

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023 OF THE CONDITION AND AFFAIRS OF THE

NAIC Grou			SURANCE COI		
	(Current)	(Prior)			
Organized under the Laws of Country of Domicile	F		, State of Domicile or Port of Er States of America	ntry <u>RI</u>	
	04/44/4044			01/01/1010	
Incorporated/Organized	04/14/1941		Commenced Business	01/01/1942	
Statutory Home Office	270 Central A			Johnston, RI, US 02919-4923	
	(Street and N	umber)	(City of	Town, State, Country and Zip Code)	
Main Administrative Office			Central Avenue et and Number)		
Johns	ston, RI, US 02919-4923	(506	,	401-275-3000	
(City or Town	n, State, Country and Zip	Code)	A)	rea Code) (Telephone Number)	
Mail Address	270 Central Avenue, P.O.	Box 7500	3	Johnston, RI, US 02919-4923	
	(Street and Number or P	P.O. Box)	(City or	Town, State, Country and Zip Code)	
Primary Location of Books and Rec	ords	270	Central Avenue		
		(Stree	et and Number)		
	ston, RI, US 02919-4923 n, State, Country and Zip (Code)	,(A	401-275-3000 vrea Code) (Telephone Number)	
		,			
Internet Website Address		WWW	v.fmglobal.com		
Statutory Statement Contact	Micha	ael Gariglio	,	401-415-1892	
micha	el.gariglio@fmglobal.com	(Name)		(Area Code) (Telephone Number) 401-946-8306	
micha	(E-mail Address)		,	(FAX Number)	
President & CEO Senior Vice President &		ig Roberts	Staff Senior Vice President & Controller		
Secretary	Jonathan Irvir	ng Mishara	Vice President & Treasurer	Denise Anastasia Hebert	
Bret Nils Ahnell, Chief O Deanna Ruth Fidler, Execut George John Plesce, Execu	ive Vice President	Chief	OTHER Senior Executive Vice President & Financial Officer oway, Executive Vice President	Sanjay Chawla, Executive Vice President Randall Edward Hodge, Executive Vice President	
_				laba Anderson Luko Ir	
Frank Thomas (Gracia Catherine			nas Alan Lawson ne Mary McCarthy	John Anderson Luke Jr Michel Giannuzzi	
Glenn Rodney L Malcolm Craig F			I Thomas Walton s James Quinlan III	Colin Day	
Malcolm Craig F Christine Kocot N				Frank John Dellaquila	
	hode Island Providence	SS			
all of the herein described assets statement, together with related ext condition and affairs of the said rep in accordance with the NAIC Annu rules or regulations require different respectively. Furthermore, the sco	were the absolute propert nibits, schedules and expla- orting entity as of the repo- al Statement Instructions ences in reporting not re pe of this attestation by the	ty of the said reporting anations therein contain orting period stated abov and Accounting Practic elated to accounting pr he described officers als	entity, free and clear from any liens led, annexed or referred to, is a full a ve, and of its income and deductions es and Procedures manual except t actices and procedures, according so includes the related correspondir	orting entity, and that on the reporting period stated s or claims thereon, except as herein stated, and ind true statement of all the assets and liabilities ar therefrom for the period ended, and have been co o the extent that: (1) state law may differ; or, (2) th to the best of their information, knowledge and g electronic filing with the NAIC, when required, the be requested by various regulators in lieu of or in	that this nd of the mpleted nat state d belief, nat is an

Malcolm Craig Roberts President & CEO Frederick Joseph von Mering # Staff Senior Vice President & Controller Jonathan Irving Mishara Senior Vice President & Secretary a. Is this an original filing? Yes[X]No[] b. If no,

February 2024

23 day of

Subscribed and sworn to before me this

State the amendment number......
 Date filed

3. Number of pages attached.....

Guilia C. Garcia Notary Public May 27, 2026

	ASSEIS						
	-	1	Current Year 2	3	Prior Year 4		
		Assets	- Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets		
1.	Bonds (Schedule D)						
	Stocks (Schedule D):				,,		
	2.1 Preferred stocks		0				
	2.2 Common stocks			0			
3.	Mortgage loans on real estate (Schedule B):						
	3.1 First liens	0	0	0	0		
	3.2 Other than first liens		0		0		
4.	Real estate (Schedule A):						
	4.1 Properties occupied by the company (less \$0						
	encumbrances)	0	0	0	0		
	4.2 Properties held for the production of income (less						
	\$0 encumbrances)	0	0	0	0		
	4.3 Properties held for sale (less \$0 encumbrances)	0	0	0	0		
5.	Cash (\$				······································		
5.	(\$						
	investments (\$	68 805 071	0	68 805 071	40 163 473		
6.	Contract loans (including \$0 premium notes)						
7.	Derivatives (Schedule DB)				0		
8.	Other invested assets (Schedule BA)				0		
9.	Receivable for securities				0		
10.	Securities lending reinvested collateral assets (Schedule DL)						
11.	Aggregate write-ins for invested assets						
12.	Subtotals, cash and invested assets (Lines 1 to 11)						
	Title plants less \$0 charged off (for Title insurers	,, -		,,	, ,		
-	only)	0	0	0	0		
14.	Investment income due and accrued						
15.	Premiums and considerations:						
	15.1 Uncollected premiums and agents' balances in the course of collection.	0	0	0			
	15.2 Deferred premiums, agents' balances and installments booked but						
	deferred and not yet due (including \$0						
	earned but unbilled premiums)	0	0	0	0		
	15.3 Accrued retrospective premiums (\$0) and						
	contracts subject to redetermination (\$0)	0	0	0	0		
16.	Reinsurance:						
	16.1 Amounts recoverable from reinsurers	17 , 135 , 472	0	17, 135, 472			
	16.2 Funds held by or deposited with reinsured companies	0	0	0	0		
	16.3 Other amounts receivable under reinsurance contracts	0	0	0.	0		
17.	Amounts receivable relating to uninsured plans			0	0		
18.1	Current federal and foreign income tax recoverable and interest thereon	0	0	0.	0		
18.2	Net deferred tax asset	411,538	391,669				
19.	Guaranty funds receivable or on deposit			0	0		
20.	Electronic data processing equipment and software	0	0	0	0		
21.	Furniture and equipment, including health care delivery assets						
	(\$0)			0	0		
22.	Net adjustment in assets and liabilities due to foreign exchange rates				0		
23.	Receivables from parent, subsidiaries and affiliates						
24.	Health care ($\qquad 0 \)$ and other amounts receivable $ \$			0			
25.	Aggregate write-ins for other than invested assets	0	0	0	0		
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)						
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts		0		0		
28.	Total (Lines 26 and 27)	380,930,507	391,669	380,538,838	349,515,219		
	DETAILS OF WRITE-INS						
1101.							
1102.				······ .			
1103.				-			
1198.	Summary of remaining write-ins for Line 11 from overflow page			0	0		
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0		
2501.							
2502.							
2503.							
2598.	Summary of remaining write-ins for Line 25 from overflow page				0		
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	0	0	0		

ASSETS

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Year	2 Prior Year
1.	Losses (Part 2A, Line 35, Column 8)		
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)	9,851,852	10,906,457
4.	Commissions payable, contingent commissions and other similar charges	0	0
5.	Other expenses (excluding taxes, licenses and fees)	0	0
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$		5,443,363
7.2	Net deferred tax liability	0	0
8.	Borrowed money \$0 and interest thereon \$0	0	0
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of		
	\$0 and including warranty reserves of \$0 and accrued accident and		
	health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health		
	Service Act)		0
10.	Advance premium	0	0
11.	Dividends declared and unpaid:		_
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		
20.	Derivatives Payable for securities		
21.	Payable for securities		
22.	Liability for amounts held under uninsured plans		
23. 24.	Capital notes \$0 and interest thereon \$0		0
24.	Aggregate write-ins for liabilities	1,000	0
20. 26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
20.	Protected cell liabilities	0	0,000,000
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds		0
30.	Common capital stock		
31.	Preferred capital stock		0
32.	Aggregate write-ins for other than special surplus funds		0
33.	Surplus notes		
34.	Gross paid in and contributed surplus		
35.	Unassigned funds (surplus)		
36.	Less treasury stock, at cost:	, -, -	, , -
	36.10 shares common (value included in Line 30 \$0)	0	0
	36.20 shares preferred (value included in Line 31 \$	0	0
37.	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	271, 192, 317	253,577,366
38.	TOTALS (Page 2, Line 28, Col. 3)	380, 538, 838	349,515,219
	DETAILS OF WRITE-INS		
2501.	Miscellaneous Accounts Payable		0
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	1,000	0
2901.			
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0
2999.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0
3201.			
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page	0	0
	Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)	0	0

STATEMENT OF INCOME

UNDERVISITIVE INCOME Status Status Status Status 1 Permutes series (Part 1, Uni - 55, Column 7) 22, 681 - 29 29, 72, 83 20, 281 - 29 29, 72, 83 20, 281 - 29 29, 72, 83 20, 281 - 29 29, 72, 83 20, 281 - 29 29, 72, 83 20, 281 - 29 29, 72, 83 20, 281 - 29 29, 72, 83 20, 27, 72 29, 72, 83 20, 70, 72 29, 72, 83 20, 70, 72 29, 72, 83 20, 70, 72 29, 70, 70 0			1 Current Year	2 Prior Year
DEDUCTIONS: DEDUCTIONS: Set 91.201 Set 91.201 1 Loss incurso (Par 2, Line 35, Courts 1) 1.107,444 2.88,15 1 Loss incurso (Par 2, Line 35, Courts 1) 1.07,444 2.89,15 1 Line and pattern segments manuel (Par 1, Line 26, Courts 1) 4.017 7.77,20 6.00 1 Charl and method pattern line (Par 1, Line 27, Courts 1) 4.03,300 1.107,70 6.00,300 1 The incurso protecter cols 0 0 0 0 1 Hermin and protecter cols 0 0 0 0 1 Hermin and protecter cols 0 0 0 0 1 Hermin and protecter cols 0 0 0 0 1 Hermin and protecter cols 0 0 0 0 0 1 Hermin and protecter cols 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
2 Des sequence foreit 2 Les 2 Colum 7) 12 (81) 277 32 (81)	1.			104,754,212
4. Out valewaling spense is normed (Parl 3, Line 2, Column 2) 11, 27, 19, 30 27, 19, 30 6. Total underwaling dedications (Lines 2 through 0, 0) 42, 207, 72 82, 80, 00 7. Net Income Operated sells 0 0 8. Net Income Operated sells 0 0 9. Net Income Operated sells 0 0 0 8, 80, 00 27, 73, 75 9. Net Income Operated sells 0 0, 64, 73, 85 6, 62, 95 6, 62, 95 6, 62, 95 6, 62, 95, 95 9. Net Insettion and (Lines 5 + 10) 0 0 0 12, 72, 611 12, 72, 611 12, 72, 611 12, 72, 611 12, 72, 613, 72 12, 72, 613, 72 12	2.		22,681,297	
6 Apgrages which for unknowing sociations 0	3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		2,688,115
0. Teal underwaring dedications (Lines 2 through 9) 42,007,32 82,206,40 0. Net number of protected cells. 0 0 0. Net number of protected cells. 0 27,78,78 VEX.STRATE MICOME 9,48,955 6,67,035 0. Net needscore capital parts bases because capital parts to one 19, 0 0,67,037 (227,611 0. Net needscore capital parts bases or targe of canual recovered 8 0,0,0,0,00 (227,611 1. Net needscore capital parts bases or targe of canual recovered 8 0,0,0,0,0 0 2. Net parts capital parts bases or targe of canual recovered 8 0,0,0,0 0 3. Ormani changes of targe of tar	4.			
7. Net increme of protected cells 0	5.			0
8. Net undowning gan (pasi) (line 1 minus (line 5 pix (line 7) 9, 83, 80 21, 83, 76 9. Net medication (conse) (sec. copile) gains tosi of 8	6.			
INVESTMENT INCOME 9, 483,575 6, 6, 20,357 10 Net investment ophili gam (sears) lies rapidal gains tax of \$				
9 Not intersection increases	8.		16,393,380	
10. Net matched capital gains (bases) jues capital gains tas of \$	•		0,400,075	0 457 000
General (Lanson) (3.000,000) (227.81) 11. Net mesternet gan (dots) (Lone 9 + 10) 6.474,800 6.219,502 12. Net gan (dots) ton agents' or premum balance charges of (amout recoved)				6,457,033
In Intervestment gain (dost) (Lines 9 + 10) 0.110000000000000000000000000000000000	10.		(2,006,070)	(227,401)
Unteresting Other income Image 1 Net gain (box) from agents or presenting biology of (§	11			
12 Net pain (box) form appet of or premium balances charged of f (amputer recovered 0 0 0 13 France and service theorem charged of f (amputer) 0 0 0 14 Aggregate write-ins for miscellances income 0 0 0 0 15 Total other income (Lines 12 prolotions to policyholders, after capital gains tax and before all other federal and foreign income taxes 2, 88, 195 28, 013, 84 16 Net income share diversite policyholders, after capital gains tax and before all other federal and foreign income taxes 0 0 0 17 Net income (and to foreign income taxes income 2, 88, 195 22, 195, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 185, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 22, 175, 88 <			0,474,805	0,219,342
5 0. amount charge off 5 0. 0 0 14 Provision and service charges multicledia in pretrinuits 0 0 0 15 Tradit other income (line 12 through 14) 0 0 0 0 16 Table other income (line 12 through 14) 0 0 0 0 17 Divisions's to policyholders, after capital gains tax and before all other federal and foreign income bases 22, 86, 95 28, 017, 284 17 Divisions's to policyholders, after capital gains tax and before all other federal and foreign income bases 22, 86, 95 28, 017, 284 17 Provisions's to policyholders, after capital gains tax and before all other federal and foreign income bases 28, 882, 95 28, 017, 284 18 Income (line 17)	12.			
13. France and service drogs not included in premiums 0 0 14. Aggregate writens for insciences income 0 0 0 15. Todal dimer income (lines 12 mmogh 14) 0 0 0 16. Not income income (lines 12 mmogh 14) 0 0 0 0 17. Dividents for privates to policyholders, after captial gains tax and before all other federal and foreign income taxes (lines 6 mmos lines 16 mmos l				0
14 Aggregate which is for misoilaneous income. 0 0 0 15 Total other misoilaneous (Loss 12 kmogh 14) 0 0 0 16 Nat horms before dividers 16 policy/biders, after capital gains tax and before all other federal and foreign income taxes 22, 88, 85 28, 013, 24 17 Dividends to policy/biders, after capital gains tax and before all other federal and foreign income taxes incured 22, 88, 85 28, 013, 24 18 Pereteral and foreign income taxes incured 28, 17, 34 28, 185 28, 013, 24 19 Federal and foreign income taxes incured 28, 17, 48, 98 22, 186, 86 28, 013, 24 21 Surplus as regards policy/biders, Docember 31 prior year (Page 4, Line 30, Column 2) 25, 17, 48, 98 22, 185, 86 22 Totang in net unrealized congrega capital gains to x 6 \$.6 0 0 26 Change in net unrealized congrega capital gains (coss) .6 .6 .6 23 Change in net unrealized congrega capital gains (coss) .6 .6 .6 26 Change in provision for reinserance (Page 3, Line 16, Column 2 misus Column 1) .1 .6 .6	13.	-		
16. Nucleome before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines #1 +1 = 15) 22,88,185 22,013,28 17. Dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes includends to policyholders, after capital gains tax and before all other federal and foreign income taxes includends to policyholders, after capital gains tax and before all other federal and foreign income taxes includends to policyholders, after capital gains tax and before all other federal and foreign income taxes includends to policyholders, policyholders, after capital gains tax and before all other federal and foreign income taxes includends to policyholders, after capital gains tax and before all other federal and foreign income taxes includends to policyholders, after capital gains (rigge 4, Line 3), cluture 1 21. Surplus as regards policyholders, policy basis, the asy (cluture 2) 17,480,983 22,123,69 22. Taxis, for the new construction of the asy collution and the asset. (Inter 3) 0 0 22. Change in nordamitted assets (binder Metaarance (Page 4, Line 3), cluture 1) 14,600 0 23. Change in nordamitted assets (binder Metaarance (Page 3, Line 28, Cal, 3) 22,253 1,535 23. Change in nordamitted assets (binder Metaarance (Page 3, Line 28, Cal, 3) 22,253 1,535 24. Change in nordamitted assets (binder Metaarance (Page 3, Line 28, Cal, 3) 0 0 0 24. Change in nordamitted assets (binder M	14.		0	
(Lines 6 + 11 + 16) 22, 868, 85 22, 012, 84 10 Dividents to policyholders, after capital gains tax and before all other fiederal and foreign income taxes 22, 868, 85 28, 013, 24 10 Federal and foreign income taxes incurred 5, 387, 247 5, 588, 737 56 22, 128, 59 0 Nume income (then 5 finitus Line 17) 10 for by tains Line 170, 200, 200, 200, 200, 200, 200, 200, 2	15.		0	0
(Lines 6 + 11 + 16) 22, 868, 85 22, 012, 84 10 Dividents to policyholders, after capital gains tax and before all other fiederal and foreign income taxes 22, 868, 85 28, 013, 24 10 Federal and foreign income taxes incurred 5, 387, 247 5, 588, 737 56 22, 128, 59 0 Nume income (then 5 finitus Line 17) 10 for by tains Line 170, 200, 200, 200, 200, 200, 200, 200, 2	16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes		
16. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes 22, 826, 185 22, 807, 185 19. Federal and foreign income taxes incurred. 5, 397, 247 5, 884, 715 20. Net income (Line 18 minus Line 19)(to Line 22) 17, 480, 930 22, 128, 580 21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 35, Column 2) 17, 480, 930 22, 128, 580 23. Net transfers (to) from Line 20) 17, 480, 930 22, 128, 580 24. Change in net unrealized colligation of (nosse) less capital gains tax of \$ 25, 465 95, 786 (68, 255) 26. Change in net unrealized colligation of (nosse) less capital gains tax of \$ 25, 465 95, 786 (68, 255) 26. Change in net unrealized colligation of (nosse) less capital gain (noss) 0		(Lines 8 + 11 + 15)		
(Line 16 minus Line 17) 22.888,185 28.013,284 9 Federal and foregin income taxes incurred. 5.887,175 5.887,175 20 Net income (Line 18 minus Line 19)(to Line 22) 17,480,938 22,128,586 21 Surplus as regards policyholders, December 31 por year (Page 4, Line 39, Column 2) 25,577,366 22,128,583 22 Net income (from Line 20)	17.		0	0
19. Federal and foreign income taxes incurred 5.387.247 5.882.75 20. Net income (Line 18 minus Line 19)(to Line 22) 17,469,303 22.128.690 21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 30, Column 2) 17,469,303 221,256,80 22. Net income (Irom Line 20) 17,469,303 221,256,80 23. Att ransfers (to) from Diroccled Cell accounts 0 20 24. Change in net unrealized objeans or (tosses) less capital gains tix of \$ 25,465 95,756 (60,255) 25. Change in net unrealized objeans or (tosses) less capital gain (toss) 22,253 .1,565 26. Change in provision for reinsurance (Page 3, Line 46, Col. 3) 22,253 .1,565 20. Change in provision for reinsurance (Page 3, Line 46, Col. 3) .2,263 .0 0 21. Carunalities effect of changes in accounting principles 0	18.		22 868 185	28 013 284
20. Net income (Line 18 minus Line 19)(to Line 22) 17,480,383 22,128,589 CAPTLA LAND SURPLUS ACCOUNT 253,577,366 231,548,382 21. Surplus as regards policyholders, Docember 31 prior year (Page 4, Line 30, Column 2) 17,480,383 22,128,568 22. Net income (from Line 20) 17,480,383 22,128,568 0,0 0 24. Change in net unealized copilal gains or (Josses) less capital gains tax of \$ 25,455 95,796 (800,285) 25. Change in net unealized copilal gains or (Josses) less capital gain (tess) 0 0 0 0 26. Change in net unealized copilal gains or (Josses) less capital gain (tess) 0,0 0<	19			
CAPITAL AND SURPLUS ACCOUNT 253, 577, 56 231, 544, 342 21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 33, Column 2) 253, 577, 56 231, 544, 342 23. Net transfers (b) from Protected Cell accounts 0 0 0 24. Change in net unrealized acid gains or (ossel) less capital gains (oss) 0 0 0 0 25. Change in net unrealized oreign exchange capital gain (loss) 0			, , ,	
21. Surplus as regards policyholders, Dacember 31 prior year (Page 4, Line 30, Column 2)	_0.		11,100,000	22,120,000
22 Net income from lune 20) 17.480.938 22.128.56 23 Net transfers (to) from Protected Cell acounts 0 0 0 24 Change in net unrealized capital gains or (tosses) less capital gains tax of \$ 55.6 65.76 66.76 25 Change in net unrealized foreign exchange capital gain (tax of \$ 56.46 0 0 0 26 Change in net unrealized foreign exchange capital gain (tax of \$ 5.64 (11.165) 1.565 27 Change in nondmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col.3) 22.235 1.505 28 Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) 14,600 .0 0 30 Surplus (contributed to) withdrawn fom protected cells 0 <	21		253 577 366	231 548 342
23. Net transfers (to) from Protected Cell accounts				
24. Change in net unrealized capital gains tax of \$				
25 Change in net unealized foreign exchange capital gain (loss) 0 0 0 26 Change in net deferred income tax 1.964 (11,165) 27 Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) 22,253 1.505 28 Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) 14,600 (9,800) 20 Surplus (contributed to) withdrawn from protected cells 0 0 0 31 Cumulative effect of changes in accounting principles 0 0 0 32.1 Faid in 0 0 0 0 0 32.2 Transferred from surplus (Stock Dividend) 0 0 0 0 33.1 Faid in 0 0 0 0 0 33.1 Surplus adjustments: 0 0 0 0 0 33.1 Transferred to capital (Stock Dividend) 0 0 0 0 0 0 33.2 Transferred to capital (Stock Dividend) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
26. Change in net deferred income tax	25.			
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	26.			
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		
30. Surplus (contributed to) withdrawn from protected cells	28.			
31. Cumulative effect of changes in accounting principles	29.	Change in surplus notes	0	0
32. Capital changes: 0 0 0 32.1 Paid In 0 0 0 32.2 Transferred from surplus (Stock Dividend) 0 0 0 33. Surplus adjustments: 0 0 0 33.1 Paid In 0 0 0 0 33.2 Transferred to capital (Stock Dividend) 0 0 0 33.1 Paid In 0 0 0 0 33.2 Transferred to capital (Stock Dividend) 0 0 0 0 34. Net remittances from or (to) Home Office 0 0 0 0 0 50.1 bividends to stockholders 0 0 0 0 0 0 0 61.1 bividends to stockholders 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	30.	Surplus (contributed to) withdrawn from protected cells	0	0
32.1 Paid in 0 0 0 32.2 Transferred from surplus (Stock Dividend) 0 0 0 32.3 Transferred to surplus 0 0 0 33.1 Paid in 0 0 0 33.1 Paid in 0 0 0 33.1 Transferred to capital (Stock Dividend) 0 0 0 33.2 Transferred from capital 0 0 0 33.3 Transferred from capital 0 0 0 34< Net remittances from or (to) Home Office	31.	Cumulative effect of changes in accounting principles	0	0
32.2 Transferred from surplus (Stock Dividend) 0 0 0 32.3 Transferred to surplus 0 0 0 33.3 Surplus adjustments: 0 0 0 33.1 Paid in 0 0 0 0 33.2 Transferred to capital (Stock Dividend) 0 0 0 0 33.3 Transferred from capital 0 </td <td>32.</td> <td>Capital changes:</td> <td></td> <td></td>	32.	Capital changes:		
32.3 Transferred to surplus 0 0 33. Surplus adjustments: 0 0 33.1 Paid in 0 0 33.2 Transferred to capital (Stock Dividend) 0 0 33.3 Transferred from capital 0 0 34. Net remittances from or (to) Home Office 0 0 0 0 0 0 35. Dividends to stockholders 0 0 0 36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) 0 0 0 36. Change in surplus as regards policyholders for the year (Lines 22 through 37) 17,614.951 22,029,024 39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) 271,192,317 253,577,366 DETAILS OF WRITE-INS 0 0 0 0 0501 0 0 0 0 0 0503 0 0 0 0 0 0504 0 0 0 0 0 0505 0 0 0 0 0 05062 0 0 0 <td< td=""><td></td><td>32.1 Paid in</td><td>0</td><td>0</td></td<>		32.1 Paid in	0	0
33. Surplus adjustments: 0 0 33.1 Paid in 0 0 0 33.2 Transferred to capital (Stock Dividend) 0 0 0 33.3 Transferred from capital 0 0 0 34. Net remittances from or (to) Home Office 0 0 0 35. Dividends to stockholders 0 0 0 0 36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) 0 0 0 0 37. Aggregate write-ins for gains and losses in surplus 0 0 0 0 0 38. Change in surplus as regards policyholders for the year (Lines 22 through 37) 17, 614, 951 22, 029, 024 39. BeTAILS OF WRITE-INS 0 0 0 0 5051 0 0 0 0 0 5052 0 0 0 0 0 0 5053 0 0 0 0 0 0 0 5054 0 0 0 0 0 0 0 0 5059 10 0.00 </td <td></td> <td>32.2 Transferred from surplus (Stock Dividend)</td> <td>0</td> <td>0</td>		32.2 Transferred from surplus (Stock Dividend)	0	0
33.1 Paid in 0 0 0 33.2 Transferred to capital (Stock Dividend) 0 0 0 33.3 Transferred from capital 0 0 0 40.4 0.0 0 0 0 50.1 0 0 0 0 0 650.1 0 0 0 0 0 0 650.2 0			0	0
33.2 Transferred to capital (Stock Dividend) 0 0 33.3 Transferred from capital 0 0 34. Net remittances from or (to) Home Office 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	33.			
33.3 Transferred from capital				
34. Net remittances from or (to) Home Office 0 0 35. Dividends to stockholders 0 0 36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) 0 0 37. Aggregate write-ins for gains and losses in surplus 0 0 38. Change in surplus as regards policyholders for the year (Lines 22 through 37) 17,614,951 22,029,024 39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) 271,192,317 253,577,366 DETAILS OF WRITE-INS 0 0 0 0501. 0 0 0 0502. 0 0 0 0 0503. 0 0 0 0 0 0599. Summary of remaining write-ins for Line 5 from overflow page 0 0 0 0 0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above) 0 0 0 0 0 1403. 0 <td< td=""><td></td><td></td><td></td><td></td></td<>				
35. Dividends to stockholders 0 0 36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) 0 0 0 37. Aggregate write-ins for gains and losses in surplus 0 0 0 0 38. Change in surplus as regards policyholders for the year (Lines 22 through 37) 17,614,951 22,029,024 39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) 271,192,317 253,577,366 DETAILS OF WRITE-INS 0 0 0 0 0501 0 0 0 0 0502 0 0 0 0 0 0503 0 0 0 0 0 0 0504 0 0 0 0 0 0 0 0505 0				
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) 0 0 37. Aggregate write-ins for gains and losses in surplus 0 0 38. Change in surplus as regards policyholders for the year (Lines 22 through 37) 17,614,951 22,029,024 39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) 271,192,317 253,577,366 DETAILS OF WRITE-INS 0 0 0 0 0501. 0 0 0 0 0502. 0 0 0 0 0 0503. 0 0 0 0 0 0 0598. Summary of remaining write-ins for Line 5 from overflow page 0 0 0 0 1401. 0 0 0 0 0 0 0 0 1402. 0 <t< td=""><td></td><td></td><td></td><td></td></t<>				
37. Aggregate write-ins for gains and losses in surplus 0 0 38. Change in surplus as regards policyholders for the year (Lines 22 through 37) 17,614,951 22,029,024 39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) 271,192,317 253,577,366 DETAILS OF WRITE-INS				
38. Change in surplus as regards policyholders for the year (Lines 22 through 37) 17,614,951 22,029,024 39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) 271,192,317 253,577,366 DETAILS OF WRITE-INS				
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) 271, 192, 317 253, 577, 366 DETAILS OF WRITE-INS				
DETAILS OF WRITE-INS 0501. 0502. 0503. 0598. Summary of remaining write-ins for Line 5 from overflow page 0 0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above) 0 1401. 1402. 1403. 1404. 1405. 1406. 1407. 1408. Summary of remaining write-ins for Line 14 from overflow page 0 1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above) 0 3701. 3702. 3703. 3798. Summary of remaining write-ins for Line 37 from overflow page 0 0 0 0 3798. Summary of remaining write-ins for Line 37 from overflow page				
0501.	39.		2/1, 192, 31/	233,377,300
0502.	0501			
0503.				
0598. Summary of remaining write-ins for Line 5 from overflow page 0 0 0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above) 0 0 1401.				
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above) 0 0 1401.				
1401.				
1402.				
1403.	1402.			
1498. Summary of remaining write-ins for Line 14 from overflow page 0 0 1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above) 0 0 3701.	1403.			
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above) 0 0 3701.	1498.			
3701.	1499.			
3702.	3701.			
3703.	3702.			
	3703.			
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above) 0	3798.	Summary of remaining write-ins for Line 37 from overflow page	0	0
	3799.	Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above)	0	0

CASH FLOW

		1	2
		Current Year	Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance		, ,
2.	Net investment income		5,950,419
3.	Miscellaneous income	0	0
4.	Total (Lines 1 through 3)	120,694,716	111,316,528
5.	Benefit and loss related payments		
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions		
8.	Dividends paid to policyholders	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$(52, 163) tax on capital gains (losses)	5,798,019	4,656,440
10.	Total (Lines 5 through 9)	79,796,940	90,413,769
11.	Net cash from operations (Line 4 minus Line 10)	. 40,897,776	20,902,759
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks	0	0
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
10	12.8 Total investment proceeds (Lines 12.1 to 12.7)	51,620,042	
13.	Cost of investments acquired (long-term only):	E4 E00 070	07 000 000
	13.1 Bonds		
	13.2 Stocks		0
	13.3 Mortgage loans		0
	13.4 Real estate		0
	13.5 Other invested assets		0
	13.6 Miscellaneous applications	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	54,520,070	97,009,209
14.	Net increase/(decrease) in contract loans and premium notes	. 0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	. (2,900,028)	(72,949,645)
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0
	16.3 Borrowed funds	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)	. (9,356,149)	(9,393,841)
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(9,356,149)	(9,393,841)
	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)	. 28,641,599	(61,440,727)
19.	Cash, cash equivalents and short-term investments:	, , • • •	· · · · · · · · · · · · · · · · · · ·
	19.1 Beginning of year		
	19.2 End of period (Line 18 plus Line 19.1)	68,805,071	40,163,472
		00,000,071	10, 100, 172
Note: Si	upplemental disclosures of cash flow information for non-cash transactions:		

UNDERWRITING AND INVESTMENT EXHIBIT PART 1 - PREMIUMS EARNED

	PART 1 - I	PREMIUMS EARNED		-	
	Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. 1	Fire	_	0	0	(0013:1 * 2 - 0)
	Allied lines			0	
	Multiple peril crop			0	
	Federal flood			0	0
	Private crop		0	0	0
	Private flood			0	0
	Farmowners multiple peril			0	0
	Homeowners multiple peril			0	
	Commercial multiple peril (non-liability portion)			0	0
	Commercial multiple peril (non-nability portion)			0	0
	Vortgage guaranty				
	Violigage guaranty			0	0
	nland marine			0	0
	Financial guaranty			0	
	Medical professional liability - occurrence			0	0
	Medical professional liability - claims-made			0	0
	Earthquake			0	0
	Comprehensive (hospital and medical) individual			0	
	Comprehensive (hospital and medical) group			0	0
	Credit accident and health (group and individual)			0	0
	/ision only			0	0
	Dental only			0	0
	Disability income			0	0
	Medicare supplement			0	0
	Medicaid Title XIX			0	0
	Medicare Title XVIII			0	0
	_ong-term care			0	0
	ederal employees health benefits plan			0	0
15.9 (Other health	0	0	0	0
16. \	Norkers' compensation		0	0	0
	Other liability - occurrence			0	0
	Other liability - claims-made			0	0
17.3 E	Excess workers' compensation		0	0	0
18.1 F	Products liability - occurrence	0	0	0	0
18.2 F	Products liability - claims-made	0	0	0	0
	Private passenger auto no-fault (personal injury protection)			0	0
19.2 (Other private passenger auto liability	0	0	0	0
19.3 (Commercial auto no-fault (personal injury protection)	0	0	0	0
19.4 (Other commercial auto liability	0	0	0	0
21.1 F	Private passenger auto physical damage	0	0	0	0
21.2 (Commercial auto physical damage		0	0	0
	Aircraft (all perils)			0	0
23. F	Fidelity	0	0	0	0
	Surety			0	0
	- Burglary and theft			0	0
	Boiler and machinery			0	0
	Credit			0	0
	nternational			0	c
	Narranty			0	0
	Reinsurance - nonproportional assumed property			0	
	Reinsurance - nonproportional assumed liability			0	, ,
	Reinsurance - nonproportional assumed financial lines			0	
	Aggregate write-ins for other lines of business	-	0	0	0
	rotals	58,401,112	0	0	58,401,112
	DETAILS OF WRITE-INS	50,701,112		0	00,101,112
3401 3402					
	Summary of remaining write-ins for Line 34 from overflow page			0	
J490. 3	Summary of remaining write-ins for Line 34 from overflow page Fotals (Lines 3401 thru 3403 plus 3498)(Line 34 above)		0	0	

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS						
		1	2	3	4 Reserve for Rate	5
		Amount Unearned (Running One Year	Amount Unearned (Running More Than		Credits and Retrospective	Total Reserve for
		or Less from Date	One Year from	Earned But Unbilled	Adjustments Based	Unearned Premiums
4	Line of Business	of Policy) (a)	Date of Policy) (a)	Premium	on Experience	Cols. 1 + 2 + 3 + 4
	Fire Allied lines					
	Multiple peril crop					
	Federal flood					
	Private crop					
	Private flood					
	Farmowners multiple peril					
	Homeowners multiple peril					
	Commercial multiple peril (non-liability portion)					
	Commercial multiple peril (liability portion)					
	Mortgage guaranty					
	Ocean marine					
9.	Inland marine					
10.	Financial guaranty					
11.1	Medical professional liability - occurrence					
11.2	Medical professional liability - claims-made					
	Earthquake					
13.1	Comprehensive (hospital and medical) individual					
13.2	Comprehensive (hospital and medical) group					
14.	Credit accident and health (group and individual)					
15.1	Vision only					
15.2	Dental only					
15.3	Disability income					
15.4	Medicare supplement					
15.5	Medicaid Title XIX					
15.6	Medicare Title XVIII					
15.7	Long-term care					
15.8	Federal employees health benefits plan			•••		
15.9	Other health			···		
16.	Workers' compensation					
17.1	Other liability - occurrence					
17.2	Other liability - claims-made					
17.3	Excess workers' compensation					
18.1	Products liability - occurrence					
18.2	Products liability - claims-made					
19.1	Private passenger auto no-fault (personal injury					
10.0	,					
	Other private passenger auto liability					
19.3	Commercial auto no-fault (personal injury protection)					
19.4	Other commercial auto liability					
	Private passenger auto physical damage					
	Commercial auto physical damage					
	Aircraft (all perils)					
23.	Fidelity					
	Surety					
26.	Burglary and theft					
	Boiler and machinery					
	Credit					
	International					
	Warranty					
	Reinsurance - nonproportional assumed property					
32.	Reinsurance - nonproportional assumed liability					
33.	Reinsurance - nonproportional assumed financial					
	lines					
34.	Aggregate write-ins for other lines of business					
35.	TOTALS					
36.	Accrued retrospective premiums based on experience	e				
37.	Earned but unbilled premiums					
38.	Balance (Sum of Line 35 through 37)		1	ſ	1	
	DETAILS OF WRITE-INS					
3401.						
3402.						
3402. 3403.				1	1	1
3403.	Summary of remaining write-ins for Line 34 from					
3403. 3498.	Summary of remaining write-ins for Line 34 from overflow page					
3403. 3498.	Summary of remaining write-ins for Line 34 from					

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

UNDERWRITING AND INVESTMENT EXHIBIT PART 1B - PREMIUMS WRITTEN

		1 Reinsurance Assumed Reinsurance Ceded					6
			2	3	4	5	Net Premiums Written
	Line of Business	Direct Business (a)	From Affiliates	From Non-Affiliates	To Affiliates	To Non-Affiliates	Cols. 1+2+3-4-5
1.	Fire	0	0	0	0	0	C
2.1	Allied lines	0	0	0	0	0	
2.2	Multiple peril crop	0	0	0	0	0	C
2.3	Federal flood	0	0	0	0	0	0
2.4	Private crop	0	0	0	0	0	0
2.5	Private flood	0	0	0	0	0	0
3.	Farmowners multiple peril	0	0	0	0	0	0
4.	Homeowners multiple peril	0	0	0	0	0	0
5.1	Commercial multiple peril (non-liability						
	portion)	0	0	0	0	0	(
5.2	Commercial multiple peril (liability portion)	0	0	0	0	0	(
6.	Mortgage guaranty	0	0	0	0	0	
8.	Ocean marine	0	0	0	0	0	(
9.	Inland marine	0	0	0	0	0	(
10.	Financial guaranty	0	0	0	0	0	
11.1	Medical professional liability - occurrence .	0	0	0	0	0	
11.2	Medical professional liability - claims-						
	made	0	0	0	0	0	
12.	Earthquake	0	0	0	0	0	
13.1	Comprehensive (hospital and medical)	^	^	0	^	^	
40.0	individual	0	0	0	0	0	
13.2	Comprehensive (hospital and medical)	0	0	0	0	Λ	.
14	group	0	0	0	0	0	
14.	Credit accident and health (group and individual)	0	0	0	0	0	(
15 1	Vision only	0	0	0	0	0	(
	Dental only	0	0	0	0	0	
	Disability income	0	0	0 0	0	0 0	
	Medicare supplement	0	0	0 0	0	0 0	
	Medicale supplement	0	0	0	0	0	
		0	0	0	0	0	
	Medicare Title XVIII	0		0	0	0	
	Long-term care	0	0	0	0	0	
	Federal employees health benefits plan	0	0	0	0	0	
	Other health	0	0	0	0	0	
16.	Workers' compensation	0	0	0	0	0	
	Other liability - occurrence	0	0	0	0	0	
	Other liability - claims-made	0	0	0	0	0	
	Excess workers' compensation	0	0	0	0	0	
	Products liability - occurrence	0	0	0	0	0	
18.2	Products liability - claims-made	0	0	0	0	0	(
19.1	Private passenger auto no-fault (personal		•	0	•	0	,
	injury protection)		0	0	0	0	
	1 1 0 5	0	0	0	0	0	
19.3	Commercial auto no-fault (personal injury	0	0	0	0	0	
	protection)	0		0	0	0	(
19.4	Other commercial auto liability	0	0	0	•	0	
21.1	Private passenger auto physical damage .	0	0	0	0	0	
	Commercial auto physical damage	0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0	
23.	Fidelity	0	0	0	0	0	
24.	Surety	0	0	0	0	0	
26.	Burglary and theft		0	0	0	0	
27.	Boiler and machinery		0	0	0	0	
28.	Credit	0	0	0	0	0	
29.	International	0	0	0	0	0	(
30.	Warranty	0	0	0	0	0	(
31.	Reinsurance - nonproportional assumed						
	property	XXX	58,411,112	0	10,000	0	
32.	Reinsurance - nonproportional assumed						
	-	XXX	0	0	0	0	(
33.	Reinsurance - nonproportional assumed financial lines	~~~	^	0	0	0	
~ 1			0	0	0	0	
34.	Aggregate write-ins for other lines of business	0	0	0	٥	0	
35.		0	58,411,112	0	10,000	0	58,401,11
JD.		U	30,411,112	0	10,000	0	JU,4UI,II
404	DETAILS OF WRITE-INS						
401.		••••••					
402.							
403.							
498.	Summary of remaining write-ins for Line	<u>^</u>	^	0	0	0	
100	34 from overflow page	0	0	0	0	0	
499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X] If yes: 1. The amount of such installment premiums \$0

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Losses Paid Less Salvage 5 6		7	8						
				Less Salvage	-	5	0	1	-
		1	2	3	4				Percentage of
	Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 -3)	Net Losses Unpaid Current Year (Part 2A , Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	Fire	0	0		00)0	0	0	0.0
2.1	Allied lines	0	0		0)0	0	0	0.0
2.2	Multiple peril crop	0	0		0)0	0	0	0.0
2.3	Federal flood	0	0		0)	0	0	0.0
2.4	Private crop	0	0		0	00	0	0	0.0
2.5	Private flood	0	0		0	00	0	0	0.0
	Farmowners multiple peril	0	0	(n c	0	0	0	0.0
4	Homeowners multiple peril	0	0		0	0	0	0	0.0
5.1	Commercial multiple peril (non-liability portion)	0	0		0	0			0.0
5.2	Commercial multiple peril (liability portion)	0	0	(n c	0	0	0	0.0
6	Mortgage guaranty	0	0	(0 0	0	0	0	0.0
	Ocean marine	0	0	(n í	0	0	0	0.0
	Inland marine	0 N	۰		n)0	0 N	n	0.0
	Financial guaranty	0 ^	۰ ۱		n	,		n	0.0
	Medical professional liability - occurrence	0 ^	۰		n)		0 N	0.0
	Medical professional liability - claims-made	0 ^	0		n	,		0	0.0
	Earthquake	U	0		n	،	0	0 ^	0.0
12.	Eartnquake Comprehensive (hospital and medical) individual		U	······	n)0	0	U	0.0
		0	0	······	۰ l)		l0	0.0
13.2	Comprehensive (hospital and medical) group	0	0	······	۰		0	······0	0.0
	Credit accident and health (group and individual)	0	0				0	0	0.0
	Vision only	0	0				0	0	
	Dental only	0	0				0	0	0.0
	Disability income	0	0		00		0	0	0.0
	Medicare supplement	0	0		0 0)0		0	0.0
	Medicaid Title XIX	0	0		0 0)0		0	0.0
	Medicare Title XVIII	0	0		0)0		0	0.0
15.7	Long-term care	0	0		0)0		0	0.0
15.8	Federal employees health benefits plan	0	0		00)0		0	0.0
15.9	Other health	0	0		D			0	0.0
	Workers' compensation	0	0						0.0
17.1	Other liability - occurrence		0		3 1,791			4,988,957	0.0
17.2	Other liability - claims-made	0	0		0)0	0	0	0.0
17.3	Excess workers' compensation	0	0		0)0	0	0	0.0
18.1	Products liability - occurrence		0		6	38,970,779			0.0
	Products liability - claims-made	0	0		o)0	0	0	0.0
	Private passenger auto no-fault (personal injury protection)	0	0		o	0	0	0	0.0
19.2	Other private passenger auto liability	0	0		0	0	0	0	0.0
19.3	Commercial auto no-fault (personal injury protection)				o	0		0	0.0
	Other commercial auto liability	0	0		0)		0	0.0
	Private passenger auto physical damage	0	0		o	0		0	0.0
	Commercial auto physical damage	0	0		o)	0	0	
	Aircraft (all perils)				o)	n	0	
	Fidelity	0 N	n	(n)	0	n	0.0
	Surety	0 N	n	(n)0	0 N	n	0.0
24.	Burglary and theft	0 N	n	(n)0		n	0.0
	Boiler and machinery	0 N	۰	(n)	0 N	n	0.0
29	Credit	0 N	۰	(n)	n	n	0.0
	International	0	۰	(n) 0	0 N	n	0.0
30.	Warranty	0	0		0			n	0.0
30.	Reinsurance - nonproportional assumed property				0				
31.	Reinsurance - nonproportional assumed liability				n	۰	0		
32.	Reinsurance - nonproportional assumed financial lines		U		n	،u	0	U	0.0
	Aggregate write-ins for other lines of business		0		n	۰۱	0	U	0.0
		219, 189	47 004 000	144.000	U 47 760 000		U	U	
35.	TOTALS	219,189	17,681,298	144,389	9 17,756,098	64,241,496	59,316,297	22,681,297	38.8
0.404	DETAILS OF WRITE-INS								
3401.					•• ••••••	•	•		
3402.					•• ••••••	.	•		
3403.									
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	(0) 0	0	0	0.0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	(0 0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

				d Losses	1		Incurred But Not Rep	orted	8	9
	1		2	3	4	5	6	7		
	Line of Business Direct		isurance sumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
	Allied lines	0	0		0	,	0	0	0	
	Multiple peril crop	0	00		0	,	0	0	0	
2.2	Federal flood	0	۰۵		0	,	0	0	0	
	Private crop	0	00		0	,	0	0	0	
	Private clop	0	0 0		0	,	0	0	0	
2.0	Farmowners multiple peril	0	00		0	,	0	0	0	
۵. ۲	Homeowners multiple peril	0	00		0	,	0	0 0	0	
	Commercial multiple peril (non-liability portion)	0	00		0	,	0	0 0	0	
	Commercial multiple peril (liability portion)		0		0	j			0	
6	Mortgage guaranty	0	0		0	j			0	
8.	Ocean marine		0		0)			0	
9.	Inland marine	0	0		0 0	,	0	0 0	0	
	Financial guaranty	0	0		0 0	,	0	0 0	0	
11 1	Medical professional liability - occurrence	0	0		0 0	,	0	0 0	0	
	Medical professional liability - claims-made		0		0	j			0	
	Earthquake		0		0)			0	
13.1	Comprehensive (hospital and medical) individual		0		0)			(a)0	
	Comprehensive (hospital and medical) group		0		0)			(a)0	
14	Credit accident and health (group and individual)	0	0		0 0	,	0	0 0	(a)	
	Vision only	0	0		0 0	,	0	0 0	(a)0	
	Dental only	0	0		0 0)	0		(a)0	
	Disability income	0	00		0 0	,			(a)0	
	Medicare supplement	0	0		0 0)			(a)0	
	Medicaid Title XIX	0	0		0 0	,	0		(a)0	
	Medicare Title XVIII	0	0		0		0		(a)0	
	Long-term care	0	00		0	,			(a)0	
	Federal employees health benefits plan	0	00		0			0	(a) 0	
		0	00		•				(a)0	
		3. 158	00							
	Other liability - occurrence		00					0		
17.2	Other liability - claims-made	,	00					0		
	Excess workers' compensation	0	0		-	,		0		
18.1	Products liability - occurrence	245	0			58.929.		0		
18.2	Products liability - claims-made	0	00		0)	0	0	0	
	Private passenger auto no-fault (personal injury protection)	0	0		0 0	,	0	0 0	0	
19.2	Other private passenger auto liability	0	0		0 0	,	0		0	
19.3	Commercial auto no-fault (personal injury protection)	0	0		0 0	,	0	0 0	0	
19.4	Other commercial auto liability	0	0		0 0	,	0	0 0	0	
21.1	Private passenger auto physical damage	0	0		0 0	,	0	0 0	0	
21.2	Commercial auto physical damage	0	0		o)		0	0	
22.	Aircraft (all perils)	0	0		o)		0	0	
	Fidelity	0	0		o)		0	0	
24.	Surety	0	0		o)		0	0	
26.	Burglary and theft	0	0		o)		0	0	
27.	Boiler and machinery	0	0		o)		0	0	
28.	Credit	0	0		o)		0	0	
29.	International	0	0		o)		0	0	
30.		0	0		o)		0	0	
31.	Reinsurance - nonproportional assumed property		0		o C)XXX		0	0	
32.	Reinsurance - nonproportional assumed liabilityXXX		0		o C)XXX		0	0	
33.	Reinsurance - nonproportional assumed financial lines		0		o)XXX		0	0	
34.	Aggregate write-ins for other lines of business	0	0		0 0)	0	0 0	0	
	TOTALS 21.819	0,046	0	9,923,96	7 11,895,079	89,961,8	395	0 37,615,478	64,241,496	9,851,
	DETAILS OF WRITE-INS			.,	,,			. , ,	,,	
3401.										
3402.										
3403.										
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0		o)		0	0	
	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)									

UNDERWRITING AND INVESTMENT EXHIBIT

		1	2	3	4
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1.	Claim adjustment services:	Expense	Expenses	Expended	Total
	1.1 Direct	(173,970)	0	0	(173,9
	1.2 Reinsurance assumed	1,042,344	0	0	
	1.3 Reinsurance ceded	0	0	0	
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)		0	0	
2.	Commission and brokerage:				
	2.1 Direct excluding contingent	0	0	0	
	2.2 Reinsurance assumed, excluding contingent	0		0	
	2.3 Reinsurance ceded, excluding contingent			0	
	2.4 Contingent - direct	0	0	0	
	2.5 Contingent - reinsurance assumed	0	0	0	
	2.6 Contingent - reinsurance ceded			0	
	2.7 Policy and membership fees		0	0	
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)			0	
3.	Allowances to managers and agents	0	0	0	
4.	Advertising			1	
5.	Boards, bureaus and associations			0	
6.	Surveys and underwriting reports			0	
7.	Audit of assureds' records			0	
8.	Salary and related items:				
	8.1 Salaries				
	8.2 Payroll taxes				
9.	Employee relations and welfare				
10.	Insurance				
11.	Directors' fees			0	
12.	Travel and travel items				
13.	Rent and rent items			,	
14.	Equipment			,	
15.	Cost or depreciation of EDP equipment and software				
16.	Printing and stationery				
17.	Postage, telephone and telegraph, exchange and express				
18.	Legal and auditing		0	0	,
19.	Totals (Lines 3 to 18)			253.064	1.446.9
20.	Taxes, licenses and fees:	,		,	,.
_0.	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$0	0	1 345	0	13
	20.2 Insurance department licenses and fees				
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)			0	
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)			100	51.8
21.	Real estate expenses				
22.	Real estate taxes				
22.	Reimbursements by uninsured plans			0	
23. 24.	Aggregate write-ins for miscellaneous expenses				
2 4 . 25.	Total expenses incurred				
25. 26.	Less unpaid expenses - current year			0	
	Add unpaid expenses - prior year				
27. 28	Add unpaid expenses - prior year Amounts receivable relating to uninsured plans, prior year			0	
28. 20		0	0 0	0	
29. 30	Amounts receivable relating to uninsured plans, current year				00 E07 7
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	2,129,049	18,251,991	256,714	20,637,7
40.4	DETAILS OF WRITE-INS Bank Activity Fees	_		0.550	0.5
401. 402	-				
402.					
403. 408	Summary of remaining write-ins for Line 24 from overflow page				
498.					
199.	Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)	0	0	3,550	3,

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE APPALACHIAN INSURANCE COMPANY EXHIBIT OF NET INVESTMENT INCOME

<u> </u>		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a)2,048,943	2,005,410
1.1	Bonds exempt from U.S. tax	(a)0	
1.2	Other bonds (unaffiliated)		
1.3	Bonds of affiliates	(a)0	
2.1	Preferred stocks (unaffiliated)	(b)0	0
2.11	Preferred stocks of affiliates	(b)175,000	175,000
2.2	Common stocks (unaffiliated)	0	0
2.21	Common stocks of affiliates	0	0
3.	Mortgage loans		
4.	Real estate	(d)0	0
5	Contract loans	0	0
6	Cash, cash equivalents and short-term investments	(e)3,001,445	
7	Derivative instruments	(f)0	0
8.	Other invested assets	0	0
9.	Aggregate write-ins for investment income	0	0
10.	Total gross investment income	9,748,650	
11.	Investment expenses		(g)256,614
12.	Investment taxes, licenses and fees, excluding federal income taxes		
13.	Interest expense		
14.	Depreciation on real estate and other invested assets		
15.	Agregate write-ins for deductions from investment income		0
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		9,480,875
	DETAILS OF WRITE-INS		
0901.			
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0
			1 -

	440 500	
(a) Includes \$		accrual of discount less \$
(b) Includes \$	0	accrual of discount less \$0 amortization of premium and less \$
(c) Includes \$	0	accrual of discount less \$0 amortization of premium and less \$
(d) Includes \$	0	for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.
(e) Includes \$	0	accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
(f) Includes \$	0	accrual of discount less \$0 amortization of premium.
	0 I and Separate Acc	investment expenses and \$
(h) Includes \$	0	interest on surplus notes and \$0 interest on capital notes.
(i) Includes \$	0	depreciation on real estate and \$

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		•	-	Ŭ		Ũ
				Total Realized Capital	Change in	Change in Unrealized
		Realized Gain (Loss)	Other Realized	Gain (Loss)	Unrealized Capital	Foreign Exchange
		On Sales or Maturity	Adjustments	(Columns 1 + 2)	Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds	(1,328,258)	0	(1,328,258)	0	0
1.1	Bonds exempt from U.S. tax	0	0	0	0	0
1.2	Other bonds (unaffiliated)	(2,463,023)	0	(2,463,023)	101,628	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)		0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0	0	0
5.	Contract loans		0	0	0	0
6.	Cash, cash equivalents and short-term investments		0	0		0
7.	Derivative instruments		0	0	0	0
8.	Other invested assets		0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	(3,791,281)	00	(3,791,281)	121,262	0
10.	DETAILS OF WRITE-INS	(0,701,201)	•	(0,701,201)	121,202	
0901.	DETAILS OF WRITE-INS					
0901.						
0902.						
0998.	Summary of remaining write-ins for Line 9 from	0	0	0	0	0
0000	overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	n
L	abuvej	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE APPALACHIAN INSURANCE COMPANY EXHIBIT OF NON-ADMITTED ASSETS

	EXHIBIT OF NON-ADMITTE	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks	0	0	0
	2.2 Common stocks	0	0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	0	0	0
	3.2 Other than first liens			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company	0	0	0
	4.2 Properties held for the production of income			
	4.3 Properties held for sale			
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6.	Contract loans	0	0	0
7.	Derivatives (Schedule DB)	0	0	0
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and accrued			
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
	15.3 Accrued retrospective premiums and contracts subject to redetermination			
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers	0	0	0
	16.2 Funds held by or deposited with reinsured companies			
	16.3 Other amounts receivable under reinsurance contracts			
17	Amounts receivable relating to uninsured plans			
	Current federal and foreign income tax recoverable and interest thereon		0	
	Net deferred tax asset			
19.	Guaranty funds receivable or on deposit		0	
20.	Electronic data processing equipment and software			
21.	Furniture and equipment, including health care delivery assets			
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
20. 24.	Health care and other amounts receivable			
2 4 . 25.	Aggregate write-ins for other than invested assets			
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28.	Total (Lines 26 and 27)	391,669	413,922	22,253
	DETAILS OF WRITE-INS			
1101.				
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
1199.			1	
<u>1199.</u> 2501.				
2501.				
2501. 2502.				
2501.				

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Appalachian Insurance Company ("Company") have been prepared on the basis of accounting practices prescribed or permitted by the Rhode Island Division of Insurance.

The state of Rhode Island requires insurance companies domiciled in the state of Rhode Island to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual subject to any deviations prescribed or permitted by the Rhode Island Division of Insurance. The Company has no state prescribed or permitted practices.

		F/S	F/S		
	SSAP #	Page	Line #	 2023	 2022
NET INCOME (1) State basis (Page 4, Line 20, Columns 1 & 2)	xxx	xxx	xxx	\$ 17,480,938	\$ 22,128,569
 (2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP: 				-	-
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:				-	-
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 17,480,938	\$ 22,128,569
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 271,192,317	\$ 253,577,366
(6) State Prescribed Practices that are an increase/(decrease) f	from NAIC SA	NP:		-	-
(7) State Permitted Practices that are an increase/(decrease) from	om NAIC SAF	D:		-	-
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 271,192,317	\$ 253,577,366

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, revenues and expenses. Actual results could differ from these estimates.

C. Accounting Policy

Premium earned consists solely of premium assumed pursuant to an intercompany pooling agreement. Refer to footnote 26.

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

Net investment income earned consists primarily of interest and dividends less investment related expenses. Interest is recognized on an accrual basis and dividends are recognized on an ex-dividend basis. Net realized capital gains (losses) are recognized on a specific identification basis when securities are sold, redeemed or otherwise disposed. Realized capital losses include writedowns for impairments considered to be other than temporary.

In addition, the Company utilizes the following accounting policies:

(1) Basis for Short-Term Investments

The Company has no short-term Investments.

(2) Basis for Bonds and Amortization Schedule

Non loan-backed bonds with NAIC designations 1 or 2 are stated at amortized cost using the interest method. Non loan-backed bonds with NAIC designations of 3 through 6 are stated at the lower of amortized value or fair value. See paragraph 6 for loan-backed and structured securities.

(3) Basis for Common Stocks

The Company has no common stock.

(4) Basis for Preferred Stocks

Preferred stocks are stated at cost.

(5) Basis for Mortgage Loans

The Company has no mortgage loans.

(6) Basis for Loan-Backed Securities and Adjustment Methodology

U.S. government agency loan-backed and structured securities are valued at amortized value. Other loan-backed and structured securities are valued at either amortized value or fair value, depending on many factors including: type of underlying collateral, whether modeled by NAIC vendor, whether rated (by either NAIC approved rating organization or NAIC Securities Valuation Office), and relationship of amortized value to par value and amortized value to fair value.

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities

The Company owns 25,000 shares of the 7% cumulative preferred stock (\$100 par value) outstanding of Affiliated FM Insurance Company (NAIC #10014), which is also fully owned by FMIC Holdings, Inc. The preferred stock is stated at cost.

NOTE 1 Summary of Significant Accounting Policies and Going Concern (continued from preceding page)

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities

The Company has no investments in joint ventures, partnerships and limited liability corporations.

(9) Accounting Policies for Derivatives

The Company has no derivatives.

(10) Anticipated Investment Income Used in Premium Deficiency Calculation

The Company does not currently have open insurance contracts and therefore does not assess the need for a premium deficiency reserve.

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses

Liabilities for unpaid losses and loss adjustment expenses (including Asbestos and Environmental reserves) are based on case estimates or reports from ceding companies. Estimates of incurred-but-not-reported (IBNR) reserves are based on historical experience and management analysis. Although the above-described amounts are based on estimates, management believes recorded liabilities for unpaid losses and loss adjustment expenses are reasonable to cover the ultimate settlement cost of losses incurred. These estimates are continually reviewed and adjustments to such estimates are reflected in current operations.

- (12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period
 - The Company has not changed its capitalization policy from the prior period.
- (13) Method Used to Estimate Pharmaceutical Rebate Receivables

The Company has no "pharmaceutical rebate receivables."

D. Going Concern

Based upon its evaluation of relevant conditions and events, management has concluded that the Company will continue as a going concern.

NOTE 2 Accounting Changes and Corrections of Errors

Not Applicable.

NOTE 3 Business Combinations and Goodwill

Not Applicable.

NOTE 4 Discontinued Operations

Not Applicable.

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

Not Applicable.

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Loan-Backed Securities

(1) Description of Sources Used to Determine Prepayment Assumptions

Loan-backed bonds and structured securities are valued at amortized cost using the constant interest rate method, and using an effective yield based on current prepayment assumptions obtained from Bloomberg, rather than anticipated prepayments at the date of purchase. Prepayment assumptions are reviewed periodically and updated in response to changes in market interest rates.

(2) Other-Than-Temporary-Impairments

Not Applicable.

(3) Recognized OTTI Securities

Not Applicable.

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a) The aggregate amount of unrealized losses:	
1. Less than 12 Months	\$ -
2. 12 Months or Longer	\$ 655,696
b) The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 Months	\$ -
2. 12 Months or Longer	\$ 17,035,143

NOTE 5 Investments (continued from preceding page)

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether other-than-temporary impairments should be recognized. The Company asserts that it has the intent and ability to hold these securities long enough to allow the cost basis of these securities to be recovered. These conclusions are supported by a detailed analysis of the underlying credit and cash flows of each security. Unrealized losses are primarily attributable to credit spread widening and increased liquidity discounts. It is possible that the Company could recognize other-than-temporary impairments in the future on some of the securities, if future events, information and the passage of time causes it to conclude that declines in value are other-than temporary.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

Not Applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

H. Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable.

J. Real Estate

Not Applicable.

K. Low Income Housing Tax Credits (LIHTC)

Not Applicable.

L. Restricted Assets

1. <u>Restricted Assets (Including Pledged)</u>

						Gross (/	Admitt	ed 8	k Nonadmitt	ed) Restricted				
						Current	Year						6		7
		1		2		3			4		5				
Restricted Asset Category	Тс	otal Genera Account (G/A)	al	G/A Supporting Protected Cell Accou Activity (a)		Tota Protec Cell Acc Restric Asse	cted count cted	Ce	Protected ell Account Assets upporting /A Activity (b)		Total (1 plus 3)	F	Total From Prior Year	(De	ncrease/ ecrease) (5 ninus 6)
a. Subject to contractual obligation for which															
liability is not shown	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
 b. Collateral held under security lending agreements 	\$	-		\$	-	\$	-	\$	-	\$	-	\$	_	\$	-
c. Subject to repurchase agreements	\$	_		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
d. Subject to reverse repurchase agreements	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
e. Subject to dollar repurchase agreements	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
f. Subject to dollar reverse repurchase	Ť			•		Ŧ		Ŧ		Ŧ		-		Ť	
agreements	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
g. Placed under option contracts	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
h. Letter stock or securities restricted as to sale															
- excluding FHLB capital stock	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
i. FHLB capital stock	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
j. On deposit with states	\$	5,729,352	2	\$	-	\$	-	\$	-	\$	5,729,352	\$	5,774,317	\$	(44,965)
k. On deposit with other regulatory bodies	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
I. Pledged collateral to FHLB (including assets backing funding agreements)	\$	-		\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
m. Pledged as collateral not captured in other categories	\$	-		\$	_	\$	-	\$	-	\$	-	\$	-	\$	-
n. Other restricted assets	\$	-		\$	-	\$	-	\$	-	\$	_	\$	-	\$	-
o. Total Restricted Assets (Sum of a through n)	\$	5,729,352	2	\$	-	\$	-	\$	-	\$	5,729,352	\$	5,774,317	\$	(44,965)

NOTE 5 Investments (continued from preceding page)

		Curre	nt Year	
	8	9	Perce	entage
			10	11
Restricted Asset Category	Total Non- admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non- admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown	\$-	\$-	0.000%	0.000%
b. Collateral held under security lending agreements	\$-	\$-	0.000%	0.000%
c. Subject to repurchase agreements	\$-	\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements	\$-	\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements f. Subject to dollar reverse repurchase	\$-	\$-	0.000%	0.000%
agreements	\$-	\$-	0.000%	0.000%
g. Placed under option contracts	\$-	\$-	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$-	\$-	0.000%	0.000%
i. FHLB capital stock	\$-	\$-	0.000%	0.000%
j. On deposit with states	\$-	\$ 5,729,352	1.504%	1.506%
k. On deposit with other regulatory bodies	\$-	\$-	0.000%	0.000%
I. Pledged collateral to FHLB (including assets backing funding agreements) m. Pledged as collateral not captured in other	\$-	\$-	0.000%	0.000%
categories	\$-	\$-	0.000%	0.000%
n. Other restricted assets	\$-	\$-	0.000%	0.000%
o. Total Restricted Assets (Sum of a through n)	\$-	\$ 5,729,352	1.504%	1.506%

(a) Subset of Column 1

(b) Subset of Column 3

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories

Not Applicable.

3. Detail of Other Restricted Assets

Not Applicable

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

Not Applicable.

M. Working Capital Finance Investments

Not Applicable.

N. Offsetting and Netting of Assets and Liabilities

Not Applicable.

O. 5GI Securities

Not Applicable.

P. Short Sales

Not Applicable.

Q. Prepayment Penalty and Acceleration Fees

Not Applicable.

R. Reporting Entity's Share of Cash Pool by Asset Type

Not Applicable.

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

Not Applicable.

NOTE 7 Investment Income

A. The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued:

The Company non-admits investment income due and accrued if the amounts are over 90 days past due.

B. The total amount excluded:

There were no accrued investment income amounts over 90 days past due as of December 31, 2023, or as of December 31, 2022.

NOTE 7 Investment Income (continued from preceding page)

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

Interest Income Due and Accrued	 Amount
1. Gross	\$ 1,623,796
2. Nonadmitted	\$ -
3. Admitted	\$ 1,623,796

D. The aggregate deferred interest.

Not Applicable.

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

Not Applicable.

NOTE 8 Derivative Instruments

Not Applicable.

NOTE 9 Income Taxes

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

	As of	End of Current	Period		12/31/2022			Change	
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	\$ 492,346		\$ 492,346	\$ 455,233	\$ 21,342	\$ 476,575	\$ 37,113		\$ 15,771
(b) Statutory Valuation Allowance Adjustment (c) Adjusted Gross Deferred Tax Assets (1a -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
1b)	\$ 492,346	\$-	\$ 492,346	\$ 455,233	\$ 21,342	\$ 476,575	\$ 37,113	\$ (21,342)	\$ 15,771
(d) Deferred Tax Assets Nonadmitted	\$ 391,669	\$-	\$ 391,669	\$ 392,580	\$ 21,342	\$ 413,922	\$ (911)	\$ (21,342)	\$ (22,253)
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 100,677	\$-	\$ 100,677	\$ 62,653	\$-	\$ 62,653	\$ 38,024	\$-	\$ 38,024
(f) Deferred Tax Liabilities	\$ 80,808	\$-	\$ 80,808	\$ 40,936	\$-	\$ 40,936	\$ 39,872	\$-	\$ 39,872
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 19.869	¢	\$ 19.869	\$ 21.717	¢	\$ 21.717	\$ (1.848)	¢	\$ (1.848)

2. Admission Calculation Components SSAP No. 101

	As of End of Current Period						12/31/2022							Change					
	(1) Ordinarv		(2) Capital		(C	(3) ol. 1 + 2) Total		(4) Ordinarv		(5) Capital		(6) (Col. 4 + 5) Total		(7) Col. 1 - 4) Ordinary		(8) Col. 2 - 5) Capital	(C	(9) Col. 7 + 8) Total	
	oraniary		oupitui			Total		orunnary		oupitui	T	Total		oraniary		oupliu		10101	
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized	\$ 13,246	\$		-	\$	13,246	\$	14,478	\$		4	5 14,478	\$	(1,232)	\$	-	\$	(1,232)	
(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)	\$ 6,623	\$		-	\$	6,623	\$	7,239	\$	-	44	5 7,239	\$	(616)	\$	-	\$	(616)	
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ 6,623	\$		-	\$	6,623	\$	7,239	\$	-	\$	5 7,239	\$	(616)	\$	-	\$	(616)	
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	xxx		xxx		\$40),548,858		xxx		XXX	69	38,033,348		xxx		xxx	\$ 2	2,515,510	
(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.	\$ 80,808	\$		-	\$	80,808	\$	40,936	\$	-	44	6 40,936	\$	39,872	\$	-	\$	39,872	
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 100,677	\$		-	\$	100,677	\$	62,653	\$	-	69	62,653	\$	38,024	\$	-	\$	38,024	

3. Other Admissibility Criteria

2023 2022

899.417%

a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.

b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.

\$ 271,172,448 \$ 253,555,649

1267.102%

NOTE 9 Income Taxes (continued from preceding page)

4. Impact of Tax Planning Strategies

	As of	f End of C	Currer	t Period		12/31	/202	22		Cha	ange		
	(*	1)	(2)		(3)			(4)	((5) Col. 1 - 3)	(0	(6) Col. 2 - 4)	
	Ordi	inary	(Capital		Ordinary		Capital		Ordinary		Capital	
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.													
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$4	92,346	\$	-	\$	455,233	\$	21,342	\$	37,113	\$	(21,342)	
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies		0.000%		0.000%		0.000%		0.000%		0.000%		0.000%	
 Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) 	\$ 1	00,677	\$	-	\$	62,653	\$	-	\$	38,024	\$	-	
 Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies 		0.000%		0.000%		0.000%		0.000%		0.000%		0.000%	

b. Do the Company's tax-planning strategies include the use of reinsurance?

Yes [] No [X]

B. Deferred Tax Liabilities Not Recognized

Not Applicable.

C. Current and Deferred Income Taxes

	(1) As of End of	(2)	(3) (Col. 1 - 2)
1. Current Income Tax	urrent Period	12/31/2022	Change
(a) Federal	\$ 5,387,247	\$ 5,884,715	\$ (497,468)
(b) Foreign	\$ -	\$ -	\$ -
(c) Subtotal (1a+1b)	\$ 5,387,247	\$ 5,884,715	\$ (497,468)
(d) Federal income tax on net capital gains	\$ (785,209)	\$ (63,089)	\$ (722,120)
(e) Utilization of capital loss carry-forwards	\$ -	\$ -	\$ -
(f) Other	\$ -	\$ -	\$ -
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 4,602,038	\$ 5,821,626	\$ (1,219,588)
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ 492,346	\$ 455,233	\$ 37,113
(2) Unearned premium reserve	\$ -	\$ -	\$ -
(3) Policyholder reserves	\$ -	\$ -	\$ -
(4) Investments	\$ -	\$ -	\$ -
(5) Deferred acquisition costs	\$ -	\$ -	\$ -
(6) Policyholder dividends accrual	\$ -	\$ -	\$ -
(7) Fixed assets	\$ -	\$ -	\$ -
(8) Compensation and benefits accrual	\$ -	\$ -	\$ -
(9) Pension accrual	\$ -	\$ -	\$ -
(10) Receivables - nonadmitted	\$ -	\$ -	\$ -
(11) Net operating loss carry-forward	\$ -	\$ -	\$ -
(12) Tax credit carry-forward	\$ -	\$ -	\$ -
(13) Other	\$ -	\$ -	\$ -
(99) Subtotal (sum of 2a1 through 2a13)	\$ 492,346	\$ 455,233	\$ 37,113
(b) Statutory valuation allowance adjustment	\$ -	\$ -	\$ -
(c) Nonadmitted	\$ 391,669	\$ 392,580	\$ (911)
 (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c) (e) Capital: 	\$ 100,677	\$ 62,653	\$ 38,024
(1) Investments	\$ -	\$ 21,342	\$ (21,342)
(2) Net capital loss carry-forward	\$ -	\$ -	\$ -
(3) Real estate	\$ -	\$ -	\$ -
(4) Other	\$ -	\$ -	\$ -
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ -	\$ 21,342	\$ (21,342)
(f) Statutory valuation allowance adjustment	\$ -	\$ -	\$ -
(g) Nonadmitted	\$ -	\$ 21,342	\$ (21,342)
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ -	\$ -	\$ -
(i) Admitted deferred tax assets (2d + 2h)	\$ 100,677	\$ 62,653	\$ 38,024
3. Deferred Tax Liabilities:			
(a) Ordinary:			
(1) Investments	\$ 76,685	\$ 40,936	\$ 35,749
(2) Fixed assets	\$ -	\$ -	\$ -
(3) Deferred and uncollected premium	\$ -	\$ -	\$ -
(4) Policyholder reserves	\$ -	\$ -	\$ -
(5) Other	\$ -	\$ -	\$ -
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 76,685	\$ 40,936	\$ 35,749
(b) Capital:			
(1) Investments	\$ 4,123	\$ -	\$ 4,123
(2) Real estate	\$ -	\$ -	\$ -
(3) Other	\$ -	\$ -	\$ -
(99) Subtotal (3b1+3b2+3b3)	\$ 4,123	\$ -	\$ 4,123
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 80,808	\$ 40,936	\$ 39,872
Net deferred tax assets/liabilities (2i - 3c)	\$ 19,869	\$ 21,717	\$ (1,848)

NOTE 9 Income Taxes (continued from preceding page)

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate Among the more significant book to tax adjustments were the following:

	-	As of End of urrent Period	Effective Tax Rate		
Provision computed at statutory rate	\$	4,637,424	21.00%		
Tax exempt interest	\$	-	0.00%		
Dividends received deduction	\$	(36,750)	-0.20%		
Proration of tax exempt investment income	\$	-	0.00%		
Nondeductible expenses	\$	-	0.00%		
Tax on change in non-admitted assets	\$	-	0.00%		
Tax on other surplus adjustments	\$	-	0.00%		
True-ups and other adjustments to tax	\$	-	0.00%		
Total Tax	\$	4,600,674	20.80%		
Reconciliation					
Federal and foreign income taxes incurred	\$	5,387,247	24.40%		
Realized capital gains (losses) tax	\$	(785,209)	-3.60%		
Change in Deferred Tax	\$	(1,364)	0.00%		
Total Tax	\$	4,600,674	20.80%		

- E. Operating Loss Carry Forwards and Income Taxes Available for Recoupment
 - 1. The amounts, origination dates and expiration dates of operating loss and tax credit carry forwards available for tax purposes:

Not Applicable.

2. The following is income tax expense for current year and proceeding years that is available for recoupment in the event of future net losses:

Year	Amounts
2023	\$4,638,189
2022	\$5,798,676
2021	\$113.006

3. The Company's aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Service Code

None

- F. Consolidated Federal Income Tax Return
 - 1. The Company's federal income tax return is consolidated with the following entities:

Factory Mutual Insurance Company (Parent)	FMIC Holdings, Inc.
Affiliated FM Insurance Company	Corporate Insurance Services, Inc.
Appalachian Insurance Company	Watch Hill Insurance Company
Risk Engineering Insurance Company Limited	

2. The manner in which the Board of Directors sets forth for allocating the consolidated federal income tax:

The method of allocation among companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis with current credit for any net operating losses or other items utilized in the consolidated tax return. Preliminary settlements are made after the filing of the federal extension and final settlement is made after the filing of the consolidated tax return.

G. Federal or Foreign Federal Income Tax Loss Contingencies:

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

H. Repatriation Transition Tax (RTT)

Not Applicable.

I. Alternative Minimum Tax (AMT) Credit

Not Applicable.

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of the Relationship Involved

All of the common stock outstanding of the Company is owned by FMIC Holdings, Inc. (Johnston, RI), which is a wholly-owned subsidiary of Factory Mutual Insurance Company, (NAIC #21482) Johnston, RI.

The Company owns 25,000 shares of the 7% cumulative preferred stock (\$100 par value) outstanding of Affiliated FM Insurance Company (NAIC #10014), which is also fully owned by FMIC Holdings, Inc.

B. Transactions

The Company lists its transactions with affiliates on Schedule Y Part 2. There were no reportable transactions between the Company and any affiliates which exceeded one-half of 1% of admitted assets.

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties (continued from preceding page)

- C. Transactions with related parties who are not reported on Schedule Y
 - (1) Detail of Material Related Party Transactions
 - Refer to Schedule Y Part 2.
 - (2) Detail of Material Related Party Transactions Involving Services

Refer to Schedule Y Part 2.

(3) Detail of Material Related Party Transactions Involving Exchange of Assets and Liabilities

Not Applicable

(4) Detail of Amounts Owed To/From a Related Party

Refer to FN10-D.

D. Amounts Due To/From Related Parties

The amounts reported due (to)/from affiliates are as follows:

Affiliate	2023	2022
Factory Mutual Insurance Company (Parent)	\$ 11,332,179	\$ 1,973,876
Affiliated FM Insurance Company	(5,691)	(4,538)
Total	\$ 11,326,488	\$ 1,969,338

Settlement terms/procedures are 60 days from the end of each quarter.

E. Material Management or Service Contracts and Cost-Sharing Arrangements

The Company receives certain accounting, management and other services from its parent Factory Mutual Insurance Company (NAIC #21482). Management fees are charged as part of a cost sharing agreement approved by the state of domicile.

F. Guarantees or Undertakings

Not Applicable.

G. Nature of the Control Relationship

The Company is owned by FMIC Holdings Inc., a wholly owned subsidiary of Factory Mutual Insurance Company (NAIC #21482).

H. Amount Deducted from the Value of Upstream Intermediate Entity or Ultimate Parent Owned

Not Applicable.

I. Investments in SCA that Exceed 10% of Admitted Assets

Not Applicable.

J. Investments in Impaired SCAs

Not Applicable.

K. Investment in Foreign Insurance Subsidiary

Not Applicable.

L. Investment in Downstream Noninsurance Holding Company

Not Applicable.

M. All SCA Investments

Not Applicable.

N. Investment in Insurance SCAs

Not Applicable.

Not Applicable.

O. SCA or SSAP 48 Entity Loss Tracking

NOTE 11 Debt

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

A. Defined Benefit Plan

The Company has no employees. All services necessary for functioning of the Company are provided by its parent, Factory Mutual Insurance Company (NAIC #21482), pursuant to a management and services agreement, which provides for compensatory expense allocations. Included in the expense allocations were amounts related to non-contributory retirement income plans and postretirement benefit plans sponsored by Factory Mutual Insurance Company. Refer to Note 12G for the amounts and allocation methodology.

B. Investment Policies and Strategies

Not Applicable.

C. Fair Value of Plan Assets

- Not Applicable.
- D. Rate of Return Assumptions

Not Applicable.

E. Defined Contribution Plan

The Company has no employees. All services necessary for functioning of the Company are provided by its parent, Factory Mutual Insurance Company (NAIC #21482), pursuant to a management and services agreement, which provides for compensatory expense allocations. Included in the expense allocations were amounts related to savings plans sponsored by Factory Mutual Insurance Company. Refer to Note 12G for the amounts and allocation methodology.

F. Multiemployer Plans

Not Applicable.

G. Consolidated Holding Company Plans

As stated above in Note 12A and Note 12E, the Company has no employees. All services necessary for functioning of the Company are provided by its parent, Factory Mutual Insurance Company (NAIC #21482), pursuant to a management and services agreement, which provides for compensatory expense allocations. Included in the expense allocations were amounts for defined benefit plans and defined contribution plans sponsored by Factory Mutual Insurance Company, as follows:

The net income allocated to the Company related to defined benefit plans was \$8,454 in 2023 and \$246,006 in 2022.

The net expense allocated to the Company related to defined contribution plans was \$297,000 in 2023 and \$536,000 in 2022.

The net income (expense) incurred by the Company for these plans is based on the percentage allocations per the intercompany pooling agreement discussed below in Note 26. The Company has no legal obligation for benefits under the plans.

H. Postemployment Benefits and Compensated Absences

Not Applicable.

Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable.

I.

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

A. Number of Shares and Par or State Value of Each Class

All of the common stock, 705,000 shares (\$5 par value), is owned by FMIC Holdings, Inc. (Johnston, RI), which is a wholly-owned subsidiary of Factory Mutual Insurance Company, (NAIC #21482) Johnston, RI.

B. Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues

Not Applicable.

C. Dividend Restrictions

The maximum amount of dividends, which can be paid by state of Rhode Island domiciled insurance companies to shareholders without prior approval of the Insurance Commissioner, is subject to restrictions relating to statutory surplus and net income. The maximum dividend payout which may be made without prior approval is the lesser of:

a. 10% of surplus as regards policyholders as of the 31st day of December next preceding, or

b. Net income, not including realized capital gains, for the twelve month period ending the 31st day of December next preceding, but shall not include pro rata distributions of any class of the insurer's own securities.

For 2023, the maximum dividend payout that could have been made without prior approval was \$22,128,569. For 2024, the maximum dividend payout that may be made without prior approval is \$17,480,938.

D. Dates and Amounts of Dividends Paid

Not Applicable.

E. Profits that may be Paid as Ordinary Dividends to Stockholders

Other than the limitations described in item C above, there are no other restrictions placed on the portion of profits that may be paid as ordinary dividends.

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations (continued from preceding page)

F. Restrictions Placed on Unassigned Funds (Surplus)

There are no restrictions on the unassigned funds of the Company other than those described in item C above. Unassigned funds are held for the benefit of the owner.

G. Amount of Advances to Surplus not Repaid

Not Applicable.

H. Amount of Stock Held for Special Purposes

Not Applicable.

I. Reasons for Changes in Balance of Special Surplus Funds from Prior Period

Not Applicable.

- J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$19,634
- K. The Company issued the following surplus debentures or similar obligations:

Not Applicable.

- L. The impact of any restatement due to prior quasi-reorganizations is as follows: Not Applicable.
- M. Effective Date of Quasi-Reorganizations for a Period of Ten Years Following Reorganization

Not Applicable.

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments

- Not Applicable.
- B. Assessments

Not Applicable.

C. Gain Contingencies

Not Applicable.

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

Not Applicable.

E. Product Warranties

Not Applicable.

F. Joint and Several Liabilities

Not Applicable.

G. All Other Contingencies

Lawsuits arise against the Company in the normal course of business. Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company. The Company has no asset that is considered impaired.

NOTE 15 Leases

Not Applicable.

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not Applicable.

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

Not Applicable.

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not Applicable.

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

NOTE 20 Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

The Company categorizes its invested assets that are measured at fair value into the three-level fair value hierarchy or designates certain invested assets as carried at net asset value (NAV). Item 4 provides a discussion of each of these categories.

Description for each class of asset or liability	(Level 1)		(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value						
Bonds	\$	-	\$ -	\$ -	\$ -	\$ -
Preferred Stock	\$	-	\$ -	\$ -	\$ -	\$ -
Money Market Mutual Funds	\$	-	\$ -	\$ -	\$ 41,303,580	\$ 41,303,580
Total assets at fair value/NAV	\$	-	\$ -	\$ -	\$ 41,303,580	\$ 41,303,580

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
b. Liabilities at fair value	-	-	-	-	-
Total liabilities at fair value	\$-	\$-	\$-	\$-	\$-

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy

The Company has no assets measured at fair value in the Level 3 category.

(3) Policies when Transfers Between Levels are Recognized

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. The Company has no assets measured at fair value in the Level 3 category.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

The valuation techniques required by the Fair Value Measurements guidance (SSAP 100R) are based upon observable and unobservable inputs. Observable inputs reflect market data obtained from independent sources, while unobservable inputs reflect market assumptions.

These two types of inputs create the following fair value hierarchy:

- Level 1 Quoted prices for identical instruments in active markets.
- Level 2 Quoted prices for similar instruments in active markets; quoted prices for identical or similar instruments in markets that are not active; and model-derived valuations whose inputs are observable or whose significant value drivers are observable.
- Level 3 Significant inputs to the valuation model are unobservable

The Company retains independent pricing vendors to assist in valuing invested assets when the prices are not available from the SVO.

When available, the Company uses quoted market prices to determine the fair value of investment securities, and they are included in Level 1.

When quoted market prices are unavailable, the Company uses quotes from independent pricing vendors based on recent trading activity and other relevant information, including market interest rate curves, referenced credit spreads and estimated prepayment rates, where applicable. These investments are included in Level 2 and are primarily comprised of fixed income securities which are NAIC rated 3 or below.

In infrequent circumstances, the pricing is not available from the pricing vendor and is based on significant unobservable inputs. In those circumstances, the investment security is classified in Level 3. There are no Level 3 investments at the reporting date.

(5) Derivative Fair Value Disclosures

Not Applicable.

B. Other Fair Value Disclosures

Not Applicable.

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	A	dmitted Assets	(Level 1)	(Level 2)	(Level 3)	Ne	et Asset Value (NAV)	 ot Practicable arrying Value)
Bonds	\$ 256,713,786	\$	279,128,142	\$ -	\$ 256,713,786	\$ -	\$	-	\$ -
Preferred Stock Cash and cash	\$ 2,500,000	\$	2,500,000	\$ -	\$ 2,500,000	\$ -	\$	-	\$ -
equivalents	\$ 68,805,071	\$	68,805,071	\$ 27,501,491	\$ -	\$ -	\$	41,303,580	\$ -

D. Not Practicable to Estimate Fair Value

Not Applicable.

E. NAV Practical Expedient Investments

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

NOTE 21 Other Items

NOTE 22 Events Subsequent

Subsequent events have been considered through February 23, 2024 for these statutory financial statements which are to be issued on February 23, 2024.

There were no events occurring subsequent to the end of the year that merited recognition or disclosure in these statements.

NOTE 23 Reinsurance

Not Applicable.

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not Applicable.

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

A. Change in Incurred Losses and Loss Adjustment Expenses

As a result of changes in estimate of insured events related to prior years, the provision for losses and loss adjustment expenses increased by \$5,000,000. No additional premium or return of premium have been accrued as a result of prior year effects.

B. Information about Significant Changes in Methodologies and Assumptions

Not Applicable

NOTE 26 Intercompany Pooling Arrangements

A. Identification of the Lead Entity and all Affiliated Entities Participating in the Intercompany Pool

Lead Entity and all Affiliated Entities	NAIC Company Code	Pooling Percentage
Factory Mutual Insurance Company (lead insurer)	21482	87.0%
Affiliated FM Insurance Company	10014	12.0%
Appalachian Insurance Company	10316	1.0%

B. Description of Lines and Types of Business Subject to the Pooling Agreement

The parties agreed to pool net premium earned, net losses and loss adjustment expenses incurred, and other underwriting expenses incurred. Each company agreed to cede and/or assume from the others that amount of net premium earned, reported in the NAIC Annual Statement, Page 4, Line 1, less that amount of dividends to policyholders reported on Page 4, Line 17, net losses and loss adjustment expenses incurred included in the NAIC Annual Statement, Page 4 Lines 2 and 3 and other underwriting expenses incurred reported in the NAIC Annual Statement, Page 4, Line 3, and other underwriting expenses incurred reported in the NAIC Annual Statement, Page 4, Line 4, required to bring its share to the agreed upon percentage of the total. Also, premium and losses that are assumed and ceded pursuant to reinsurance treaties between Factory Mutual Insurance Company, and pursuant to an intercompany reinsurance agreement between the Canadian branches of Factory Mutual Insurance Company, are excluded from the intercompany pooling agreement.

The pooling activity is recorded and settled as current accident and occurrence year transactions for Schedule P reporting purposes. The pooling results are considered as written and earned in the current accident year. The pooling results of losses and loss adjustment expenses paid and incurred are reflected in the current occurrence year.

C. Description of Cessions to Non-Affiliated Reinsurance Subject to Pooling Agreement

Reinsurance may be externally ceded on a facultative and/or treaty basis by any pool participant prior to pooling.

Identification of all Pool Members that are Parties to Reinsurance Agreements with Non-Affiliated Reinsurers

Each pool participant has a contractual right of direct recovery from its own external reinsurers.

E. Explanation of Discrepancies Between Entries of Pooled Business

There are no discrepancies between the assumed and ceded reinsurance schedules of the pool participants.

F. Description of Intercompany Sharing

Each pool participant establishes its respective provision for reinsurance in Schedule F and the write-off of uncollectible reinsurance for its own facultative and treaty cessions.

G. Amounts Due To / From Lead Entity and Pool Participants as of December 31:

Name of Insurer	Amounts Receivable	Amounts Payable
Factory Mutual Insurance Company (lead insurer)	\$135,475,325	\$119,061,701
Affiliated FM Insurance Company	\$95,313,782	\$108,201,731
Appalachian Insurance Company	\$23,747,919	\$27,273,594

NOTE 27 Structured Settlements

Not Applicable.

D.

NOTE 28 Health Care Receivables

Not Applicable.

NOTE 29 Participating Policies

Not Applicable.

NOTE 30 Premium Deficiency Reserves

Not Applicable.

NOTE 31 High Deductibles

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

Not Applicable.

C. Sta

NOTE 33 Asbestos/Environmental Reserves

A. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of a liability due to asbestos losses?

The Company has potential exposure involving asbestos, environmental impairment liability, and other types of tort-related claims, which applies only to the casualty and assumed reinsurance business now in runoff. Management has indicated that liabilities are recognized for known claims (including the cost of related litigation) when sufficient information has been developed to indicate the involvement of a specific insurance policy, and the Company's liabilities can be reasonably estimated. Additional reserves for such claims are established to cover further exposures on both known and unasserted claims based on facts currently known and the present state of the law and coverage litigation. The reserves for these types of claims are included in the foregoing loss and loss adjustment expense reserves and are subject to considerable uncertainty, due to the potential severity of the claims and the uncertain legal climate.

(1) Direct

(T) Direct										
		2019		2020		2021		2022		2023
a. Beginning reserves:	\$	55,741,000	\$	55,434,000	\$	54,704,000	\$	55,758,000	\$	55,178,000
b. Incurred losses and loss adjustment										
expense:	\$	(1,000)	\$	1,000	\$	1,587,000	\$	(2,000)	\$	1,000
c. Calendar year payments for losses and loss										
adjustment expenses:	\$	306,000	\$	731,000	\$	533,000	\$	578,000	\$	631,000
d. Ending reserves (a+b-c):	\$	55,434,000	\$	54,704,000	\$	55,758,000	\$	55,178,000	\$	54,548,000
(2) Assumed Reinsurance										
		2019		2020		2021		2022		2023
a. Beginning reserves:	\$	-	\$	-	\$	-	\$	-	\$	-
 Incurred losses and loss adjustment 										
expense:	\$	-	\$	-	\$	-	\$	-	\$	-
c. Calendar year payments for losses and loss	¢		۴		¢		¢		۴	
adjustment expenses:	\$	-	\$	-	\$	-	\$	-	\$	-
d. Ending reserves (a+b-c):	\$	-	\$	-	\$	-	\$	-	\$	-
(3) Net of Ceded Reinsurance										
		2019		2020		2021		2022		2023
a. Beginning reserves:	\$	43,534,000	\$	37,529,000	\$	36,546,000	\$	39,754,000	\$	40,167,000
 Incurred losses and loss adjustment 										
expense:	\$	(5,753,000)	\$	(434,000)	\$	3,692,000	\$	1,188,000	\$	2,139,000
c. Calendar year payments for losses and loss										
adjustment expenses:	\$	252,000	\$	549,000	\$	484,000	\$	775,000	\$	498,000
d. Ending reserves (a+b-c):	\$	37,529,000	\$	36,546,000	\$	39,754,000	\$	40,167,000	\$	41,808,000

B. State the amount of the ending reserves for Bulk + IBNR included in A (Loss & LAE):

(1) Direct Basis:(2) Assumed Reinsurance Basis:(3) Net of Ceded Reinsurance Basis:	\$ \$ \$	41,748,000 - 34,185,000
ate the amount of the ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR):		
(1) Direct Basis:	\$	13,982,000
(2) Assumed Reinsurance Basis:	\$	-
(3) Net of Ceded Reinsurance Basis:	\$	6,907,000

D. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of a liability due to environmental losses?

The Company has potential exposure involving asbestos, environmental impairment liability, and other types of tort-related claims, which applies only to the casualty and assumed reinsurance business now in runoff. Management has indicated that liabilities are recognized for known claims (including the cost of related litigation) when sufficient information has been developed to indicate the involvement of a specific insurance policy, and the Company's liabilities can be reasonably estimated. Additional reserves for such claims are established to cover further exposures on both known and unasserted claims based on facts currently known and the present state of the law and coverage litigation. The reserves for these types of claims are included in the foregoing loss and loss adjustment expense reserves and are subject to considerable uncertainty, due to the potential severity of the claims and the uncertain legal climate.

(1) Direct										
		2019		2020		2021		2022		2023
a. Beginning reserves:	\$	64,821,000	\$	64,760,000	\$	64,711,000	\$	67,391,000	\$	66,767,000
b. Incurred losses and loss adjustment										
expense:	\$	-	\$	-	\$	2,735,000	\$	-	\$	-
 c. Calendar year payments for losses and loss adjustment expenses: 	\$	61,000	\$	49,000	\$	55,000	\$	624.000	\$	49,000
		,		,		,		- ,		,
d. Ending reserves (a+b-c):	\$	64,760,000	\$	64,711,000	\$	67,391,000	\$	66,767,000	\$	66,718,000
(2) Assumed Reinsurance										
		2019		2020		2021		2022		2023
a. Beginning reserves:	\$	-	\$	-	\$	-	\$	-	\$	-
 Incurred losses and loss adjustment 										
expense:	\$	-	\$	-	\$	-	\$	-	\$	-
c. Calendar year payments for losses and loss	•		•		•		•		•	
adjustment expenses:	\$	-	\$	-	\$	-	\$	-	\$	-
d. Ending reserves (a+b-c):	\$	-	\$	-	\$	-	\$	-	\$	-
(3) Net of Ceded Reinsurance										
		2019	_	2020		2021	_	2022	_	2023
a. Beginning reserves:	\$	23,306,000	\$	29,108,000	\$	29,500,000	\$	30,173,000	\$	28,811,000
b. Incurred losses and loss adjustment										
expense:	\$	5,842,000	\$	431,000	\$	707,000	\$	(1,184,000)	\$	(12,042,000)
c. Calendar year payments for losses and loss										
adjustment expenses:	\$	40,000	\$	39,000	\$	34,000	\$	178,000	\$	42,000
d. Ending reserves (a+b-c):	\$	29,108,000	\$	29,500,000	\$	30,173,000	\$	28,811,000	\$	16,727,000

NOTE 33 Asbestos/Environmental Reserves (continued from preceding page)

E. State the amount of the ending reserves for Bulk + IBNR included in D (Loss & LAE):

	(1) Direct Basis:(2) Assumed Reinsurance Basis:(3) Net of Ceded Reinsurance Basis:	\$ \$ \$	66,653,000 - 16,716,000
F. S	state the amount of the ending reserves for loss adjustment expenses included in D (Case, Bulk + IBNR):		
	(1) Direct Basis:(2) Assumed Reinsurance Basis:(3) Net of Ceded Reinsurance Basis:	\$ \$ \$	13,982,000 - 6,907,000
NOTE	34 Subscriber Savings Accounts		

Not Applicable.

NOTE 35 Multiple Peril Crop Insurance

Not Applicable.

NOTE 36 Financial Guaranty Insurance

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company Sys is an insurer?		
	If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.		
1.2	If yes, did the reporting entity register and file with its domiciliary State such regulatory official of the state of domicile of the principal insurer in providing disclosure substantially similar to the standards adopted by t its Model Insurance Holding Company System Regulatory Act and more subject to standards and disclosure requirements substantially similar	n the Holding Company System, a registration statement he National Association of Insurance Commissioners (NAIC) in del regulations pertaining thereto, or is the reporting entity	s[X] No[] N/A[]
1.3	State Regulating?		Rhode Island
1.4	Is the reporting entity publicly traded or a member of a publicly traded g	group?	Yes [] No [X]
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code	issued by the SEC for the entity/group	
2.1	Has any change been made during the year of this statement in the ch reporting entity?		Yes [] No [X]
2.2	If yes, date of change:		
3.1	State as of what date the latest financial examination of the reporting e	entity was made or is being made	12/31/2022
3.2	State the as of date that the latest financial examination report became entity. This date should be the date of the examined balance sheet and		12/31/2022
3.3	State as of what date the latest financial examination report became a domicile or the reporting entity. This is the release date or completion of examination (balance sheet date).	date of the examination report and not the date of the	11/17/2023
3.4	By what department or departments? Rhode Island Division of Insurance		
3.5	Have all financial statement adjustments within the latest financial exact statement filed with Departments?		s[]No[]N/A[X]
3.6	Have all of the recommendations within the latest financial examination	n report been complied with? Ye	s [] No [] N/A [X]
4.1		yees of the reporting entity), receive credit or commissions for or cont measured on direct premiums) of: is of new business?	Yes [] No [X]
4.2	During the period covered by this statement, did any sales/service orgareceive credit or commissions for or control a substantial part (more the premiums) of:	an 20 percent of any major line of business measured on direct	e,
		s of new business?	
5.1	Has the reporting entity been a party to a merger or consolidation durin If yes, complete and file the merger history data file with the NAIC.	ng the period covered by this statement?	Yes [] No [X]
5.2	If yes, provide the name of the entity, NAIC Company Code, and state ceased to exist as a result of the merger or consolidation.	of domicile (use two letter state abbreviation) for any entity that has	
	1 Name of Entity	2 3 NAIC Company Code State of Domicile	
6.1	Has the reporting entity had any Certificates of Authority, licenses or revoked by any governmental entity during the reporting period?		
6.2	If yes, give full information:		
7.1	Does any foreign (non-United States) person or entity directly or indirectly	ctly control 10% or more of the reporting entity?	Yes [] No [X]
7.2	If yes, 7.21 State the percentage of foreign control:		0.0
	 7.21 State the percentage of foreign control; 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if th attorney-in-fact and identify the type of entity(s) (e.g., individual, control of type of entity(s) (e.g., individual, control of type o	e entity is a mutual or reciprocal, the nationality of its manager or	0.0 %
	1 Nationality	2 Type of Entity	
	induolidiity		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE APPALACHIAN INSURANCE COMPANY GENERAL INTERROGATORIES

8.1 8.2	If the response to 8.1 is yes, please identify the name of the DIHC.				Yes []	No	[X]
8.3 8.4		julated Feder	by a fe al Depo	 deral]	No	[X]
	1 2	3	4	5				
	Affiliate Name Location (City, State) F	FRB	000	FD	IC SEC			
					•••••			
8.5	Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board Federal Reserve System or a subsidiary of the depository institution holding company?				Yes [1	No	Г Y 1
8.6		to the			-	-		
9.	What is the name and address of the independent certified public accountant or accounting firm retained to conduct the ann			-				
	Ernst & Young, LLP 200 Clarendon Street, Boston, MA 02116							
10.1	requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substant law or regulation?	ially si	nilar sta	ate	Yes []	No	[X]
10.2	2 If the response to 10.1 is yes, provide information related to this exemption:							
10.3 10.4	allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?	egulatio	on as]	No	[X]
10.4								
10.5	5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?			Yes [X] No [] N/	A []
10.6				-			-	
11.	firm) of the individual providing the statement of actuarial opinion/certification? Kathleen Odomirok, FCAS, MAAA - Principal, Ernst & Young LLP 200 Clarendon Street, Boston, MA 02116	actuaria	al consu	ulting				
12.1					Yes []	No	[X]
	12.11 Name of real estate holding company				0			
	12.12 Number of parcels involved							,
12.2	12.13 Total book/adjusted carrying value If yes, provide explanation				\$			
13.								
13.1								
13.2]	No	[]
13.3	Have there been any changes made to any of the trust indentures during the year?				Yes []	No	[]
13.4] No [-] N/	A []
14.1	similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and relationships;	d profe			Yes [X]	No	[]
	b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity	;						
	 c. Compliance with applicable governmental laws, rules and regulations; d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and 							
	e. Accountability for adherence to the code.							
14.11	1 If the response to 14.1 is No, please explain:							
1/1 2	2 Has the code of ethics for senior managers been amended?				Vac I	1	Na	רעז
	 Has the code of ethics for senior managers been amended? If the response to 14.2 is yes, provide information related to amendment(s). 					1	INO	[\]
14.3 14.31]	No	[X]

.....

15.1

GENERAL INTERROGATORIES

		o 15.1 is yes, indicate the American Bankers Association of Credit and describe the circumstances in which the	on (ABA) Routing Number		
	1 American Bankers Association ABA) Routing	2		3	4
_	Number	Issuing or Confirming Bank Name		That Can Trigger the Letter of Credit	Amount
		BOAR		S	
the	ereof?	or sale of all investments of the reporting entity passed			Yes [X] No [
the	ereof?	ng entity keep a complete permanent record of the proc	-		Yes [X] No [
ра	irt of any of its	g entity an established procedure for disclosure to its be officers, directors, trustees or responsible employees the	hat is in conflict or is likely	to conflict with the official duties of such	Yes [X] No [
Ha	as this statem	ent been prepared using a basis of accounting other the	FINANCIAL	rinciples (e.g., Generally Accepted	Vec [] No [V
		ciples)? aned during the year (inclusive of Separate Accounts, e			
				20.12 To stockholders not officers 20.13 Trustees, supreme or grand (Fraternal Only)	
	otal amount of licy loans):	loans outstanding at the end of year (inclusive of Separ	rate Accounts, exclusive c		
				20.22 To stockholders not officers 20.23 Trustees, supreme or grand (Fraternal Only)	
W ob	ere any asset	s reported in this statement subject to a contractual obli reported in the statement?	igation to transfer to anoth	er party without the liability for such	
lf y	yes, state the	amount thereof at December 31 of the current year:		21.21 Rented from others 21.22 Borrowed from others	
				21.23 Leased from others 21.24 Other	\$
Do gu	bes this staten aranty associa	nent include payments for assessments as described in ation assessments?	the Annual Statement Ins	structions other than guaranty fund or	
	answer is yes:		2	2.21 Amount paid as losses or risk adjustmer 2.22 Amount paid as expenses	nt \$
Dr	hes the reporti	ng entity report any amounts due from parent, subsidia		2.23 Other amounts paid	
lf y	yes, indicate a	ny amounts receivable from parent included in the Pag	e 2 amount:		\$ 11,332
90) days?	r utilize third parties to pay agent commissions in which			
It 1	ine response t	o 24.1 is yes, identify the third-party that pays the agen	is and whether they are a	related party.	
			ls the Third-Party Ag a Related Par		
1		Name of Third-Party	(Yes/No)		

INVESTMENT

25.01	Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in				
	the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)	Yes []	No [)	(]

GENERAL INTERROGATORIES

25.02	If no, give full and complete information, relating thereto JP Morgan Worldwide Securities Services and various state deposit cus	stodial banks hold custody of the securities.					
25.03	For securities lending programs, provide a description of the program in whether collateral is carried on or off-balance sheet. (an alternative is to Not Applicable.	reference Note 17 where this information is also provided)					
25.04	For the reporting entity's securities lending program, report amount of constructions.			\$.			0
25.05	For the reporting entity's securities lending program, report amount of co	ollateral for other programs		\$.			0
25.06	Does your securities lending program require 102% (domestic securities outset of the contract?		Yes []	No [] N/A	[X]
25.07	Does the reporting entity non-admit when the collateral received from the	e counterparty falls below 100%?	Yes []	No [] N/A	[X]
25.08	Does the reporting entity or the reporting entity's securities lending agen conduct securities lending?		Yes []	No [] N/A	[X]
25.09	For the reporting entity's securities lending program state the amount of	the following as of December 31 of the current year:					
	25.092 Total book/adjusted carrying value of reinvested	eported on Schedule DL, Parts 1 and 2 d collateral assets reported on Schedule DL, Parts 1 and 2 the liability page		\$.			0
26.1	Were any of the stocks, bonds or other assets of the reporting entity own control of the reporting entity or has the reporting entity sold or transferre force? (Exclude securities subject to Interrogatory 21.1 and 25.03).	ed any assets subject to a put option contract that is currently in		Ŷ	es [X] No []
26.2	If yes, state the amount thereof at December 31 of the current year:	 26.21 Subject to repurchase agreements	ents e - ledged 1 sets	\$. \$. \$. \$. \$. \$. to \$.			0 0 0 0 0 29,352 0 0
26.3	For category (26.26) provide the following:						
	1 Nature of Restriction	2 Description			3 Amo	ount	
27.1	Does the reporting entity have any hedging transactions reported on Sch	hedule DB?					

27.3	Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?	Yes []	No []
27.4	If the response to 27.3 is YES, does the reporting entity utilize: 27.41 Special accounting provision of SSAP No. 108 27.42 Permitted accounting practice 27.43 Other accounting guidance	Yes [Yes [Yes [-	No [No [No []]]
27.5	 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: The reporting entity has obtained explicit approval from the domiciliary state. Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21. Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount. Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts. 	Yes []	No []
28.1	Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?	Yes []	No [X]
28.2	If yes, state the amount thereof at December 31 of the current year.	\$			0
29.	Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?	Yes [X]	No []

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

1	2
Name of Custodian(s)	Custodian's Address
JP Morgan Worldwide Securities Services	383 Madison Avenue, New York, NY 10179

GENERAL INTERROGATORIES

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

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

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?.....29.04 If yes, give full and complete information relating thereto:

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

Yes [] No [X]

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. 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
Sanjay Chawla, SVP, Chief Investment Officer	I
Scott Anthony, VP, Sector Portfolio Mgr Fixed Income	1

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

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

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

30.2 If yes, complete the following schedule:

1	2	3
		Book/Adjusted
CUSIP #	Name of Mutual Fund	Carrying Value
30.2999 - Total		0

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

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

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

		1	2	3	7		
			-	Excess of Statement			
				over Fair Value (-), or			
		Statement (Admitted)		Fair Value over			
		Value	Fair Value	Statement (+)			
	31.1 Bonds		256,713,786	(22,414,356)		
	31.2 Preferred stocks			0			
	31.3 Totals	281,628,142	259,213,786	(22,414,356)		
					<u> </u>		
4	Describe the sources or methods utilized in determining the fair values Bonds and preferred stocks are priced by the SVO when available. W external pricing source, Interactive Data Pricing and Reference Data L approved by the NAIC under SSAP 97 Paragraph 8b(i).	hen SVO pricing is not a LC. The affiliated owned	I preferred stock is price	ed by the Company and			
	Was the rate used to calculate fair value determined by a broker or cus	stodian for any of the sec	curities in Schedule D?		Yes []	No [X]
2	If the answer to 32.1 is yes, does the reporting entity have a copy of the all brokers or custodians used as a pricing source?]	No []
3	If the answer to 32.2 is no, describe the reporting entity's process for d value for Schedule D:	letermining a reliable pric	ing source for purposes	s of disclosure of fair			
I	Have all the filing requirements of the Purposes and Procedures Manu	al of the NAIC Investmer	nt Analysis Office been	followed?	. Yes [)	(]	No []
	If no, list exceptions:		2				
	 a. Documentation necessary to permit a full credit analysis of the s security is not available. b. Issuer or obligor is current on all contracted interest and principa c. The insurer has an actual expectation of ultimate payment of all Has the reporting entity self-designated 5GI securities? 	Il payments. contracted interest and p	rincipal.		Yes []	No [X]
	By self-designating PLGI securities, the reporting entity is certifying the a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NA	-	-	GI security:		-	-
	 c. The NAIC Designation was derived from the credit rating assigned on a current private letter rating held by the insurer and available d. The reporting entity is not permitted to share this credit rating of 	e for examination by state the PL security with the S	e insurance regulators. SVO.				
	Has the reporting entity self-designated PLGI securities?				. Yes []	No [X
	By assigning FE to a Schedule BA non-registered private fund, the rep FE fund:	porting entity is certifying t	the following elements of	of each self-designated	i		
	 a. The shares were purchased prior to January 1, 2019. b. The reporting entity is holding capital commensurate with the NA c. The security had a public credit rating(s) with annual surveillance January 1, 2019. d. The fund only or predominantly holds bonds in its portfolio. 			as an NRSRO prior to			
	 e. The current reported NAIC Designation was derived from the pu in its legal capacity as an NRSRO. f. The public credit rating(s) with annual surveillance assigned by a 			gned by an NAIC CRP			
	Has the reporting entity assigned FE to Schedule BA non-registered p			ı?	Yes []	No [X
	By rolling/renewing short-term or cash equivalent investments with cor (identified through a code (%) in those investment schedules), the repr a. The investment is a liquid asset that can be terminated by the re b. If the investment is with a nonrelated party or nonaffiliate, then it	orting entity is certifying to porting entity on the curre	o the following: ent maturity date.				
	 discretion of all involved parties. c. If the investment is with a related party or affiliate, then the report which documentation is available for regulator review. d. Short-term and cash equivalent investments that have been removed. 	ting entity has completed	I robust re-underwriting	of the transaction for			
	37.c are reported as long-term investments. Has the reporting entity rolled/renewed short-term or cash equivalent in				[X] No [1	N/A [

GENERAL INTERROGATORIES

38.1	Does the reporting entity directly hold cryptocurrencies?			Yes []	No [X]
38.2	If the response to 38.1 is yes, on what schedule are they reported?						
39.1	Does the reporting entity directly or indirectly accept cryptocurrencies as payments for pre	miums on policies?		Yes []	No [X]
39.2		ly converted to U.S. dollars?]]
39.3	If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of pr				1		
	1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums				
40.1 40.2	OTHER Amount of payments to trade associations, service organizations and statistical or rating b List the name of the organization and the amount paid if any such payment represented 2 service organizations and statistical or rating bureaus during the period covered by this sta	5% or more of the total payme					0
	1 Name		2 unt Paid				
41.1	Amount of payments for legal expenses, if any?	•		\$			0
41.2	List the name of the firm and the amount paid if any such payment represented 25% or m during the period covered by this statement.	ore of the total payments for le	egal expenses				
	1 Name		2 unt Paid				
42.1	Amount of payments for expenditures in connection with matters before legislative bodies	, officers or departments of go	vernment, if any?	\$			0
42.2	List the name of the firm and the amount paid if any such payment represented 25% or m connection with matters before legislative bodies, officers, or departments of government						
	1 Name		2 unt Paid				

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Sup	oplement Insurance in force?	Yes [] No [X]
1.2	If yes, indicate premium earned on U.S. business only		\$0
1.3	1.31 Reason for excluding	are Supplement Insurance Experience Exhibit?	\$0
1.4	Indicate amount of earned premium attributable to Can	nadian and/or Other Alien not included in Item (1.2) above.	\$ 0
1.5	Indicate total incurred claims on all Medicare Suppleme	ent Insurance.	.\$
1.6	Individual policies:	Most current three years:	
		1.61 Total premium earned	•
		1.62 Total incurred claims	
		1.63 Number of covered lives	0
		.	
		All years prior to most current three years	•
		1.64 Total premium earned 1.65 Total incurred claims	
		1.65 Total incurred claims 1.66 Number of covered lives	
1.7	Group policies:	Most current three years:	
1.7		1.71 Total premium earned	¢ 0
		1.72 Total premium earlied	۰
		1.73 Number of covered lives	
		All years prior to most current three years	
		1.74 Total premium earned	\$0
		1.75 Total incurred claims	
		1.76 Number of covered lives	
2.	Health Test:		
	0.4 Describer Numerator	Current Year Prior Year	
	2.0 1.030170 1.010 (2.4/2.0)		
3.1	Did the reporting entity issue participating policies durin	ng the calendar year?	Yes [] No [X]
3.2	If yes, provide the amount of premium written for partic	ipating and/or non-participating policies	
	during the calendar year:	3.21 Participating policies	\$0
		3.22 Non-participating policies	
4.	For mutual reporting Entities and Reciprocal Exchange	is Only:	
4.1	Does the reporting entity issue assessable policies?		Yes [] No []
4.2		s?	
4.3	If assessable policies are issued, what is the extent of the	the contingent liability of the policyholders?	% 0.0
4.4	Total amount of assessments paid or ordered to be paid	id during the year on deposit notes or contingent premiums.	\$0
5.	For Reciprocal Exchanges Only:		
5.1			Yes [] No []
5.2	If yes, is the commission paid:		
		2.21 Out of Attorney's-in-fact compensation	
		5.22 As a direct expense of the exchange] No [] N/A [X]
5.3	What expenses of the Exchange are not paid out of the		
5.4		fulfillment of certain conditions, been deferred?	Yes [] No []
J. 1	. ac any memory in fact compensation, contingent on		
5.5	If yes, give full information		

.....

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss? The Company does not issue Workers' Compensation contracts.					
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process. The Company uses the AIR Touchstone 8.0 software to model our catastrophe exposure in hurricane and earthquake prone areas where we have concentrations of business, except for Puerto Rico hurricane, where Touchstone 7.0 is used.					
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss? In addition to controlling the Company's exposure by loss prevention engineering, deductibles, and limits of liability, we purchase risk and catastrophe reinsurance.					
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes	[]	No [X]
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss. There are certain parts of the Company's catastrophe program in the high excess layers for which a reinstatement clause is not applicable. These parts of the program cover events that management considered and evaluated as less likely to occur, and given the Company's strong surplus position and its ability to purchase additional reinsurance if an event occurs, it was determined that a reinstatement clause is not required for those parts of the program.					
7.1	Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes	[]	No [X]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions:					0
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes	[]	No []
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes	[]	No [X]
8.2	If yes, give full information					
9.1	 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; 					
	 (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. 	Yes	[]	No [X]
9.2	 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. 	Yes	[]	No [X]
9.3	 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved. 					
9.4	Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes	[]	No [X]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.					
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:					
	 (a) The entity does not utilize reinsurance; or,	Yes	[]	No [X]
	supplement; or	Yes	[]	No [X]
10.	attestation supplement. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal	Yes	[]	No [X]
	to that which the original entity would have been required to charge had it retained the risks. Has this been done?] No) []	N/A	[]

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1	Has the reporting entity guaranteed policies issued by any other entity and now in force?	Yes []	No [X]
11.2	If yes, give full information				
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:				
	12.11 Unpaid losses				
	12.12 Unpaid underwriting expenses (including loss adjustment expenses)	\$			0
12.2	Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral and other funds	\$			0
12.3	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?] No []	N/A [X]
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement:				
	12.41 From			0.0	%
	12.42 To			0.0	%
12.5	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves , including unpaid losses under loss deductible features of commercial policies?	Yes []	No [X]
12.6	If yes, state the amount thereof at December 31 of the current year:				
	12.61 Letters of credit	.\$			0
	12.62 Collateral and other funds	\$			0
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	\$		27,119,	,000
13.2	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?	Yes []	No [X]
13.3	State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.				1
14.1	Is the company a cedant in a multiple cedant reinsurance contract?	Yes [X]	No []
14.2	If yes, please describe the method of allocating and recording reinsurance among the cedants: The method of allocating reinsurance with outside reinsurers is based proportionally on each company's share of occurence and specific contract terms with respect to intercompany reinsurance agreements.				
14.3	If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?	Yes []	No [X]
14.4	If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?	Yes [X]	No []
14.5	If the answer to 14.4 is no, please explain:				
15.1	Has the reporting entity guaranteed any financed premium accounts?	Yes []	No [X]
15.2	If yes, give full information				
16.1	Does the reporting entity write any warranty business? If yes, disclose the following information for each of the following types of warranty coverage:	Yes []	No [X]

		1	2	3	4	5
		Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premium
		Incurred	Unpaid	Premium	Unearned	Earned
16.11	Home	0	0	0	0	0
16.12	Products	0	0	0	0	0
16.13	Automobile	0	0	0	0	0
16.14	Other*	0	0	0	0	0
	* Diacloss type of coverage:					

Disclose type of coverage:

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1	Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance?
	Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:
	17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance
	17.12 Unfunded portion of Interrogatory 17.11\$, 700,000
	17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11\$
	17.14 Case reserves portion of Interrogatory 17.11\$
	17.15 Incurred but not reported portion of Interrogatory 17.11
	17.16 Unearned premium portion of Interrogatory 17.11
	17.17 Contingent commission portion of Interrogatory 17.11
18.1	Do you act as a custodian for health savings accounts? Yes [] No [X]
18.2	If yes, please provide the amount of custodial funds held as of the reporting date0
18.3	Do you act as an administrator for health savings accounts?
18.4	If yes, please provide the balance of funds administered as of the reporting date0
19.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?
19.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

FIVE-YEAR HISTORICAL DATA

	Show amounts in whole doll	are only no conte: a	how porcontages to	ono docimal placo	io 176	
	Show amounts in whole doll	1	2	3	4	5
	Cross Bromiums Written (Page & Bart 18 Colo	2023	2022	2021	2020	2019
	Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1.	Liability lines (Lines 11, 16, 17, 18 & 19)	0	0	0	0	(
2.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0		0	0	(
3.	Property and liability combined lines (Lines 3, 4, 5,					
	8, 22 & 27)	0	0	0	0	C
4.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)		0	0	0	0
5.	Nonproportional reinsurance lines (Lines 31, 32 &					
	33)	58,411,112	104,764,212	100,312,755	85,803,159	75,108,152
6.	Total (Line 35)	58,411,112	104,764,212	100,312,755	85,803,159	
	Net Premiums Written (Page 8, Part 1B, Col. 6)					
7.	Liability lines (Lines 11, 16, 17, 18 & 19)	0	0			0
8.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
9.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
10.	All other lines (Lines 6, 10, 12, 14, 15, 22, 24, 29					
	29, 30 & 34)	0	0	0	0	0
11.		50 404 440	104 754 040	100 000 755	05 700 450	75 000 450
	33)	58,401,112	104,754,212	100,302,755	85,793,159	75,098,152
12.	Total (Line 35)	58,401,112	104,754,212	100,302,755	85,793,159	
10	Statement of Income (Page 4) Net underwriting gain (loss) (Line 8)	16 202 290	21 702 742	17.444.766	4,609,195	12,523,675
13	Net investment gain (loss) (Line 8)	10,393,300 6 474 905	21,793,742 6 210 542			6,420,549
14. 15	Total other income (Line 15)					0,420,549 0
15. 16.	Dividends to policyholders (Line 17)	 n				0
10.	Federal and foreign income taxes incurred (Line 19)	5,387,247	5,884,715	4,593,017	1,998,472	3,915,760
17.	Net income (Line 20)	, ,			, ,	
10.	Balance Sheet Lines (Pages 2 and 3)	00,000	22, 120, 303	17,040,008	11,008,000	iJ,U20,404
19.	Total admitted assets excluding protected cell					
13.	business (Page 2, Line 26, Col. 3)					
20.	Premiums and considerations (Page 2, Col. 3)					
	20.1 In course of collection (Line 15.1)			26,318,547	23,520,899	20,262,677
	20.2 Deferred and not yet due (Line 15.2)	0	0	0	0	0
	20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21.	Total liabilities excluding protected cell business					
	(Page 3, Line 26)			, ,		
22.	Losses (Page 3, Line 1)	64,241,496		, ,	, ,	
23.	Loss adjustment expenses (Page 3, Line 3)	9,851,852	10,906,457		, - ,-	
24.	Unearned premiums (Page 3, Line 9)	0	0			0
25.	Capital paid up (Page 3, Lines 30 & 31)					
26.	Surplus as regards policyholders (Page 3, Line 37)	2/1, 192, 31/		231,548,342	214,045,652	
07	Cash Flow (Page 5) Net cash from operations (Line 11)	40 907 776	20 002 750	22 599 091	4 022 208	(5 070 606
27.		40,097,770	20,902,759			
28.	Risk-Based Capital Analysis Total adjusted capital	271 192 317	253 577 366	231 548 342	214 045 652	202 291 759
20.	Authorized control level risk-based capital					
20.	Percentage Distribution of Cash, Cash					
	Equivalents and Invested Assets (Page 2, Col.					
	3) (Line divided by Page 2, Line 12, Col. 3)					
20	x100.0 Bonds (Line 1)	70.7	06 7	66.0	70.0	70 5
30.	Stocks (Lines 2.1 & 2.2)					
31.	Mortgage loans on real estate (Lines 3.1 and 3.2)	0.7		0.0		0.9
32. 33.	Real estate (Lines 4.1, 4.2 & 4.3)					0.0
33. 34.						
JH.	(Line 5)					
35.	Contract loans (Line 6)	0.0	0.0	0.0	0.0	0.0
36.	Derivatives (Line 7)	0.0	0.0	0.0	0.0	0.0
37.	Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.0
38.	Receivables for securities (Line 9)	0.0	0.0	0.0	0.4	0.0
39.	Convition landing rain (acted collateral accets (Line					
40.	Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
41.	Cash, cash equivalents and invested assets (Line 12)	100.0	100 0	100.0	100 0	100 0
	12) Investments in Parent, Subsidiaries and					
	Affiliates					
42.	Affiliated hands (Cabadula D. Summany Line 12					
	Col. 1)	0	0	0	0	0
43.	Affiliated preferred stocks (Schedule D, Summary,	2 500 000	0 500 000	0 500 000	0 500 000	0 500 000
	Line 18, Col. 1)					
44.	Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	n	0	n	0	0
45.	Affiliated abort term investments (subtatals included					
.0.	in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
46.	Affiliated mortgage loans on real estate	0	0	0	0	0
47.	All other affiliated	0	0	0	0	0
48.	Total of above Lines 42 to 47	2,500,000				
49.	Total laws stars and in Depart in shuded in Lines. 40 to					
	47 above	0	0	0	0	0
50.	Percentage of investments in parent, subsidiaries					
	and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37					

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE APPALACHIAN INSURANCE COMPANY FIVE-YEAR HISTORICAL DATA

		1 2023	2 2022	3 2021	4 2020	5 2019
	Capital and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)	95,796	(80,285)	20,553	(18,270)	5,69
52.	Dividends to stockholders (Line 35)	0	0	0	0	
53.	Change in surplus as regards policyholders for the year (Line 38)	17,614,951	22,029,024	17,502,690	11,753,893	14,916,10
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	Liability lines (Lines 11, 16, 17, 18 & 19)	219, 189	711,741	172,475		225,1
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	
57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	
58.	Nonproportional reinsurance lines (Lines 31, 32 & 33)	17,681,298	52,729,261	52,595,246	54,165,500	39,445,8
59.	Total (Line 35)	17,900,487	53,441,002	52,767,721	54 , 484 , 209	
	Net Losses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11, 16, 17, 18 & 19)					
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	
53.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	
64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)		52,729,261	52,595,246	54,165,500	39,445,8
65.	Total (Line 35)	17,756,098	53, 185, 256	52,677,669	54,292,806	
	Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
6.	Premiums earned (Line 1)					
67.	Losses incurred (Line 2)				63.1	
68.	Loss expenses incurred (Line 3)					
6 9.	Other underwriting expenses incurred (Line 4)					
70.	Net underwriting gain (loss) (Line 8)	28.1	20.8	17.4	5.4	16
	Other Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)			27.1	27.4	
72.	Losses and loss expenses incurred to premiums					
	earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	40.7	52.9	55.5	67.2	54
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	21.5	41.3	43.3	40.1	
	One Year Loss Development (\$000 omitted)					
74.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)	5 000	1		(2)	
75.	P - Part 2 - Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)					
	Two Year Loss Development (\$000 omitted)					
76.	Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	5.001		(4)		
77.						
	divided by Page 4, Line 21, Col. 2 x 100.0)	2.2	0.0	0.0	0.0	0

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES SCHEDULE P - PART 1 - SUMMARY

(\$000 OMITTED)

		Pr	emiums Earn	ed		()	Los	, s and Loss Ex	pense Pavme	ents			12
Ye	ears in	1	2	3			Defense		Adjusting		10	11	
v	Vhich				Loss Pa	yments	Containmer	t Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9]	Total Net	Claims
-	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	xxx	xxx	219	144	880	0	206	0	0	1, 161	xxx
2.	2014	77,503	13,865	63,638	20,963	0	0	969	0	0	0	19,994	XXX
3.	2015	80,582	15,402	65 , 180	31,481	0	0	7,755	0	0	0	23,726	XXX
4.	2016	81,914	15,790	66 , 124	39,909	0	2,926	0	0	0	0	42,835	XXX
5.	2017	86,660	15,894	70,766	73,587	0	2,992	0	0	0	0	76,579	XXX
6.	2018	69,128	53	69,075	73,079	0	2,707	0	0	0	0	75,786	XXX
7.	2019	75 , 108	10	75,098	39,446	0	1,080	0	0	0	0	40,526	XXX
8.	2020	85,803	10	85,793	54, 166	0	3,459	0	0	0	0	57,625	XXX
9.	2021	100,313	10	100 , 303	52,595	0	0	1,438	0	0	0	51, 157	XXX
10.	2022	104 , 764	10	104 , 754	52,729	0	2,657	0	0	0	0	55,386	XXX
11.	2023	58,411	10	58,401	17,681	0	1,042	0	0	0	0	18,723	XXX
12.	Totals	XXX	XXX	XXX	455,855	144	17,743	10,162	206	0	0	463,498	XXX

												23	24	25
		Cono	Losses Basis		BNR	Defens Case	e and Cost C		Unpaid + IBNR		and Other baid			
		13	14	15	16	17	18	19	20	21	22	-		Number
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	of Claims Outstand- ing Direct and Assumed
1.	Prior	21,819	9,925	89,963	37,616	0	0	14,886	8,879	3,845	0	0	74,093	xxx
2.	2014	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3.	2015	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4.	2016	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5.	2017	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6.	2018	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7.	2019	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8.	2020	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9.	2021	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10.	2022	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11.	2023	0	0	0	0	0	0	0	0	0	0	0	0	XXX
12.	Totals	21,819	9,925	89,963	37,616	0	0	14,886	8,879	3,845	0	0	74,093	XXX

			Total			oss Expense F				34		nce Sheet
			d Loss Expense		1	ed /Premiums E		Nontabula				fter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct			Direct					Company Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
		Assumed	Ceueu	INCL	Assumed	Cedeu	INCL	L055	Lypense	Fercentage	Unpaiu	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	64,241	9,852
2.	2014	20,963	969	19,994	27.0	7.0	31.4	0	0	1.0	0	0
3.	2015	31,481	7,755	23,726		50.4		0	0	1.0	0	0
4.	2016	42,835	0	42,835	52.3	0.0	64.8	0	0	1.0	0	0
5.	2017	76,579	0	76,579		0.0	108.2	0	0	1.0	0	0
6.	2018	75,786	0	75,786	109.6	0.0	109.7	0	0	1.0	0	0
7.	2019	40,526	0	40,526	54.0	0.0	54.0	0	0	1.0	0	0
8.	2020	57,625	0	57,625	67.2	0.0	67.2	0	0	1.0	0	0
9.	2021	52,595		51,157	52.4	14,380.0	51.0	0	0	1.0	0	0
10.	2022	55,386	0	55,386	52.9	0.0	52.9	0	0	1.0	0	0
11.	2023	18,723	0	18,723	32.1	0.0	32.1	0	0	1.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	64,241	9,852

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE APPALACHIAN INSURANCE COMPANY SCHEDULE P - PART 2 - SUMMARY

				0011					J 141 141/				
Ye	ears in	INCURRED	NET LOSSES	AND DEFE	NSE AND CO	ST CONTAIN	IMENT EXPE	NSES REPO	RTED AT YE	AR END (\$00	0 OMITTED)	DEVELC	PMENT
Whic	h Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were	Incurred	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	One Year	Two Year
1.	Prior	69,822	83,821	77 , 120	77, 122	77, 121	77 , 122	77 , 120	77, 118	77, 119	82,119	5,000	5,001
2.	2014	19,994	19,994	19,994	19,994	19,994	19,994	19,994	19,994	19,994	19,994	0	0
3.	2015	XXX	23,726	23,726	23,726	23,726	23,726	23,726	23,726	23,726	23,726	0	0
4.	2016	XXX	XXX	42,835	42,835	42,835	42,835	42,835	42,835	42,835	42,835	0	0
5.	2017	XXX	XXX	XXX	76,579	76,579	76,579	76,579	76,579	76,579	76,579	0	0
6.	2018	XXX	XXX	XXX	XXX	75,786	75,786	75,786	75,786	75,786	75,786	0	0
7.	2019	XXX	XXX	XXX	XXX	XXX	40,526	40,526	40,526	40,526	40,526	0	0
8.	2020	XXX	XXX	XXX	XXX	XXX	XXX	57,625	57,625	57,625	57,625	0	0
9.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51, 157	51, 157	51, 157	0	0
10.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55 , 386	55,386	0	XXX
11.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,723	XXX	XXX
12. Totals 5,000													5,001

SCHEDULE P - PART 3 - SUMMARY

				• • • • •									
		CUMUL	ATIVE PAID I	NET LOSSES	S AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11	12
						(\$000 OI	MITTED)					Number of	Number of
Ye	ears in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
V	Vhich											Closed	Closed
Lo	osses											With	Without
V	Vere											Loss	Loss
Inc	curred	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	Payment	Payment
1.	Prior	000	2,464	5,876	7, 132	8,907	9,208	9,564	9,865	10,916	11,871	xxx	xxx
2.	2014	19,994	19,994	19,994	19,994	19,994	19,994	19,994	19,994	19,994	19,994	XXX	xxx
3.	2015	xxx	23,726	23,726	23,726	23,726	23,726	23,726	23,726	23,726	23,726	xxx	xxx
4.	2016	XXX	XXX	42,835	42,835	42,835	42,835	42,835	42,835	42,835	42,835	XXX	xxx
5.	2017	XXX	XXX	xxx	76,579	76,579	76,579	76,579	76,579	76,579	76,579	XXX	xxx
6.	2018	xxx	XXX	xxx	xxx	75,786	75,786	75,786	75,786	75,786	75,786	xxx	xxx
7.	2019	xxx	XXX	xxx	xxx	xxx	40,526	40,526	40,526	40,526	40,526	xxx	xxx
8.	2020	xxx	XXX	xxx	xxx	xxx	xxx	57,625	57,625	57,625	57,625	xxx	xxx
9.	2021	xxx	XXX	xxx	xxx	xxx	xxx	xxx	51, 157	51, 157	51,157	xxx	xxx
10.	2022	xxx	XXX	xxx	xxx	xxx	xxx	xxx	xxx	55,386	55,386	xxx	XXX
11.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,723	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

		BULK AND I	BNR RESERVE	S ON NET LOSS	SES AND DEFE	NSE AND COS	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
	ears in	1	2	3	4	5	6	7	8	9	10
	Vhich										
	osses Were										
	curred	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1.	Prior	61,788	70,687	63, 172	62,029	60,687	56,763	56,537	55,235	54,293	58,354
2.	2014	0	0	0	0	0	0	0	0	0	0
3.	2015	xxx	0	0	0	0	0	0	0	0	0
4.	2016	xxx	XXX	0	0	0	0	0	0	0	0
5.	2017	xxx	XXX	XXX	0	0	0	0	0	0	0
6.	2018	xxx	XXX	xxx	XXX	0	0	0	0	0	0
7.	2019	xxx	XXX	xxx	XXX	XXX	0	0	0	0	0
8.	2020	xxx	XXX	xxx	XXX	XXX	xxx	0	0	0	0
9.	2021	xxx	XXX	xxx	XXX	XXX	xxx	xxx	0	0	0
10.	2022	xxx	XXX	xxx	XXX	XXX	xxx	xxx	xxx	0	0
11.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE APPALACHIAN INSURANCE COMPANY **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

					y States and ⁻					
		1	Gross Premiu Policy and Men Less Return P Premiums on	ms, Including ubership Fees, remiums and	4 Dividends	5	6	7	8	9 Direct Premiums Written for
			Tak		Paid or	Direct			Finance and	Federal
		Active	2 Direct	3 Direct	Credited to Policyholders	Losses Paid	Direct	Direct	Service Charges Not	Purchasing Groups
		Status	Premiums	Premiums	on Direct	(Deducting	Losses	Losses	Included in	(Included in
1	States, Etc. Alabama AL	(a) E	Written 0	Earned 0	Business 0	Salvage) 0	Incurred 0	Unpaid 0	Premiums 0	Column 2)
1. 2.	Alabama AL Alaska AK	E F	0	0	0	0	0	0	0	0
3.	Arizona AZ	E	0	0	0	0	0	0	0	0
4.	Arkansas AR	E	0	0	0	0	0	0	0	0
5.	California CA	E	0	0	0	152,535	1,625,138	45,713,892	0	0
6.	ColoradoCO	E	0	0	0	0	0	0	0	0
7. 8.	Connecticut CT Delaware DE	E E	0	0	0	0	0	0	0	0
9.	District of Columbia DC	E	0	0	0	0	0	0	0	0
10.	Florida FL	E	0	0	0	0			0	0
11.	GeorgiaGA	E	0	0	0	0	(962,220)	27,995,444	0	0
12.	HawaiiHI	E	0	0	0	0	0	0	0	0
13.	Idaho ID	E	0	0	0	0	0	0	0	0
14. 15.	Illinois IL Indiana IN	E E	0	0	0	0	51	841 0	0	0
15. 16.	lowaIA	E F	U	U	U	U	U	0 0	0 0	0 0
17.	Kansas KS	E	0	0	0	0	0	0	0	0
18.	KentuckyKY	E	0	0	0	0	0	0	0	0
19.	LouisianaLA	E	0	0	0	0	23		0	0
20.	Maine ME	E	0	0	0	0	0	0	0	0
21. 22.	Maryland MD Massachusetts MA	E c	U	0	0	0	0 •	0 ^	0	0
22.	Michigan MA	E F	0	0	0	0	1 0		0	0
24.	Minnesota MN	E	0	0	0	0	0	6	0	0
25.	Mississippi MS	E	0	0	0	0	1	4	0	0
26.	Missouri MO	E	0	0	0	0	(577,321)		0	0
27.	Montana MT	E	0	0	0	0	0	0	0	0
28. 29.	Nebraska NE Nevada NV	E	0	0	0	0	0	0	0	0
29. 30.	NevadaNV New HampshireNH	E F	0	0	0	0	0	0	0	0
31.	New JerseyNJ	E	0	0	0	0	0	0	0	0
32.	New Mexico NM	E	0	0	0	0	0	0	0	0
33.	New YorkNY	E	0	0	0	5,503	1,262,604		0	0
34.	North Carolina NC	E	0	0	0	0	0	0	0	0
35. 36.	North Dakota ND Ohio OH	E E	0	0	0	0	0	0	0	0
	OklahomaOK	E F	0	0	0	0	0	0	0	0
38.	Oregon OR	E	0	0	0	0	0	0	0	0
39.	Pennsylvania PA	E	0	0	0	0	(96,241)		0	0
40.	Rhode Island RI	L		0	0	57,450	3,093,509	3,038,380	0	0
41.	South CarolinaSC	E		0	0	0	0	0	0	0
42. 43.	South Dakota SD TennesseeTN	E E	0 0	0 0	0	0	0	0	0 0	0
43. 44.	TexasTX	E E	0	0	0 0	0 0	0 (322)	0 10,291	0	0 0
45.	UtahUT	E	0	0	0	0	0	0	0	0
46.	VermontVT	E	0	0	0	0	0	0	0	0
47.	Virginia VA	E		0	0	0	0	0	0	0
48.	Washington WA	E	0	0	0	3,701	626,441		0	0
49. 50.	West Virginia WV Wisconsin WI	E E	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0 ^
	WyomingWY	E	0	0	0	0 0	0	0	0	0 0
52.	American SamoaAS	N		0	0	0	0	0	0	0
53.	GuamGU	E	0	0	0	0	0	0	0	0
54.	Puerto RicoPR	E	0	0	0	0	0	0	0	0
55.	U.S. Virgin IslandsVI	E	0	0	0	0	0	0	0	0
56.	Northern Mariana Islands MP	N	0	0	0	0	0	0	0	0
57.	CanadaCAN		0	0	0	0	0	0	0	0
58.	Aggregate other alien . OT	XXX	0	0	0	0	0	0	0	0
59.	Totals	XXX	0	0	0	219,189	5,000,000	111,780,940	0	0
50004	DETAILS OF WRITE-INS									
58001. 58002.		XXX								
58002.		XXX XXX								
	Summary of remaining write-ins for Line 58 from									-
58999.	overflow page Totals (Lines 58001 through 58003 plus 58998)(Line 58		0	0	0	0	0	0	0	0
	above)	XXX	0	0	0	0	0	0	0	0

(a) Active Status Counts:

 1 L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.
 1 4. Q - Qualified - Qualified or accredited reinsurer.

 2. R - Registered - Non-domiciled RRGs.
 0 5. D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities

 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state
 authorized to write surplus lines in the state of domicile.

R - Registered - Non-domiciled RRGs.
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI).

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(b) Explanation of basis of allocation of premiums by states, etc. Not applicable.





Organizational Chart Page 2 of 2

