000	250,000.00	250,000	250,000		(1,102)	1	(1,102)		250.000				4,406	08/30/2024	
89114R-3U-8	TORONTO-DOMINION BANK	C		Call @ 100.00		500,000	500,000.00	499,931	499,933		· · · · · · · · · · · · · · · · · · ·		8		499,940		60	60	9,375	10/31/2024	
0011410000	TORONTO DOMINION BANK	١,	0110112020	100.00				755,501			1									10/01/2027	'' <del>-</del>
3899999	Subtotal - Bonds - Industrial and Miscellaneou	ıs (U	naffiliated)		XXX	3,219,854	3,217,000.00	3,246,549	3,222,564		(5,981)		(5,981)		3,216,582		3,271	3,271	88,583	XXX	XXX
8099999	Subtotal - Bonds - SVO Identified Funds				XXX															XXX	XXX
8299999	Subtotal - Bonds - Unaffiliated Bank Loans				XXX															XXX	XXX
8399997	Subtotal - Bonds - Part 4				XXX	3,219,854	3,217,000	3,246,549	3,222,564		(5,981)	)	(5,981)		3,216,582		3,271	3,271	88,583	XXX	XXX
8399998	Summary Item from Part 5 for Bonds				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999	Total - Bonds	_			XXX	3,219,854	3,217,000.00	3,246,549	3,222,564		(5,981)	)	(5,981)		3,216,582		3,271	3,271	88,583	XXX	XXX
											1										
											1										
	1																				
	1					]													l		
											1										
9999999	Totals				1	3,219,854	XXX	3,246,549	3,222,564		(5,981)	)	(5,981)	1	3,216,582	1	3,271	3,271	88,583	XXX	XXX

# SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23
		Description									Cumulative	Current											Hedge
		of Item(s)								Strike Price,	Prior Year(s)	Year Initial						Total					Effectiveness
		Hedged, Used			Exchange,					Rate or	Initial Cost	Cost of		Book/			Unrealized	Foreign		Adjustment		Credit	at Inception
		for Income	Schedule/	Type(s) of	Counterparty		Date of			Index	of Undiscounted	Undiscounted		Adjusted			Valuation	Exchange	Current Year's	to Carrying		Quality of	and at
		Generation or	Exhibit	Risk(s)	or Central		Maturity or	Number of	Notional	Received	Premium	Premium	Current	Carrying			Increase/	Change in	(Amortization)/	Value of	Potential	Reference	Quarter-end
	Description	Replicated	Identifier	(a)	Clearinghouse	Trade Date	Expiration	Contracts	Amount	(Paid)	(Received)	(Received)	Year Income	Value	Code	Fair Value	(Decrease)	B./A.C.V.	Accretion	Hedged Item	Exposure	Entity	(b)
											Paid	Paid											
1																							
1																							
1																							
1759	9999999 Total						XXX	XXX	XXX	XXX					XXX							XXX	XXX

Code	Description of Hedged Risk(s)
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	INVINL
	.
	<u></u>

Code	Financial or Economic Impact of the Hedge at the End of the Reporting Period
	NONE

# **SCHEDULE DB - PART B - SECTION 1**

Future Contracts Open as of the Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Hig	ghly Effective He	dges	18	19	20	21	22
														15	16	17					
				Description					1					Ī		Change in		Change in			
				of Item(s)					1					Ī		Variation		Variation		Hedge	
				Hedged,			1		1					Ī		Margin	Cumulative	Margin		Effectiveness	
				Used for			l I						Book/	I		Gain (Loss)	Variation	Gain (Loss)		at Inception	
				Income	Schedule/	Type(s) of	Date of		1				Adjusted	Cumulative	Deferred	Used to	Margin for	Recognized		and at	Value of
Ticker	Number of	Notional		Generation or	Exhibit	Risk(s)	Maturity or		1	Transaction	Reporting	Fair	Carrying	Variation	Variation	Adjust Basis	All Other	in Current	Potential	Quarter-end	One (1)
Symbol	Contracts	Amount	Description	Replicated	Identifier	(a)	Expiration	Exchange	Trade Date	Price	Date Price	Value	Value	Margin	Margin	of Hedged Item	Hedges	Year	Exposure	(b)	Point
1759999999 Total				-		XXX	XXX	XXX	(A)	X X	XXX									XXX	XXX

Γ											Broke	r Name												Begin	ning Ca	sh				Cumul	ative Ca	ash				Endir	ng Cash		
																								Ba	alance					С	nange					Bal	lance		
-						 	 	 	 	 			 	 	 	 	 	 						 			 	 .	 	 			 	 	 	 		 	 
-						 	 	 	 	 			 	 	 	 	 	 		\		N N	<b>\</b>	 			 	 .	 	 			 	 	 	 		 	 
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ä lī	otal N	et Cas	sh De	eposit	s																																		$\neg$

Code	Description of Hedged Risk(s)
	······································
	······································
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	Co	de																		F	inan	icial	or Ed	cono	mic l	npac	t of t	he H	ledg	e at	the E	End o	of the	e Rep	portir	ng Pe	eriod																
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2. Net after right of offset per SSAP No. 64

# **SCHEDULE DB - PART D - SECTION 1**

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

	1	2	3	4	Boo	k/Adjusted Carrying Valu	е		Fair Value		11	12
	Description of Exchange, Counterparty or Central	Master Agreement	Credit Support Annex	Fair Value of Acceptable	5 Contracts With Book/ Adjusted Carrying	6 Contracts With Book/ Adjusted Carrying	7  Exposure net	8 Contracts With Fair	9 Contracts With Fair	10 Exposure Net	Potential	Off-Balance Sheet
	Clearinghouse	(Y or N)	(Y or N)	Collateral	Value >0	Value <0	of Collateral	Value >0	Value <0	of Collateral	Exposure	Exposure
									1			
									1			
					NO							
					· · · · ·   <b>\</b>	M —						
		L	L		-				1			
0999999999 Gross Totals	S					1						

029999999 Total Collateral Pledged to Reporting Entity

# SCHEDULE DB - PART D - SECTION 2

	(	Collateral for Derive	ative Instruments Open as of Curren	t Statement Date				
Collateral Pledged by Reporting Entity	2	3	4	5	6	7	8	9
ı	2	3	4	5	O	,	0	9
Exchange, Counterparty or Central Clearinghouse	Type of Asset Pledged	CUSIP Identification	Description	Fair Value	Par Value	Book / Adjusted Carrying Value	Maturity Date	Type of Margin (I, V or IV)
			NONE					
			NONE					
20000000 T.L.O.    L.O.    L.O	<u> </u>							
99999999 Total Collateral Pledged by Reporting Entity			<u> </u>				XXX	XXX
llateral Pledged to Reporting Entity	T	1 2		- 1			8	
1	2	3	4	5	6	7	l X	9
	+							
Exchange, Counterparty or Central Clearinghouse	Type of Asset Pledged	CUSIP Identification	Description	Fair Value	Par Value	Book / Adjusted Carrying Value	Maturity Date	Type of Margin (I, V or IV)
Counterparty or Central	Type of Asset Pledged		Description	Fair Value	Par Value	Book / Adjusted Carrying Value		Type of Margin (I, V or IV)
Counterparty or Central Clearinghouse	Type of Asset Pledged		Description	Fair Value	Par Value	Book / Adjusted Carrying Value		Type of Margin (I, V or IV)
Counterparty or Central Clearinghouse	Type of Asset Pledged		Description	Fair Value	Par Value	Book / Adjusted Carrying Value		Type of Margin (I, V or IV)
Counterparty or Central Clearinghouse	Type of Asset Pledged		Description	Fair Value	Par Value	Book / Adjusted Carrying Value		Type of Margin (I, V or IV)
Counterparty or Central Clearinghouse	Type of Asset Pledged			Fair Value	Par Value	Book / Adjusted Carrying Value		Type of Margin (I, V or IV)
Counterparty or Central Clearinghouse	Type of Asset Pledged	Identification		Fair Value	Par Value	Book / Adjusted Carrying Value		Type of Margin (I, V or IV)
Counterparty or Central Clearinghouse	Type of Asset Pledged	Identification		Fair Value	Par Value	Book / Adjusted Carrying Value		Type of Margir (I, V or IV)
Counterparty or Central Clearinghouse	Type of Asset Pledged	Identification	Description	Fair Value	Par Value	Book / Adjusted Carrying Value		Type of Margir (I, V or IV)
Counterparty or Central	Type of Asset Pledged	Identification		Fair Value	Par Value	Book / Adjusted Carrying Value		(I, V or IV)
Counterparty or Central Clearinghouse	Type of Asset Pledged	Identification		Fair Value	Par Value	Book / Adjusted Carrying Value		(I, V or IV)

XXX

XXX

XXX

## **SCHEDULE DB - PART E**

Derivatives Hedging Variable Annuity Guarantees as of Current Statement Date

This schedule is specific for the derivatives and the hedging programs captured in SSAP No. 108

	CDHS				Hedged		1			•			Hedgir	ng Instruments				1
1 Identifier	2 Description	Prior Fair Value in Full Contract Cash Flows Attributed to Interest Rate	Contract Cash Flows Attributed to	5 Fair Value Gains (Loss) in Full Contract Cash Flows Attributed to Interest Rates (4-3)	6 Fair Value Gain (Loss) in Hedged Item Attributed to Hedged Risk	7 Current Year Increase (Decrease) in VM-21 Liability	Current Year Increase (Decrease) in VM-21 Liability Attributed to Interest Rates	9 Change in the Hedged Item Attributed to Hedged Risk Percentage (6/5)	10 Current Year Increase (Decrease) in VM-21 Liability Attributed to Hedged Risk (8*9)	Prior Deferred Balance	Current Year Fair Value Fluctuation of the Hedge Instruments	Current Year Natural Offse to VM-21 Liability	14 Hedging Instruments' Current Fair Value	Hedge Gain (Loss) in Current Year Deffered Adjustment [12-(13+14)]	Current Year Prescribed Deferred Amortization	Current Year Additional Deferred Amortization	Current Year Total Deferred Amortization (16+17)	Ending Deferred Balance (11+15+18)
								DNE										
Total								XXX										

## **SCHEDULE DL - PART 1**

#### **SECURITIES LENDING COLLATERAL ASSETS**

Reinvested Collateral Assets Owned Current Statement Date (Securities lending collateral assets reported in aggregate on Line 10 of the Assets page and not included on Schedules A, B, BA, D DB and E)

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation and Administrative Symbol	Fair Value	Book / Adjusted Carrying Value	Maturity Dates
	NO	NE				
9999999 Tota	lis					XXX

General Interrogatories:					
Total activity for the year to date	Fair Value \$	0	Book/Adjusted	d Carrying Value \$	0
2. Average balance for the year to date	Fair Value \$			d Carrying Value \$	
3. Reinvested securities lending collateral as	ssets book/adjusted carrying value	included in this schedule I	by NAIC designation:		
NAIC 1 \$ 0;	NAIC 2 \$ 0; NAIC	3 \$0; NAIC	4 \$ 0; NAIC 5 \$	0; NAIC 6 \$	0.

## **SCHEDULE DL - PART 2**

#### **SECURITIES LENDING COLLATERAL ASSETS**

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets included on Schedule A, B, BA, D, DB and E and not reported in aggregate on Line 10 of the Assets page)

1	2 3 4 5 6									
'					Ů	7				
CUSIP			NAIC Designation and Administraive Symbol	Fair	Book / Adjusted Carrying	Maturity				
Identification	Description	Code		Value	Value	Dates				
			[ <u>.</u> <u></u>							
		NC	NE							
9999999 Totals						XXX				

General Interrogatories:
1. Total activity for the year to date
2. Average balance for the year to date

Fair Value \$ 0 Fair Value \$ 0

Book/Adjusted Carrying Value \$ 0
Book/Adjusted Carrying Value \$ 0

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

#### Month End Depository Balances

1		2	3 4 Amount of	4 Amount of	5 Amount of	Book Balance at End of Each Month During Current Quarter			
			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								
CITIZENS	BANK 18615368 CONTROL PROVIDENCE RI 02903 BANK 19425988 OPERATIVE PROVIDENCE RI 02903 BANK 99000695 CLAIMS PROVIDENCE RI 02903					15,936,094 (12,884) (3,483,975)	15,411,192 (242,253) (3,427,348)	10,608,995 (258,156) (3,251,117)	
	Deposits in ( 0) depositories that do not exceed the allowable limit in any one depository (see Instructions) - Open Depositories	XXX	XXX						XXX
0199999	Total - Open Depositories Suspended Depositories	XXX	XXX			12,439,235	11,741,591	7,099,722	XXX
	Deposits in (	XXX	XXX XXX						XXX
0399999	Total Cash on Deposit	XXX	XXX			12,439,235	11,741,591	7,099,722	XXX
0499999	Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999	Total	XXX	XXX			12,439,235	11,741,591	7,099,722	XXX

# 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
	RBS CITIZENS NA CASH SWEEP		09/30/2020	0.100		2,466,060		3,693
8699999 All Other Money	699999 All Other Money Market Mutual Funds							3,693
			l					
			1					
899999 Total Cash Equiv	1		L			2,466,060		3,69