

**QUARTERLY STATEMENT**

**OF THE**

**DELTA DENTAL**  
**OF RHODE ISLAND**  
of **PROVIDENCE**  
in the state of **RHODE ISLAND**

**TO THE**

**Insurance Department**

**OF THE**

**STATE OF**

**STATE OF RHODE ISLAND**

**FOR THE QUARTER ENDED**

**September 30, 2025**

**HEALTH**

**2025**



55301202520100103

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2025  
OF THE CONDITION AND AFFAIRS OF THE

DELTA DENTAL OF RHODE ISLAND

|                                       |   |                |                   |  |                      |            |
|---------------------------------------|---|----------------|-------------------|--|----------------------|------------|
| NAIC Group Code                       | 1571  | 1571           | NAIC Company Code | 55301  | Employer's ID Number | 05-0296998 |
|                                       | (Current Period)  | (Prior Period) |                   |  |                      |            |
| Organized under the Laws of           | RHODE ISLAND  |                |                   | State of Domicile or Port of Entry   |                      |            |
| Country of Domicile                   | USA   |                |                   | RI   |                      |            |
| Licensed as business type:            | Life, Accident and Health [ ] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [ ] |                |                   |  |                      |            |
|                                       | Dental Service Corporation [ X ] Vision Service Corporation [ ] Health Maintenance Organization [ ]     |                |                   |  |                      |            |
|                                       | Other [ ] Is HMO Federally Qualified? Yes [ ] No [ ]  |                |                   |  |                      |            |
| Incorporated/Organized                | October 22, 1959  |                |                   | Commenced Business   |                      |            |
| Statutory Home Office                 | 10 CHARLES STREET   |                |                   | PROVIDENCE, RI US 02904  |                      |            |
|                                       | (Street and Number)   |                |                   | (City or Town, State, Country and Zip Code)                                |                      |            |
| Main Administrative Office            | 10 CHARLES STREET   |                |                   | 401-752-6000   |                      |            |
|                                       | PROVIDENCE, RI US 02904   |                |                   | (Area Code) (Telephone Number)   |                      |            |
|                                       | (City or Town, State, Country and Zip Code)   |                |                   |  |                      |            |
| Mail Address                          | 10 CHARLES STREET   |                |                   | PROVIDENCE, RI US 02904  |                      |            |
|                                       | (Street and Number or P.O. Box)   |                |                   | (City or Town, State, Country and Zip Code)                                |                      |            |
| Primary Location of Books and Records | 10 CHARLES STREET   |                |                   | PROVIDENCE, RI US 02904 401-752-6000                                       |                      |            |
|                                       | (Street and Number)   |                |                   | (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) |                      |            |
| Internet Website Address              | deltadentalri.com   |                |                   |  |                      |            |
| Statutory Statement Contact           | DUANE EASTER  |                |                   | 401-752-6000   |                      |            |
|                                       | (Name)  |                |                   | (Area Code) (Telephone Number) (Extension)                                 |                      |            |
|                                       | deaster@deltadentalri.com   |                |                   | 401-457-7260   |                      |            |
|                                       | (E-Mail Address)  |                |                   | (Fax Number)   |                      |            |

OFFICERS

|    | Name              | Title               |
|----|-------------------|---------------------|
| 1. | JOSEPH R. PERRONI | PRESIDENT           |
| 2. | ELLEN HENDRIX #   | ASSISTANT SECRETARY |
| 3. | SEAN NEWTH #      | TREASURER           |

VICE-PRESIDENTS

| Name           | Title                      | Name                | Title                               |
|----------------|----------------------------|---------------------|-------------------------------------|
| SEAN NEWTH #   | Sr. VP & CFO               | THOMAS CHASE        | Sr. VP - CHIEF OPERATING OFFICER    |
| BLAINE CARROLL | VP - STRATEGIC INITIATIVES | MICHELLE MUSCATELLO | VP - COMMUN ICATIONS & EXTERNAL A   |
| JAMES KINNEY   | VP - SALES                 | ELLEN HENDRIX       | VP - UNDERWRITING & INS RISK SERVIC |
|                |                            |                     |                                     |
|                |                            |                     |                                     |
|                |                            |                     |                                     |

DIRECTORS OR TRUSTEES

|                     |                   |                    |                    |
|---------------------|-------------------|--------------------|--------------------|
| CARRIE BRIDGES #    | ELIZABETH CATUCCI | PATRICK CROWLEY #  | THOMAS P. ENRIGHT  |
| DIANA M. FRANCHITTO | CHRISTINE GADBOIS | PETER C. HAYES     | STEVEN J. ISSA     |
| JUNIOR JABBIE       | COLIN P. KANE     | HEATHER A. PROVINO | JOHN T. RUGGIERI # |
| MICHAEL F. SABITONI | EDWIN J. SANTOS   | MARK A. SHAW       |                    |
|                     |                   |                    |                    |
|                     |                   |                    |                    |
|                     |                   |                    |                    |
|                     |                   |                    |                    |
|                     |                   |                    |                    |
|                     |                   |                    |                    |
|                     |                   |                    |                    |

State of RHODE ISLAND

County of PROVIDENCE ss

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

|                   |                     |                |
|-------------------|---------------------|----------------|
| (Signature)       | (Signature)         | (Signature)    |
| JOSEPH R. PERRONI | ELLEN HENDRIX       | SEAN NEWTH     |
| (Printed Name)    | (Printed Name)      | (Printed Name) |
| 1.                | 2.                  | 3.             |
| PRESIDENT         | ASSISTANT SECRETARY | TREASURER      |
| (Title)           | (Title)             | (Title)        |

|  |                                |                               |
|--|--------------------------------|-------------------------------|
| Subscribed and sworn to before me this | a. Is this an original filing? | [ X ] Yes [ ] No              |
| 4th day of NOVEMBER, 2025              | b. If no:                      | 1. State the amendment number |
|  |                                | 2. Date filed                 |
|  |                                | 3. Number of pages attached   |

KELLY COTOIA  
My commission expires 8/7/29

ASSETS

|   | Current Statement Date |                                |  | 4<br><br>December 31<br>Prior Year Net<br>Admitted Assets |
|---|------------------------|--------------------------------|--|---|
|   | 1<br><br>Assets        | 2<br><br>Nonadmitted<br>Assets | 3<br><br>Net Admitted<br>Assets<br>(Cols. 1 - 2) |   |
| 1. Bonds  | 35,946,919             |                                | 35,946,919                                       | 47,554,624  |
| 2. Stocks:  |                        |                                |  |   |
| 2.1 Preferred stocks  |                        |                                |  |   |
| 2.2 Common stocks   | 115,831,445            |                                | 115,831,445                                      | 110,699,226   |
| 3. Mortgage loans on real estate:   |                        |                                |  |   |
| 3.1 First liens   |                        |                                |  |   |
| 3.2 Other than first liens  |                        |                                |  |   |
| 4. Real estate:   |                        |                                |  |   |
| 4.1 Properties occupied by the company (less \$ 0 encumbrances)   |                        |                                |  |   |
| 4.2 Properties held for the production of income (less \$ 0 encumbrances)   |                        |                                |  |   |
| 4.3 Properties held for sale (less \$ 0 encumbrances)   |                        |                                |  |   |
| 5. Cash (\$ (586,015)), cash equivalents (\$ 6,088,717), and short-term investments (\$ 0)  | 5,502,701              |                                | 5,502,701  | 4,486,636   |
| 6. Contract loans (including \$ 0 premium notes)  |                        |                                |  |   |
| 7. Derivatives  |                        |                                |  |   |
| 8. Other invested assets  | 12,088,748             |                                | 12,088,748                                       | 11,717,147  |
| 9. Receivables for securities   |                        |                                |  |   |
| 10. Securities lending reinvested collateral assets   |                        |                                |  |   |
| 11. Aggregate write-ins for invested assets   |                        |                                |  |   |
| 12. Subtotals, cash and invested assets (Lines 1 to 11)   | 169,369,813            |                                | 169,369,813                                      | 174,457,633   |
| 13. Title plants less \$ 0 charged off (for Title insurers only)  |                        |                                |  |   |
| 14. Investment income due and accrued   | 356,753                |                                | 356,753  | 436,873   |
| 15. Premiums and considerations:  |                        |                                |  |   |
| 15.1 Uncollected premiums and agents' balances in the course of collection  | 1,915,946              | 225,286                        | 1,690,660  | 977,313   |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums) |                        |                                |  |   |
| 15.3 Accrued retrospective premiums (\$ 0) and contracts subject to redetermination (\$ 0)  |                        |                                |  |   |
| 16. Reinsurance:  |                        |                                |  |   |
| 16.1 Amounts recoverable from reinsurers  |                        |                                |  |   |
| 16.2 Funds held by or deposited with reinsured companies  |                        |                                |  |   |
| 16.3 Other amounts receivable under reinsurance contracts   |                        |                                |  |   |
| 17. Amounts receivable relating to uninsured plans  | 2,681,777              | 65,512                         | 2,616,265  | 2,796,207   |
| 18.1 Current federal and foreign income tax recoverable and interest thereon  |                        |                                |  |   |
| 18.2 Net deferred tax asset   |                        |                                |  |   |
| 19. Guaranty funds receivable or on deposit   |                        |                                |  |   |
| 20. Electronic data processing equipment and software   | 13,590,567             | 13,517,844                     | 72,723   | 95,780  |
| 21. Furniture and equipment, including health care delivery assets (\$ 0)   | 224,106                | 224,106                        |  |   |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates  |                        |                                |  |   |
| 23. Receivables from parent, subsidiaries and affiliates  | 2,641,545              | 2,017,366                      | 624,179  | 245,162   |
| 24. Health care (\$ 0) and other amounts receivable   |                        |                                |  |   |
| 25. Aggregate write-ins for other-than-invested assets  | 4,708,609              | 731,794                        | 3,976,815  | 3,040,810   |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)                              | 195,489,116            | 16,781,908                     | 178,707,208                                      | 182,049,778   |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts   |                        |                                |  |   |
| 28. Total (Lines 26 and 27)   | 195,489,116            | 16,781,908                     | 178,707,208                                      | 182,049,778   |

| DETAILS OF WRITE-IN LINES   |           |         |           |           |
|---|-----------|---------|-----------|-----------|
| 1101.   |           |         |           |           |
| 1102.   |           |         |           |           |
| 1103.   |           |         |           |           |
| 1198. Summary of remaining write-ins for Line 11 from overflow page |           |         |           |           |
| 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)    |           |         |           |           |
| 2501. STATE TAX CREDIT  | 3,976,352 |         | 3,976,352 | 3,040,347 |
| 2502. PREPAID EXPENSES AND OTHER ACCTS. REC.                        | 731,794   | 731,794 |           |           |
| 2503. NET STATE AND FEDERAL TAX ADVANCES                            | 463       |         | 463       | 463       |
| 2598. Summary of remaining write-ins for Line 25 from overflow page |           |         |           |           |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)    | 4,708,609 | 731,794 | 3,976,815 | 3,040,810 |

NONE

LIABILITIES, CAPITAL AND SURPLUS

|  | Current Period |                |             | Prior Year  |
|--|----------------|----------------|-------------|-------------|
|  | 1<br>Covered   | 2<br>Uncovered | 3<br>Total  | 4<br>Total  |
| 1. Claims unpaid (less \$ 0 reinsurance ceded)   | 1,745,820      |                | 1,745,820   | 1,623,570   |
| 2. Accrued medical incentive pool and bonus amounts  |                |                |             |             |
| 3. Unpaid claims adjustment expenses   | 77,777         |                | 77,777      | 99,157      |
| 4. Aggregate health policy reserves, including the liability of \$ 0 for medical loss ratio rebate per the Public Health Service Act     |                |                |             |             |
| 5. Aggregate life policy reserves  |                |                |             |             |
| 6. Property/casualty unearned premium reserve  |                |                |             |             |
| 7. Aggregate health claim reserves   |                |                |             |             |
| 8. Premiums received in advance  | 1,810,674      |                | 1,810,674   | 1,546,321   |
| 9. General expenses due or accrued   | 9,976,143      |                | 9,976,143   | 10,605,165  |
| 10.1 Current federal and foreign income tax payable and interest thereon (including \$ 0 on realized gains (losses))                     |                |                |             |             |
| 10.2 Net deferred tax liability  |                |                |             |             |
| 11. Ceded reinsurance premiums payable   |                |                |             |             |
| 12. Amounts withheld or retained for the account of others   |                |                |             |             |
| 13. Remittances and items not allocated  |                |                |             |             |
| 14. Borrowed money (including \$ 0 current) and interest thereon \$ 0 (including \$ 0 current)   |                |                |             |             |
| 15. Amounts due to parent, subsidiaries and affiliates   | 693,219        |                | 693,219     | 615,313     |
| 16. Derivatives  |                |                |             |             |
| 17. Payable for securities   |                |                |             |             |
| 18. Payable for securities lending   |                |                |             |             |
| 19. Funds held under reinsurance treaties (with \$ 0 authorized reinsurers, \$ 0 unauthorized reinsurers, and \$ 0 certified reinsurers) |                |                |             |             |
| 20. Reinsurance in unauthorized and certified (\$ 0) companies   |                |                |             |             |
| 21. Net adjustments in assets and liabilities due to foreign exchange rates  |                |                |             |             |
| 22. Liability for amounts held under uninsured plans   | 601,814        |                | 601,814     | 511,033     |
| 23. Aggregate write-ins for other liabilities (including \$ 0 current)   | 475,246        |                | 475,246     | 468,546     |
| 24. Total liabilities (Lines 1 to 23)  | 15,380,693     |                | 15,380,693  | 15,469,105  |
| 25. Aggregate write-ins for special surplus funds  | X X X          | X X X          |             |             |
| 26. Common capital stock   | X X X          | X X X          |             |             |
| 27. Preferred capital stock  | X X X          | X X X          |             |             |
| 28. Gross paid in and contributed surplus  | X X X          | X X X          |             |             |
| 29. Surplus notes  | X X X          | X X X          |             |             |
| 30. Aggregate write-ins for other than special surplus funds   | X X X          | X X X          | 87,740,481  | 87,678,036  |
| 31. Unassigned funds (surplus)   | X X X          | X X X          | 75,586,034  | 78,902,637  |
| 32. Less treasury stock, at cost:  |                |                |             |             |
| 32.1 0 shares common (value included in Line 26 \$ 0)  | X X X          | X X X          |             |             |
| 32.2 0 shares preferred (value included in Line 27 \$ 0)   | X X X          | X X X          |             |             |
| 33. Total capital and surplus (Lines 25 to 31 minus Line 32)   | X X X          | X X X          | 163,326,515 | 166,580,673 |
| 34. Total liabilities, capital and surplus (Lines 24 and 33)   | X X X          | X X X          | 178,707,208 | 182,049,778 |

| DETAILS OF WRITE-IN LINES   |  |         |       |            |            |
|---|--|---------|-------|------------|------------|
| 2301. ADVANCE DEPOSITS  |  | 475,246 |       | 475,246    | 468,546    |
| 2302.   |  |         |       |            |            |
| 2303.   |  |         |       |            |            |
| 2398. Summary of remaining write-ins for Line 23 from overflow page |  |         |       |            |            |
| 2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)    |  | 475,246 |       | 475,246    | 468,546    |
| 2501. RESTRICTED RESERVES ACA ASSESSMENT                            |  | X X X   | X X X |            |            |
| 2502.   |  | X X X   | X X X |            |            |
| 2503.   |  | X X X   | X X X |            |            |
| 2598. Summary of remaining write-ins for Line 25 from overflow page |  | X X X   | X X X |            |            |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)    |  | X X X   | X X X |            |            |
| 3001. RESERVES FROM WHOLLY OWNED SUBSIDIARIES                       |  | X X X   | X X X | 87,740,481 | 87,678,036 |
| 3002.   |  | X X X   | X X X |            |            |
| 3003.   |  | X X X   | X X X |            |            |
| 3098. Summary of remaining write-ins for Line 30 from overflow page |  | X X X   | X X X |            |            |
| 3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)    |  | X X X   | X X X | 87,740,481 | 87,678,036 |

STATEMENT OF REVENUE AND EXPENSES

|   | Current Year |             | Prior Year | Prior Year Ended |
|---|--------------|-------------|------------|------------------|
|   | To Date      |             | To Date    | December 31      |
|   | 1            | 2           | 3          | 4                |
|   | Uncovered    | Total       | Total      | Total            |
| 1. Member Months  | X X X        | 1,584,249   | 1,528,010  | 2,055,364        |
| 2. Net premium income (including \$ 0 non-health premium income)  | X X X        | 49,070,836  | 47,435,630 | 63,024,491       |
| 3. Change in unearned premium reserves and reserve for rate credits   | X X X        |             |            |                  |
| 4. Fee-for-service (net of \$ 0 medical expenses)   | X X X        |             |            |                  |
| 5. Risk revenue   | X X X        |             |            |                  |
| 6. Aggregate write-ins for other health care related revenues   | X X X        |             |            |                  |
| 7. Aggregate write-ins for other non-health revenues  | X X X        |             |            |                  |
| 8. Total revenues (Lines 2 to 7)  | X X X        | 49,070,836  | 47,435,630 | 63,024,491       |
| Hospital and Medical:   |              |             |            |                  |
| 9. Hospital/medical benefits  |              |             |            |                  |
| 10. Other professional services   |              | 38,704,077  | 35,084,667 | 48,535,742       |
| 11. Outside referrals   |              |             |            |                  |
| 12. Emergency room and out-of-area  |              |             |            |                  |
| 13. Prescription drugs  |              |             |            |                  |
| 14. Aggregate write-ins for other hospital and medical  |              |             |            |                  |
| 15. Incentive pool, withhold adjustments and bonus amounts  |              |             |            |                  |
| 16. Subtotal (Lines 9 to 15)  |              | 38,704,077  | 35,084,667 | 48,535,742       |
| Less:   |              |             |            |                  |
| 17. Net reinsurance recoveries  |              |             |            |                  |
| 18. Total hospital and medical (Lines 16 minus 17)  |              | 38,704,077  | 35,084,667 | 48,535,742       |
| 19. Non-health claims (net)   |              |             |            |                  |
| 20. Claims adjustment expenses, including \$ 252,245 cost containment expenses  |              | 1,650,741   | 1,997,006  | 6,616,303        |
| 21. General administrative expenses   |              | 11,012,755  | 10,899,749 | 9,848,845        |
| 22. Increase in reserves for life and accident and health contracts (including \$ 0 increase in reserves for life only)       |              |             |            |                  |
| 23. Total underwriting deductions (Lines 18 through 22)   |              | 51,367,573  | 47,981,422 | 65,000,890       |
| 24. Net underwriting gain or (loss) (Lines 8 minus 23)  | X X X        | (2,296,737) | (545,792)  | (1,976,399)      |
| 25. Net investment income earned  |              | 2,335,079   | 2,460,144  | 3,041,482        |
| 26. Net realized capital gains (losses) less capital gains tax of \$ 0  |              | 1,169,513   | 47         | 217,702          |
| 27. Net investment gains (losses) (Lines 25 plus 26)  |              | 3,504,592   | 2,460,191  | 3,259,184        |
| 28. Net gain or (loss) from agents' or premium balances charged off [ (amount recovered \$ 0) (amount charged off \$ 0) ]     |              |             |            |                  |
| 29. Aggregate write-ins for other income or expenses  |              | (4,103,868) | (2,015)    | (669,294)        |
| 30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) | X X X        | (2,896,013) | 1,912,384  | 613,491          |
| 31. Federal and foreign income taxes incurred   | X X X        |             |            |                  |
| 32. Net income (loss) (Lines 30 minus 31)   | X X X        | (2,896,013) | 1,912,384  | 613,491          |

| DETAILS OF WRITE-IN LINES   |       |             |         |           |
|---|-------|-------------|---------|-----------|
| 0601.   | X X X |             |         |           |
| 0602.   | X X X |             |         |           |
| 0603.   | X X X |             |         |           |
| 0698. Summary of remaining write-ins for Line 06 from overflow page | X X X |             |         |           |
| 0699. Totals (Lines 0601 through 0603 plus 0698) (Line 06 above)    | X X X |             |         |           |
| 0701.   | X X X |             |         |           |
| 0702.   | X X X |             |         |           |
| 0703.   | X X X |             |         |           |
| 0798. Summary of remaining write-ins for Line 07 from overflow page | X X X |             |         |           |
| 0799. Totals (Lines 0701 through 0703 plus 0798) (Line 07 above)    | X X X |             |         |           |
| 1401.   |       |             |         |           |
| 1402.   |       |             |         |           |
| 1403.   |       |             |         |           |
| 1498. Summary of remaining write-ins for Line 14 from overflow page |       |             |         |           |
| 1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)    |       |             |         |           |
| 2901. GAIN ON PURCHASE ON RHODE ISLAND TAX CREDITS                  |       |             | (2,015) | 226,888   |
| 2902. EXCISE TAX  |       |             |         | (50)      |
| 2903. DONATIONS TO THE RI FOUNDATION                                |       | (4,103,868) |         | (896,132) |
| 2998. Summary of remaining write-ins for Line 29 from overflow page |       |             |         |           |
| 2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)    |       | (4,103,868) | (2,015) | (669,294) |

STATEMENT OF REVENUE AND EXPENSES (Continued)

|  | 1                       | 2                     | 3                               |
|--|-------------------------|-----------------------|---------------------------------|
|  | Current Year<br>To Date | Prior Year<br>To Date | Prior Year Ended<br>December 31 |
| CAPITAL & SURPLUS ACCOUNT  |                         |                       |                                 |
| 33. Capital and surplus prior reporting year                                       | 166,580,673             | 161,513,565           | 161,513,565                     |
| 34. Net income or (loss) from Line 32  | (2,896,013)             | 1,912,384             | 613,491                         |
| 35. Change in valuation basis of aggregate policy and claim reserves               |                         |                       |                                 |
| 36. Change in net unrealized capital gains (losses) less capital gains tax of \$ 0 | 2,796,345               | 6,889,400             | 8,307,554                       |
| 37. Change in net unrealized foreign exchange capital gain or (loss)               |                         |                       |                                 |
| 38. Change in net deferred income tax  |                         |                       |                                 |
| 39. Change in nonadmitted assets   | (2,974,095)             | (3,040,540)           | (3,793,502)                     |
| 40. Change in unauthorized and certified reinsurance                               |                         |                       |                                 |
| 41. Change in treasury stock   |                         |                       |                                 |
| 42. Change in surplus notes  |                         |                       |                                 |
| 43. Cumulative effect of changes in accounting principles                          |                         |                       |                                 |
| 44. Capital Changes:   |                         |                       |                                 |
| 44.1 Paid in   |                         |                       |                                 |
| 44.2 Transferred from surplus (Stock Dividend)                                     |                         |                       |                                 |
| 44.3 Transferred to surplus  |                         |                       |                                 |
| 45. Surplus adjustments:   |                         |                       |                                 |
| 45.1 Paid in   |                         |                       |                                 |
| 45.2 Transferred to capital (Stock Dividend)                                       |                         |                       |                                 |
| 45.3 Transferred from capital  |                         |                       |                                 |
| 46. Dividends to stockholders  |                         |                       |                                 |
| 47. Aggregate write-ins for gains or (losses) in surplus                           | (180,395)               | 128,131               | (60,435)                        |
| 48. Net change in capital and surplus (Lines 34 to 47)                             | (3,254,158)             | 5,889,375             | 5,067,108                       |
| 49. Capital and surplus end of reporting period (Line 33 plus 48)                  | 163,326,515             | 167,402,940           | 166,580,673                     |

|   |           |         |          |
|---|-----------|---------|----------|
| DETAILS OF WRITE-IN LINES   |           |         |          |
| 4701. INCLUSION OF BAD DEBT RESERVE IN THE NON-ADMITTED ASSETS      | (180,395) | 128,131 | (60,435) |
| 4702.   |           |         |          |
| 4703.   |           |         |          |
| 4798. Summary of remaining write-ins for Line 47 from overflow page |           |         |          |
| 4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)    | (180,395) | 128,131 | (60,435) |

CASH FLOW

|  | 1                       | 2                     | 3                               |
|--|-------------------------|-----------------------|---------------------------------|
| Cash from Operations   | Current Year<br>To Date | Prior Year<br>To Date | Prior Year<br>Ended December 31 |
| 1. Premiums collected net of reinsurance   | 48,801,784              | 46,857,611            | 63,058,507                      |
| 2. Net investment income   | 3,584,712               | 2,423,137             | 3,273,130                       |
| 3. Miscellaneous income  |                         |                       | 226,888                         |
| 4. Total (Lines 1 to 3)  | 52,386,496              | 49,280,748            | 66,558,525                      |
| 5. Benefit and loss related payments   | 38,581,827              | 35,017,557            | 48,387,022                      |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts                             |                         |                       |                                 |
| 7. Commissions, expenses paid and aggregate write-ins for deductions   | 13,223,117              | 10,994,338            | 13,727,152                      |
| 8. Dividends paid to policyholders   |                         |                       |                                 |
| 9. Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses)                     |                         | 2,015                 | 50                              |
| 10. Total (Lines 5 through 9)  | 51,804,944              | 46,013,910            | 62,114,224                      |
| 11. Net cash from operations (Line 4 minus Line 10)  | 581,552                 | 3,266,838             | 4,444,301                       |
| Cash from Investments  |                         |                       |                                 |
| 12. Proceeds from investments sold, matured or repaid:   |                         |                       |                                 |
| 12.1 Bonds   | 14,135,713              | 15,161,492            | 17,661,850                      |
| 12.2 Stocks  | 2,054,463               | 40,690                | 320,839                         |
| 12.3 Mortgage loans  |                         |                       |                                 |
| 12.4 Real estate   |                         |                       |                                 |
| 12.5 Other invested assets   |                         |                       |                                 |
| 12.6 Net gains (or losses) on cash, cash equivalents and short-term investments                                    |                         |                       |                                 |
| 12.7 Miscellaneous proceeds  |                         |                       |                                 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7)  | 16,190,176              | 15,202,182            | 17,982,689                      |
| 13. Cost of investments acquired (long-term only):   |                         |                       |                                 |
| 13.1 Bonds   | 2,435,733               | 11,915,663            | 11,915,663                      |
| 13.2 Stocks  | 2,916,883               | 579,212               | 579,212                         |
| 13.3 Mortgage loans  |                         |                       |                                 |
| 13.4 Real estate   |                         |                       |                                 |
| 13.5 Other invested assets   | 901,983                 | 1,064,508             | 1,282,288                       |
| 13.6 Miscellaneous applications  |                         |                       |                                 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6)   | 6,254,599               | 13,559,383            | 13,777,163                      |
| 14. Net increase/(decrease) in contract loans and premium notes  |                         |                       |                                 |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)  | 9,935,577               | 1,642,799             | 4,205,526                       |
| Cash from Financing and Miscellaneous Sources  |                         |                       |                                 |
| 16. Cash provided (applied):   |                         |                       |                                 |
| 16.1 Surplus notes, capital notes  |                         |                       |                                 |
| 16.2 Capital and paid in surplus, less treasury stock  |                         |                       |                                 |
| 16.3 Borrowed funds  |                         |                       |                                 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities  |                         |                       |                                 |
| 16.5 Dividends to stockholders   |                         |                       |                                 |
| 16.6 Other cash provided (applied)   | (9,501,066)             | (2,125,376)           | (4,920,520)                     |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) | (9,501,066)             | (2,125,376)           | (4,920,520)                     |
| 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)                | 1,016,063               | 2,784,261             | 3,729,307                       |
| 19. Cash, cash equivalents and short-term investments:   |                         |                       |                                 |
| 19.1 Beginning of year   | 4,486,638               | 757,331               | 757,331                         |
| 19.2 End of period (Line 18 plus Line 19.1)  | 5,502,701               | 3,541,592             | 4,486,638                       |

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

|         |  |  |  |
|---------|--|--|--|
| 20.0001 |  |  |  |
| 20.0002 |  |  |  |
| 20.0003 |  |  |  |

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

|   | 1          | Comprehensive (Hospital & Medical) |       | 4                   | 5           | 6           | 7                                     | 8                    | 9                  | 10         | 11                | 12             | 13           | 14               |
|---|------------|------------------------------------|-------|---------------------|-------------|-------------|---------------------------------------|----------------------|--------------------|------------|-------------------|----------------|--------------|------------------|
|   |            | 2                                  | 3     |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
|   | Total      | Individual                         | Group | Medicare Supplement | Vision Only | Dental Only | Federal Employees Health Benefit Plan | Title XVIII Medicare | Title XIX Medicaid | Credit A&H | Disability Income | Long-Term Care | Other Health | Other Non-Health |
| Total Members at end of:                        |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 1. Prior Year                                   | 176,324    |                                    |       |                     | 25,397      | 150,927     |                                       |                      |                    |            |                   |                |              |                  |
| 2. First Quarter                                | 177,698    |                                    |       |                     | 28,482      | 149,216     |                                       |                      |                    |            |                   |                |              |                  |
| 3. Second Quarter                               | 176,414    |                                    |       |                     | 29,256      | 147,158     |                                       |                      |                    |            |                   |                |              |                  |
| 4. Third Quarter                                | 178,644    |                                    |       |                     | 31,776      | 146,868     |                                       |                      |                    |            |                   |                |              |                  |
| 5. Current Year                                 |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 6. Current Year Member Months                   | 1,584,249  |                                    |       |                     | 264,633     | 1,319,616   |                                       |                      |                    |            |                   |                |              |                  |
| Total Member Ambulatory Encounters for Period:  |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 7. Physician                                    |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 8. Non-Physician                                |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 9. Totals                                       |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 10. Hospital Patient Days Incurred              |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 11. Number of Inpatient Admissions              |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 12. Health Premiums Written (a)                 | 48,801,784 |                                    |       |                     | 1,357,953   | 47,443,831  |                                       |                      |                    |            |                   |                |              |                  |
| 13. Life Premiums Direct                        |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 14. Property/Casualty Premiums Written          |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 15. Health Premiums Earned                      | 49,070,836 |                                    |       |                     | 1,357,953   | 47,712,883  |                                       |                      |                    |            |                   |                |              |                  |
| 16. Property/Casualty Premiums Earned           |            |                                    |       |                     |             |             |                                       |                      |                    |            |                   |                |              |                  |
| 17. Amount Paid for Provision of Health Care S  | 38,581,827 |                                    |       |                     | 993,640     | 37,588,187  |                                       |                      |                    |            |                   |                |              |                  |
| 18. Amount Incurred for Provision of Health Car | 38,704,077 |                                    |       |                     | 1,052,400   | 37,651,677  |                                       |                      |                    |            |                   |                |              |                  |

7

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 0



## Aging Analysis of Unpaid Claims

UNDERWRITING AND INVESTMENT EXHIBIT  
ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

|   | Line<br>of<br>Business                             | Claims Paid Year to Date   |   | Liability End of Current Quarter                      |   | 5<br><br>Claims Incurred in<br>Prior Years<br>(Columns 1 + 3) | 6<br><br>Estimated Claim<br>Reserve and Claim<br>Liability Dec. 31<br>of Prior Year |
|---|--|--|---|---|---|---|---|
|   |  | 1<br><br>On Claims Incurred<br>Prior to January 1<br>of Current Year | 2<br><br>On Claims Incurred<br>During the<br>Year | 3<br><br>On Claims Unpaid<br>Dec. 31 of<br>Prior Year | 4<br><br>On Claims Incurred<br>During the<br>Year |   |   |
| 6 | 1. Comprehensive (hospital and medical) individual |  |   |   |   |   |   |
|   | 2. Comprehensive (hospital and medical) group      |  |   |   |   |   |   |
|   | 3. Medicare Supplement                             |  |   |   |   |   |   |
|   | 4. Vision only                                     | 55,323   | 988,667   | 44  | 58,716  | 55,367  | 50,350  |
|   | 5. Dental only                                     | 1,508,512  | 36,029,325  | 34,438  | 1,652,622   | 1,542,950   | 1,573,220   |
|   | 6. Federal Employees Health Benefits Plan          |  |   |   |   |   |   |
|   | 7. Title XVIII - Medicare                          |  |   |   |   |   |   |
|   | 8. Title XIX - Medicaid                            |  |   |   |   |   |   |
|   | 9. Credit A&H                                      |  |   |   |   |   |   |
|   | 10. Disability Income                              |  |   |   |   |   |   |
|   | 11. Long-term care                                 |  |   |   |   |   |   |
|   | 12. Other health                                   |  |   |   |   |   |   |
|   | 13. Health subtotal (Lines 1 to 12)                | 1,563,835  | 37,017,992  | 34,482  | 1,711,338   | 1,598,317   | 1,623,570   |
|   | 14. Health care receivables (a)                    |  |   |   |   |   |   |
|   | 15. Other non-health                               |  |   |   |   |   |   |
|   | 16. Medical incentive pools and bonus amounts      |  |   |   |   |   |   |
|   | 17. Totals (Lines 13 - 14 + 15 + 16)               | 1,563,835  | 37,017,992  | 34,482  | 1,711,338   | 1,598,317   | 1,623,570   |

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

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

A. Accounting Practices - No significant changes since the December 2024 annual filing.

|   |   |                 |        |             |             |
|---|---|-----------------|--------|-------------|-------------|
| NET INCOME                                      |   |                 |        |             |             |
|   |   |                 | F/S    | F/S         |             |
|   | SSAP #  | Page            | Line # | 2025        | 2024        |
| (1)   | DELTA DENTAL OF RHODE ISLAND state basis (Page 4, Line 32, Columns 2 & 3) | \$              | X X X  | X X X       | X X X       |
| (2)   | State Prescribed Practices that are an increase/(decrease) from NAIC SAP: |                 |        | (2,896,013) | 613,491     |
| Details of Depreciation of Fixed Assets         |   |                 |        |             |             |
|   | SSAP #  | Page            | Line # | 2025        | 2024        |
|   |   |                 |        |             |             |
|   |   |                 |        |             |             |
|   | Totals (Lines 01A0201 through 01A0225)                                    | \$              |        |             |             |
| (3)   | State Permitted Practices that are an increase/(decrease) from NAIC SAP:  |                 |        |             |             |
| Details of Depreciation of Home Office Property |   |                 |        |             |             |
|   | SSAP #  | Page            | Line # | 2025        | 2024        |
|   |   |                 |        |             |             |
|   |   |                 |        |             |             |
|   | Totals (Lines 01A0301 through 01A0325)                                    | \$              |        |             |             |
| (4)   | NAIC SAP  | (1 - 2 - 3 = 4) | \$     | X X X       | X X X       |
|   |   |                 |        | (2,896,013) | 613,491     |
| SURPLUS   |   |                 |        |             |             |
|   |   |                 | F/S    | F/S         |             |
|   | SSAP #  | Page            | Line # | 2025        | 2024        |
| (5)   | DELTA DENTAL OF RHODE ISLAND state basis (Page 3, Line 33, Columns 3 & 4) | \$              | X X X  | X X X       | X X X       |
| (6)   | State Prescribed Practices that are an increase/(decrease) from NAIC SAP: |                 |        | 163,326,515 | 166,580,673 |
| e.g., Goodwill, net, Fixed Assets, Net          |   |                 |        |             |             |
|   | SSAP #  | Page            | Line # | 2025        | 2024        |
|   |   |                 |        |             |             |
|   |   |                 |        |             |             |
|   | Totals (Lines 01A0601 through 01A0625)                                    | \$              |        |             |             |
| (7)   | State Permitted Practices that are an increase/(decrease) from NAIC SAP:  |                 |        |             |             |
| Home Office Property                            |   |                 |        |             |             |
|   | SSAP #  | Page            | Line # | 2025        | 2024        |
|   |   |                 |        |             |             |
|   |   |                 |        |             |             |
|   | Totals (Lines 01A0701 through 01A0725)                                    | \$              |        |             |             |
| (8)   | NAIC SAP  | (5 - 6 - 7 = 8) | \$     | X X X       | X X X       |
|   |   |                 |        | 163,326,515 | 166,580,673 |

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

B. Use of Estimates in the Preparation of the Financial Statements - No significant changes since the December 2024 annual filing.

C. Accounting Policy

- 1. Short term investments are stated at amortized cost.
- 2. Bonds are stated at amortized value using the constant yield / scientific method.
- 3. Common stocks in our investment portfolio are stated at market value.
- 4. Preferred stocks – Not applicable.
- 5. Mortgage loans - Not applicable.
- 6. Loan-backed securities, if any, are stated at amortized value using the constant yield / scientific method.
- 7. Investments in subsidiaries, controlled and affiliated entities, if any, would be reported using the equity method.
- 8. Joint ventures, partnerships and limited liability companies - Not applicable.
- 9. Derivatives - Not applicable.
- 10. Investment income as a factor in the premium deficiency calculation – Not applicable.
- 11. Liabilities for losses and loss/claim adjustment expenses are actuarially derived.
- 12. Change in capitalization policy – No significant changes since the December 2024 annual filing.
- 13. Pharmaceutical rebate receivables - Not applicable.

D. Going Concern - Management continually evaluates the Company’s ability to continue as a going concern. After considering management’s plans, potential events and principal conditions, there is no substantial doubt about the Company’s ability to 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.

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## NOTES TO FINANCIAL STATEMENTS

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### NOTE 5 - - INVESTMENTS

- A. Mortgage Loans, including Mezzanine Real Estate Loans – Not applicable.
- B. Debt Restructuring – Not applicable.
- C. Reverse Mortgages – Not applicable.
- D. Asset-Backed Securities – Not applicable.
- 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 – No significant changes since the December 2024 annual filing.
- K. Investment in Tax Credit Structures - No significant changes since the December 2024 annual filing.
- L. Restricted Assets - Not applicable.
- M. Working Capital Finance Investments - Not applicable.
- N. Offsetting and Netting of Assets and Liabilities - Not applicable.
- O. 5\*GI Securities – Not applicable.
- P. Short Sales – Not applicable.
- Q. Prepayment Penalty and Acceleration Fees – The Company did not collect any prepayment penalties or acceleration fees through September 30, 2025.
- R. Reporting Entity’s Share of Qualified Cash Pool by Asset Type – Not applicable.
- S. Aggregate Collateral Loans – Not applicable.

**NOTE 6 - - JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES** – Not applicable.

**NOTE 7 - - INVESTMENT INCOME** - No significant changes since the December 2024 annual filing.

### NOTE 9 - - INCOME TAXES

Delta Dental of Rhode Island is a not-for-profit corporation pursuant to Section 501(C)(4) of the Internal Revenue Code (IRC) and is exempt from federal income taxes under Section 501(a) of the IRC. In lieu of state income taxes, Delta Dental of Rhode Island pays a premium based tax to the State of Rhode Island.

Altus Realty Company is also a not-for-profit real estate holding corporation under Section 501(C)(2) of the IRC, and as such has made no provision for income taxes.

The Company’s other wholly owned subsidiary, The Altus Group, Inc., and its subsidiaries are for profit corporations. The Altus Group, Inc., including its subsidiaries Altus Dental, Inc., Altus Systems, Inc., Altus Dental Insurance Company, Inc., Altus Ventures, Inc., First Circle, Inc. and First Circle Realty, Inc. file consolidated federal and state tax returns. For the period ended December 31, 2024, the tax provision (benefit) of the Altus Group was \$832,955 and for the period ended September 30, 2025, the tax provision expense of the Altus Group is (\$373,333).

**NOTE 10 - - INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES AND OTHER RELATED PARTIES** - No significant changes since the December 2024 annual filing.

**NOTE 11 - - DEBT**– Not applicable.

NOTES TO FINANCIAL STATEMENTS

NOTE 12 - - RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

A. Defined Benefit Plan

The Company maintains a noncontributory, defined contribution retirement plan. The plan covers all full-time employees who are 21 years of age and have completed three months of service with the Company.

Employees qualify for benefits upon normal retirement at age 65, or early retirement, which is met upon reaching age 60 and completion of five years of service. Vesting of contributions (made on behalf of each employee) begins at 20% after two years of service and increases 20% annually until full vesting occurs after six years of service. The Company's discretionary contributions to this plan, representing its full funding requirements, were \$946,318 for the period ended September 30, 2025 and \$1,158,510 for the period ended December 31, 2024.

B. Deferred Compensation Plans

Effective January 1, 1997, the Company established a 401(k) plan. Plan entry of employer contributions are the same as the defined contribution retirement plan described above. The Company's contribution to the plan matches the first 1% of base compensation and 50% of additional contributions up to 6% of the base compensation that is contributed by each employee. Employer contributions vest 100% after two years of service. The Company's contributions to this plan were \$312,901 for the period ended September 30, 2025 and \$316,444 for the period ended December 31, 2024.

In 2004, the Company established a 457(b) Plan to provide deferred compensation for a select group of management. The Company contributed \$55,121 through September 30, 2025 and \$41,399 for the period ending December 31, 2024.

In 2009, the Company established a 457(f) Plan to provide deferred compensation for a select group of management. The Company made no contributions to the plan in 2024 or through Q2 2025.

C. Postretirement Benefit Plans – No significant changes since the December 2024 annual filing.

NOTE 13 - - CAPITAL AND SURPLUS, SHAREHOLDERS DIVIDENDS' RESTRICTIONS AND QUASI-REORGANIZATIONS - Not applicable.

NOTE 14 - - LIABILITIES, CONTINGENCIES AND ASSESSMENTS - No significant changes since the December 2024 annual filing.

NOTE 15 - - LEASES - No significant changes since the December 2024 annual filing.

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

A. ASO Plans – Not applicable.

B. ASC Plans – The Plan is an ASC Administrator.

The Company's September 30, 2025 financial operations exclude approximately \$78,422,056 of revenues from such plans and there are no significant gains or losses related to such transactions.

ASC Plans:

The gain from operations from Administrative Services Contract (ASC) unins plans and the uninsured portion of partially insured plans was as follows during 2025: (years as seen in Notes text)

|   | ASC<br>Uninsured<br>Plans | Uninsured Portion of<br>Partially Insured<br>Plans | Total<br>ASC |
|---|---------------------------|--|--------------|
| Gross reimbursement for medical cost incurred                             | \$ 73,346,637             |  | 73,346,637   |
| Gross administrative fees accrued   | \$                        |  |              |
| Other income or expenses (includ interest paid to or received from plans) | \$ 5,075,419              |  | 5,075,419    |
| Gross expenses incurred (claims and administrative) (a+b+c)               | \$ 78,422,056             |  | 78,422,056   |
| Total net gain or loss from operations                                    | \$                        |  |              |

NOTES TO FINANCIAL STATEMENTS

C. Medicare – Not applicable.

NOTE 19 - - DIRECT PREMIUM WRITTEN / PRODUCED BY MANAGING GENERAL AGENTS / THIRD PARTY ADMINISTRATORS - Not applicable.

NOTE 20 - - FAIR VALUE MEASUREMENTS

A. Fair Value Measurement

1. Fair Value Measurement at Reporting Date - The Company’s financial assets and liabilities carried at fair value have been classified, for disclosure purposes, based on a hierarchy defined by FASB ASC 820, *Fair Value Measurements and Disclosures* as follows:

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

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

Level 3 – Little or no market data is available. Fair value is determined using management’s best estimates and assumptions.

The following table provides information as of September 30, 2025:

|     | (1)<br>Description                      | (2)<br>(Level 1) | (3)<br>(Level 2) | (4)<br>(Level 3) | (6)<br>Net Asset Value | (7)<br>Total |
|-----|---|------------------|------------------|------------------|------------------------|--------------|
| a.  | Assets at fair Value                    |                  |                  |                  |                        |              |
| 01. | Cash Equivalent - MMMF (Sch E Part 2)   | \$ 6,088,717     |                  |                  |                        | 6,088,717    |
| 02. | Common Stock - ETFs, Industrial & Misc. | \$ 44,236,566    |                  |                  |                        | 44,236,566   |
| 03. | Bonds                                   |                  | 36,420,663       |                  |                        | 36,420,663   |
| 04. | Venture Capital Investments             |                  | 7,342,605        |                  |                        | 7,342,605    |
| 05. | Common Stock -Altus Group               |                  | 71,800,286       |                  |                        | 71,800,286   |
| 06. | Altus Realty Holding Company            |                  | 4,751,111        |                  |                        | 4,751,111    |
|     | Total assets at fair value              | \$ 50,325,283    | 120,314,665      |                  |                        | 170,639,948  |

2. Fair Value Measurements in Level 3 – None.

3. Transfers between Levels – None.

4. Description of Valuation Techniques – The Company’s valuation techniques are based on observable and unobservable pricing inputs. Observable inputs reflect market data obtained from independent sources based on trades of securities while unobservable inputs reflect the Company’s market assumptions.

5. Disclosures for Derivative Assets and Liabilities – None.

B. Other Fair Value Disclosures – In Q3 2025 an impairment write-down of \$22,433 was taken on two underperforming common stock holdings.

C. Aggregate Fair Value – See table in A (1) above.

D. Reasons Not Practical to Estimate Fair Value – None.

E. Instruments Measured at Net Asset Value – None.

NOTE 21 - - OTHER ITEMS- No significant changes since the December 2024 annual filing.

NOTE 22 - - EVENTS SUBSEQUENT - Not applicable.

NOTE 23 - - REINSURANCE - Not applicable.

NOTE 24 - - RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION - Not applicable.

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## NOTES TO FINANCIAL STATEMENTS

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

Loss reserves as of December 31, 2024 were \$1,623,570.

As of September 30, 2025, \$1,563,835 has been paid for claims incurred prior to January 1 of the current year.

Reserves remaining for prior years are now \$34,482 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on dental line of insurance. Therefore, there has been a \$25,253 favorable prior-year development since December 31, 2024 to September 30, 2025.

The change is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. The Company experienced no unfavorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

**NOTE 26 - - INTERCOMPANY POOLING ARRANGEMENTS** - Not applicable.

**NOTE 27 - - STRUCTURED SETTLEMENTS** - Not applicable.

**NOTE 28- - HEALTH CARE RECEIVABLES** – Not applicable.

**NOTE 29 - - PARTICIPATING POLICIES** - Not applicable.

### NOTE 30 - - PREMIUM DEFICIENCY RESERVES

The Company performed an analysis for premium deficiency reserves as of September 30, 2025 which resulted in no additional liability for the period.

**NOTE 31 - - ANTICIPATED SALVAGE AND SUBROGATION** - Not applicable.

GENERAL INTERROGATORIES

PART 1 – COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes [ ] No [ X ]

1.2 If yes, has the report been filed with the domiciliary state?

Yes [ ] No [ ]

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [ ] No [ X ]

2.2 If yes, date of change:

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

Yes [ X ] No [ ]

If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [ ] No [ X ]

3.3 If the response to 3.2 is yes, provide a brief description of those changes.

3.4 Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [ ] No [ X ]

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [ ] No [ X ]

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

| 1<br>Name of Entity | 2<br>NAIC Company Code | 3<br>State of Domicile |
|---------------------|------------------------|------------------------|
|                     |                        |                        |
|                     |                        |                        |

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

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

If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2022

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2022

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

03/26/2024

6.4 By what department or departments?

INSURANCE DIVISION DEPARTMENT OF BUSINESS REGULATION STATE OF RHODE ISLAND

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

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

6.6 Have all of the recommendations within the latest financial examination report been complied with?

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

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [ ] No [ X ]

7.2 If yes, give full information



GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [ ] No [ X ]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

.....

.....

.....

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

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

| 1                 | 2                         | 3     | 4     | 5     | 6     |
|-------------------|---------------------------|-------|-------|-------|-------|
| Affiliate<br>Name | Location<br>(City, State) | FRB   | OCC   | FDIC  | SEC   |
| .....             | .....                     | ..... | ..... | ..... | ..... |
| .....             | .....                     | ..... | ..... | ..... | ..... |

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c) Compliance with applicable governmental laws, rules, and regulations;

(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e) Accountability for adherence to the code.

Yes [ X ] No [ ]

9.11 If the response to 9.1 is No, please explain:

.....

.....

.....

9.2 Has the code of ethics for senior managers been amended? Yes [ ] No [ X ]

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

.....

.....

.....

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [ ] No [ X ]

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

.....

.....

.....

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [ X ] No [ ]

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

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [ ] No [ X ]

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

.....

.....

.....

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ \_\_\_\_\_

13. Amount of real estate and mortgages held in short-term investments: \$ \_\_\_\_\_

GENERAL INTERROGATORIES

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [ X ] No [ ]

|   |   |  |
|---|---|--|
| 14.2 If yes, please complete the following:                             | 1   | 2  |
|   | Prior Year-End<br>Book/Adjusted<br>Carrying Value | Current Quarter<br>Book/Adjusted<br>Carrying Value |
| 14.21 Bonds   | \$  | \$   |
| 14.22 Preferred Stock   | \$  | \$   |
| 14.23 Common Stock  | \$ 72,565,699                                     | \$ 71,800,286                                      |
| 14.24 Short-Term Investments  | \$  | \$   |
| 14.25 Mortgage Loans on Real Estate                                     | \$  | \$   |
| 14.26 All Other   | \$ 7,114,363                                      | \$ 7,387,687                                       |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates           |   |  |
| (Subtotal Lines 14.21 to 14.26)   | \$ 79,680,062                                     | \$ 79,187,973                                      |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$  | \$   |

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [ ] No [ X ]

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

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:

|  |    |
|--|----|
| 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2                   | \$ |
| 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 | \$ |
| 16.3 Total payable for securities lending reported on the liability page                                       | \$ |

17. 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 [ ]

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

| 1                               | 2  |
|---------------------------------|--|
| Name of Custodian(s)            | Custodian Address                        |
| CITIZENS BANK                   | ONE CITIZENS PLAZA, PROVIDENCE, RI 02903 |
| FIDELITY BROKERAGE SERVICES LLC | PO BOX 770002 CINCINNATI, OH 45277-0074  |

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [ ] No [ X ]

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

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

GENERAL INTERROGATORIES

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

| 1<br>Name of Firm or Individual | 2<br>Affiliation |
|---------------------------------|------------------|
| SEAN NEWTH                      | I                |
| DUANE EASTER                    | I                |

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [ ] No [X]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [ ] No [X]

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

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

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

18.2 If no, list exceptions:  
.  
.  
.  
.

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [ ] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

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

Has the reporting entity self-designated PLGI securities? Yes [ ] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [ ] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

|     |   |                |
|-----|---|----------------|
| 1.  | Operating Percentages:  |                |
| 1.1 | A&H loss percent  | 79.39 %        |
| 1.2 | A&H cost containment percent  | 0.51 %         |
| 1.3 | A&H expense percent excluding cost containment expenses   | 25.29 %        |
| 2.1 | Do you act as a custodian for health savings accounts?  | Yes [ ] No [X] |
| 2.2 | If yes, please provide the amount of custodial funds held as of the reporting date.   | \$             |
| 2.3 | Do you act as an administrator for health savings accounts?   | Yes [ ] No [X] |
| 2.4 | If yes, please provide the balance of the funds administered as of the reporting date.  | \$             |
| 3.  | Is the reporting entity licensed or chartered, registered, qualified, eligible, or writing business in at least two states?                                 | Yes [ ] No [X] |
| 3.1 | If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of the reporting entity? | Yes [ ] No [X] |

## SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS  
Current Year To Date - Allocated by States and Territories

| States, Etc.  | 1                     | Direct Business Only             |                         |                       |                   |   |  |                                    |                                 |                           |
|---|-----------------------|----------------------------------|-------------------------|-----------------------|-------------------|---|--|------------------------------------|---------------------------------|---------------------------|
|   |                       | 2                                | 3                       | 4                     | 5                 | 6   | 7  | 8                                  | 9                               | 10                        |
|   | Activ<br>Statu<br>(a) | Accident &<br>Health<br>Premiums | Medicare<br>Title XVIII | Medicaid<br>Title XIX | CHIP Title<br>XX1 | Federal<br>Employees<br>Health<br>Benefits<br>Program<br>Premiums | Life &<br>Annuity<br>Premiums &<br>Other<br>Considerations | Property /<br>Casualty<br>Premiums | Total<br>Columns<br>2 Through 8 | Deposit-Type<br>Contracts |
| 1. Alabama  | AL                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 2. Alaska   | AK                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 3. Arizona  | AZ                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 4. Arkansas   | AR                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 5. California   | CA                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 6. Colorado   | CO                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 7. Connecticut  | CT                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 8. Delaware   | DE                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 9. District of Columbia   | DC                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 10. Florida   | FL                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 11. Georgia   | GA                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 12. Hawaii  | HI                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 13. Idaho   | ID                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 14. Illinois  | IL                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 15. Indiana   | IN                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 16. Iowa  | IA                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 17. Kansas  | KS                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 18. Kentucky  | KY                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 19. Louisiana   | LA                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 20. Maine   | ME                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 21. Maryland  | MD                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 22. Massachusetts   | MA                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 23. Michigan  | MI                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 24. Minnesota   | MN                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 25. Mississippi   | MS                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 26. Missouri  | MO                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 27. Montana   | MT                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 28. Nebraska  | NE                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 29. Nevada  | NV                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 30. New Hampshire   | NH                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 31. New Jersey  | NJ                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 32. New Mexico  | NM                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 33. New York  | NY                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 34. North Carolina  | NC                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 35. North Dakota  | ND                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 36. Ohio  | OH                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 37. Oklahoma  | OK                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 38. Oregon  | OR                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 39. Pennsylvania  | PA                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 40. Rhode Island  | RI                    | L                                | 49,070,836              |                       |                   |   |  |                                    | 49,070,836                      |                           |
| 41. South Carolina  | SC                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 42. South Dakota  | SD                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 43. Tennessee   | TN                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 44. Texas   | TX                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 45. Utah  | UT                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 46. Vermont   | VT                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 47. Virginia  | VA                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 48. Washington  | WA                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 49. West Virginia   | WV                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 50. Wisconsin   | WI                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 51. Wyoming   | WY                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 52. American Samoa  | AS                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 53. Guam  | GU                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 54. Puerto Rico   | PR                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 55. U.S. Virgin Islands   | VI                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 56. Northern Mariana Islands  | MP                    | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 57. Canada  | CAN                   | N                                |                         |                       |                   |   |  |                                    |                                 |                           |
| 58. Aggregate other alien   | OT                    | X X                              |                         |                       |                   |   |  |                                    |                                 |                           |
| 59. Subtotal  | X X                   | 49,070,836                       |                         |                       |                   |   |  |                                    | 49,070,836                      |                           |
| 60. Reporting entity contributions<br>for Employee Benefit Plans    | X X                   |                                  |                         |                       |                   |   |  |                                    |                                 |                           |
| 61. Totals (Direct Business)  | X X                   | 49,070,836                       |                         |                       |                   |   |  |                                    | 49,070,836                      |                           |
| DETAILS OF WRITE-INS  |                       |                                  |                         |                       |                   |   |  |                                    |                                 |                           |
| 58001.  | X X                   |                                  |                         |                       |                   |   |  |                                    |                                 |                           |
| 58002.  | X X                   |                                  |                         |                       |                   |   |  |                                    |                                 |                           |
| 58003.  | X X                   |                                  |                         |                       |                   |   |  |                                    |                                 |                           |
| 58998. Summary of remaining write-ins for Line 58                   | X X                   |                                  |                         |                       |                   |   |  |                                    |                                 |                           |
| 58999. Totals (Lines 58001 through 58003 plus 58<br>(Line 58 above) | X X                   |                                  |                         |                       |                   |   |  |                                    |                                 |                           |

- (a) Active Status Counts
1. L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG

2. R - Registered - Non-domiciled RRGs

3. E – Eligible - Reporting entities eligible or approved to write surplus lines in the s

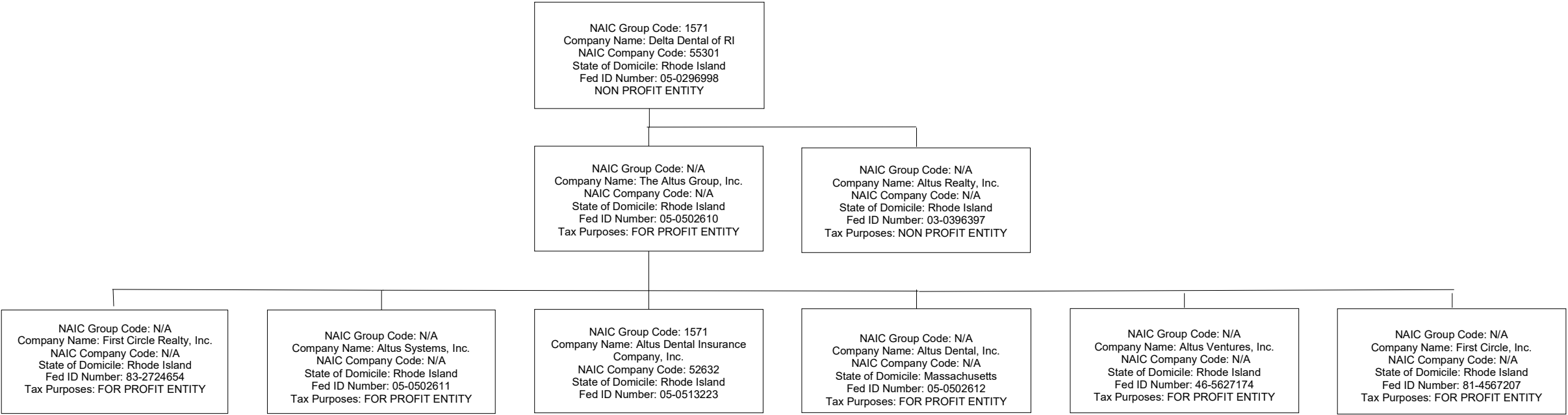
4. Q - Qualified - Qualified or accredited reinsurer

5. N – None of the above - Not allowed to write business in the state
- 1

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

PART 1 - ORGANIZATIONAL CHART



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1          | 2                                    | 3                 | 4          | 5            | 6   | 7  | 8   | 9                    | 10                               | 11   | 12   | 13   | 14   | 15                                  | 16 |
|------------|--------------------------------------|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|-------------------------------------|----|
| Group Code | Group Name                           | NAIC Company Code | ID Number  | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity / Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Yes/No) | *  |
| 1571       | ALTUS DENTAL INSURANCE COMPANY, INC. | 00000             | 03-0396397 |              |     |  | ALTUS REALTY COMPANY, INC.                  | RI                   | DS                               | DELTA DENTAL OF RHODE ISLAND                     | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | NO                                  |    |
|            |                                      | 00000             | 05-0502610 |              |     |  | THE ALTUS GROUP, INC.                       | RI                   | DS                               | DELTA DENTAL OF RHODE ISLAND                     | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | YES                                 |    |
|            |                                      | 00000             | 05-0502611 |              |     |  | ALTUS SYSTEMS, INC.                         | RI                   | DS                               | THE ALTUS GROUP, INC.                            | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | NO                                  |    |
|            |                                      | 00000             | 05-0502612 |              |     |  | ALTUS DENTAL, INC.                          | MA                   | DS                               | THE ALTUS GROUP, INC.                            | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | NO                                  |    |
|            |                                      | 52632             | 05-0513223 |              |     |  | ALTUS DENTAL INSURANCE COMPANY, INC.        | RI                   | IA                               | THE ALTUS GROUP, INC.                            | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | NO                                  |    |
| 1571       | DELTA DENTAL OF RHODE ISLAND         | 00000             | 46-5627174 |              |     |  | ALTUS VENTURES, INC                         | RI                   | DS                               | THE ALTUS GROUP, INC.                            | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | NO                                  |    |
|            |                                      | 55301             | 05-0526998 |              |     |  | DELTA DENTAL OF RHODE ISLAND                | RI                   | RE                               | DELTA DENTAL OF RHODE ISLAND                     | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | NO                                  |    |
|            |                                      | 00000             | 81-4567207 |              |     |  | FIRST CIRCLE, INC.                          | RI                   | DS                               | THE ALTUS GROUP, INC.                            | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | NO                                  |    |
|            |                                      | 00000             | 83-2724654 |              |     |  | FIRST CIRCLE REALTY, INC.                   | RI                   | DS                               | THE ALTUS GROUP, INC.                            | BOARD OF DIRECTORS   | 100.000                                    | DELTA DENTAL OF RI                         | NO                                  |    |

16

| Asterik | Explanation |
|---------|-------------|
|         | NONE        |



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

Response

NO

AUGUST FILING

2. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.

N/A

1. Explanation

THE COMPANY DOES NOT TRANSACT THIS TYPE OF BUSINESS.

2. Explanation

N/A

Question 1 Explanation:

THE COMPANY DOES NOT TRANSACT THIS TYPE OF BUSINESS.

Bar Code:



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**OVERFLOW PAGE FOR WRITE-INS**

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SCHEDULE A - VERIFICATION  
Real Estate

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

SCHEDULE B - VERIFICATION  
Mortgage Loans

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

SCHEDULE BA - VERIFICATION  
Other Long-Term Invested Assets

|  | 1<br>Year To Date | 2<br>Prior Year<br>Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year   | 11,717,147        | 11,150,926                           |
| 2. Cost of acquired:   |                   |                                      |
| 2.1 Actual cost at time of acquisition   | 300,000           | 850,001                              |
| 2.2 Additional investment made after acquisition   | 601,983           | 432,287                              |
| 3. Capitalized deferred interest and other   |                   |                                      |
| 4. Accrual of discount   |                   |                                      |
| 5. Unrealized valuation increase (decrease)  | (530,382)         | (716,067)                            |
| 6. Total gain (loss) on disposals  |                   |                                      |
| 7. Deduct amounts received on disposals  |                   |                                      |
| 8. Deduct amortization of premium, depreciation, and proportional amortization                           |                   |                                      |
| 9. Total foreign exchange change in book/adjusted carrying value   |                   |                                      |
| 10. Deduct current year's other-than-temporary impairment recognized                                     |                   |                                      |
| 11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10) | 12,088,748        | 11,717,147                           |
| 12. Deduct total nonadmitted amounts   |                   |                                      |
| 13. Statement value at end of current period (Line 11 minus Line 12)                                     | 12,088,748        | 11,717,147                           |

SCHEDULE D - VERIFICATION  
Bonds and Stocks

|  | 1<br>Year To Date | 2<br>Prior Year<br>Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year                           | 158,253,850       | 155,345,635                          |
| 2. Cost of bonds and stocks acquired   | 5,352,616         | 12,494,875                           |
| 3. Accrual of discount   | 258,645           | 276,842                              |
| 4. Unrealized valuation increase (decrease)  | 2,823,386         | 8,269,503                            |
| 5. Total gain (loss) on disposals  | 1,483,953         | 217,701                              |
| 6. Deduct consideration for bonds and stocks disposed of   | 16,190,176        | 17,982,689                           |
| 7. Deduct amortization of premium  | 181,476           | 368,017                              |
| 8. Total foreign exchange change in book/adjusted carrying value   |                   |                                      |
| 9. Deduct current year's other-than-temporary impairment recognized                                      | 22,433            |                                      |
| 10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees      |                   |                                      |
| 11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9 + 10) | 151,778,365       | 158,253,850                          |
| 12. Deduct total nonadmitted amounts   |                   |                                      |
| 13. Statement value at end of current period (Line 11 minus Line 12)                                     | 151,778,365       | 158,253,850                          |

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity  
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

|      | NAIC Designation                      | 1  | 2   | 3   | 4   | 5  | 6   | 7  | 8  |
|------|---------------------------------------|--|---|---|---|--|---|--|--|
|      |                                       | Book/Adjusted<br>Carrying Value<br>Beginning<br>of Current Quarter | Acquisitions<br>During Current<br>Quarter | Dispositions<br>During Current<br>Quarter | Non-Trading<br>Activity During<br>Current Quarter | Book/Adjusted<br>Carrying Value<br>End of<br>First Quarter | Book/Adjusted<br>Carrying Value<br>End of<br>Second Quarter | Book/Adjusted<br>Carrying Value<br>End of<br>Third Quarter | Book/Adjusted<br>Carrying Value<br>December 31<br>Prior Year |
| 2025 | ISSUER CREDIT OBLIGATIONS (ICO)       |  |   |   |   |  |   |  |  |
|      | 1. NAIC 1 (a)                         | 27,713,898   |   | 4,610,000                                 | 2,696,678   | 32,671,455   | 27,713,898  | 25,800,576   | 34,119,784   |
|      | 2. NAIC 2 (a)                         | 13,645,126   |   | 850,000                                   | (2,648,785)                                       | 12,274,853   | 13,645,126  | 10,146,341   | 12,245,285   |
|      | 3. NAIC 3 (a)                         |  |   |   |   |  |   |  | 1,188,840  |
|      | 4. NAIC 4 (a)                         |  |   |   |   |  |   |  |  |
|      | 5. NAIC 5 (a)                         |  |   |   |   |  |   |  |  |
|      | 6. NAIC 6 (a)                         |  |   |   |   |  |   |  |  |
|      | 7. Total ICO                          | 41,359,024   |   | 5,460,000                                 | 47,893  | 44,946,308   | 41,359,024  | 35,946,917   | 47,553,909   |
|      | ASSET-BACKED SECURITIES (ABS)         |  |   |   |   |  |   |  |  |
|      | 8. NAIC 1                             | 137  |   | 136                                       | 1   | 399  | 137   | 2  | 714  |
|      | 9. NAIC 2                             |  |   |   |   |  |   |  |  |
|      | 10. NAIC 3                            |  |   |   |   |  |   |  |  |
|      | 11. NAIC 4                            |  |   |   |   |  |   |  |  |
|      | 12. NAIC 5                            |  |   |   |   |  |   |  |  |
|      | 13. NAIC 6                            |  |   |   |   |  |   |  |  |
|      | 14. Total ABS                         | 137  |   | 136                                       | 1   | 399  | 137   | 2  | 714  |
|      | PREFERRED STOCK                       |  |   |   |   |  |   |  |  |
|      | 15. NAIC 1                            |  |   |   |   |  |   |  |  |
|      | 16. NAIC 2                            |  |   |   |   |  |   |  |  |
|      | 17. NAIC 3                            |  |   |   |   |  |   |  |  |
|      | 18. NAIC 4                            |  |   |   |   |  |   |  |  |
|      | 19. NAIC 5                            |  |   |   |   |  |   |  |  |
|      | 20. NAIC 6                            |  |   |   |   |  |   |  |  |
|      | 21. Total Preferred Stock             |  |   |   |   |  |   |  |  |
|      | 22. Total ICO, ABS, & Preferred Stock | 41,359,161   |   | 5,460,136                                 | 47,894  | 44,946,707   | 41,359,161  | 35,946,919   | 47,554,623   |

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$ 0; NAIC 2 \$ 0; NAIC 3 \$ 0; NAIC 4 \$ 0; NAIC 5 \$ 0; NAIC 6 \$ 0

SCHEDULE DA - PART 1  
Short-Term Investments

|                   | 1                               | 2            | 3              | 4                                     | 5  |
|-------------------|---------------------------------|--------------|----------------|---------------------------------------|--|
|                   | Book/Adjusted<br>Carrying Value | Par<br>Value | Actual<br>Cost | Interest<br>Collected<br>Year To Date | Paid for Accrued<br>Interest<br>Year To Date |
| 7709999999 Totals |                                 |              |                |                                       |  |

SCHEDULE DA - VERIFICATION  
Short-Term Investments

|   | 1            | 2                               |
|---|--------------|---------------------------------|
|   | Year To Date | Prior Year<br>Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year  |              |                                 |
| 2. Cost of short-term investments acquired  |              |                                 |
| 3. Accrual of discount  |              |                                 |
| 4. Unrealized valuation increase (decrease)   |              |                                 |
| 5. Total gain (loss) on disposals   |              |                                 |
| 6. Deduct consideration received on disposals   |              |                                 |
| 7. Deduct amortization of premium   |              |                                 |
| 8. Total foreign exchange change in book/adjusted carrying value                                    |              |                                 |
| 9. Deduct current year's other than temporary impairment recognized                                 |              |                                 |
| 10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9) |              |                                 |
| 11. Deduct total nonadmitted amounts  |              |                                 |
| 12. Statement value at end of current period (Line 10 minus Line 11)                                |              |                                 |

SCHEDULE DB - PART A - VERIFICATION  
Options, Caps, Floors, Collars, Swaps and Forwards

|     |   |  |
|-----|---|--|
| 1.  | Book/Adjusted Carrying Value, December 31, prior year (Line 10, prior year)                     |  |
| 2.  | Cost Paid/(Consideration Received) on additions   |  |
| 3.  | Unrealized Valuation increase/(decrease)  |  |
| 4.  | SSAP No. 108 adjustments  |  |
| 5.  | Total gain (loss) on termination recognized   |  |
| 6.  | Considerations received/(paid) on terminations  |  |
| 7.  | Amortization  |  |
| 8.  | Adjustment to the Book/Adjusted Carrying Value of hedged item                                   |  |
| 9.  | Total foreign exchange change in Book/Adjusted Carrying Value                                   |  |
| 10. | Book/Adjusted Carrying Value at End of Current Period (Lines 1 + 2 + 3 + 4 + 5 - 6 + 7 + 8 + 9) |  |
| 11. | Deduct nonadmitted assets   |  |
| 12. | Statement value at end of current period (Line 10 minus Line 11)                                |  |

NONE

SCHEDULE DB - PART B - VERIFICATION  
Future Contracts

|      |  |  |
|------|--|--|
| 1.   | Book/Adjusted carrying value, December 31 of prior year (Line 6, prior year)                               |  |
| 2.   | Cumulative cash change (Section 1, Broker Name/Net Cash Deposits Footnote - Cumulative Cash Change column) |  |
| 3.1  | Add:   |  |
|      | Change in variation margin on open contracts - Highly Effective Hedges                                     |  |
| 3.11 | Section 1, Column 15, current year to date minus   |  |
| 3.12 | Section 1, Column 15, prior year   |  |
|      | Change in variation margin on open contracts - All Other   |  |
| 3.13 | Section 1, Column 18, current year to date minus   |  |
| 3.14 | Section 1, Column 18, prior year   |  |
| 3.2  | Add:   |  |
|      | Change in adjustment to basis of hedged item   |  |
| 3.21 | Section 1, Column 17, current year to date minus   |  |
| 3.22 | Section 1, Column 17, prior year   |  |
|      | Change in amount recognized  |  |
| 3.23 | Section 1, Column 19, current year to date minus   |  |
| 3.24 | Section 1, Column 19, prior year plus  |  |
| 3.25 | SSAP No. 108 adjustments   |  |
| 3.3  | Subtotal (Line 3.1 minus Line 3.2)   |  |
| 4.1  | Cumulative variation margin on terminated contracts during the year  |  |
| 4.2  | Less:  |  |
| 4.21 | Amount used to adjust basis of hedged item   |  |
| 4.22 | Amount recognized  |  |
| 4.23 | SSAP No. 108 adjustments   |  |
| 4.3  | Subtotal (Line 4.1 minus Line 4.2)   |  |
| 5.   | Dispositions gains (losses) on contracts terminated in prior year:   |  |
| 5.1  | Total gain (loss) recognized for terminations in prior year  |  |
| 5.2  | Total gain (loss) adjusted into the hedged item(s) for terminations in prior year                          |  |
| 6.   | Book/Adjusted carrying value at end of current period (Lines 1 + 2 + 3.3 - 4.3 - 5.1 - 5.2)                |  |
| 7.   | Deduct total nonadmitted amounts   |  |
| 8.   | Statement value at end of current period (Line 6 minus Line 7)   |  |

NONE

## SCHEDULE DB - PART C - SECTION 1

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

[illegible]

SCHEDULE DB - PART C - SECTION 2

Replication (Synthetic Asset) Transactions Open

9016

|  | First Quarter                   |  | Second Quarter                  |  | Third Quarter                   |  | Fourth Quarter                  |  | Year to Date                    |   |
|--|---------------------------------|--|---------------------------------|--|---------------------------------|--|---------------------------------|--|---------------------------------|---|
|  | 1<br><br>Number<br>of Positions | 2<br><br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value | 3<br><br>Number<br>of Positions | 4<br><br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value | 5<br><br>Number<br>of Positions | 6<br><br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value | 7<br><br>Number<br>of Positions | 8<br><br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value | 9<br><br>Number<br>of Positions | 10<br><br>Total Replication<br>(Synthetic Asset)<br>Transactions<br>Statement Value |
| 1. Beginning Inventory   |                                 |  |                                 |  |                                 |  |                                 |  |                                 |   |
| 2. Add: Opened or Acquired Transactions  |                                 |  |                                 |  |                                 |  |                                 |  |                                 |   |
| 3. Add: Increases in Replication (Synthetic Asset) Transactions Statement Value  | X X X                           |  | X X X                           |  | X X X                           |  | X X X                           |  | X X X                           |   |
| 4. Less: Closed or Disposed of Transactions                                      |                                 |  |                                 |  |                                 |  |                                 |  |                                 |   |
| 5. Less: Positions Disposed of for Failing Effectiveness Criteria                |                                 |  |                                 |  |                                 |  |                                 |  |                                 |   |
| 6. Less: Decreases in Replication (Synthetic Asset) Transactions Statement Value | X X X                           |  | X X X                           |  | X X X                           |  | X X X                           |  | X X X                           |   |
| 7. Ending Inventory  |                                 |  |                                 |  |                                 |  |                                 |  |                                 |   |

NONE



SCHEDULE DB VERIFICATION

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

Book/Adjusted Carrying Value Check

|    |  |  |  |
|----|--|--|--|
| 1. | Part A, Section 1, Column 14   |  |  |
| 2. | Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance |  |  |
| 3. | Total (Line 1 plus Line 2)   |  |  |
| 4. | Part D, Section 1, Column 6  |  |  |
| 5. | Part D, Section 1, Column 7  |  |  |
| 6. | Total (Line 3 minus Line 4 minus Line 5)   |  |  |

NONE

Fair Value Check

|     |  |  |  |
|-----|--|--|--|
| 7.  | Part A, Section 1, Column 16               |  |  |
| 8.  | Part B, Section 1, Column 13               |  |  |
| 9.  | Total (Line 7 plus Line 8)                 |  |  |
| 10. | Part D, Section 1, Column 9                |  |  |
| 11. | Part D, Section 1, Column 10               |  |  |
| 12. | Total (Line 9 minus Line 10 minus Line 11) |  |  |

Potential Exposure Check

|     |  |  |  |
|-----|--|--|--|
| 13. | Part A, Section 1, Column 21               |  |  |
| 14. | Part B, Section 1, Column 20               |  |  |
| 15. | Part D, Section 1, Column 12               |  |  |
| 16. | Total (Line 13 plus Line 14 minus Line 15) |  |  |

SCHEDULE E PART 2 - VERIFICATION

(Cash Equivalents)

|   | 1            | 2                               |
|---|--------------|---------------------------------|
|   | Year To Date | Prior Year<br>Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year  | 3,768,701    | 1,438,472                       |
| 2. Cost of cash equivalents acquired  | 33,489,471   | 12,795,807                      |
| 3. Accrual of discount  |              |                                 |
| 4. Unrealized valuation increase (decrease)   |              |                                 |
| 5. Total gain (loss) on disposals   |              |                                 |
| 6. Deduct consideration received on disposals   | 31,169,455   | 10,465,578                      |
| 7. Deduct amortization of premium   |              |                                 |
| 8. Total foreign exchange change in book/adjusted carrying value                                    |              |                                 |
| 9. Deduct current year's other-than-temporary impairment recognized                                 |              |                                 |
| 10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9) | 6,088,717    | 3,768,701                       |
| 11. Deduct total nonadmitted amounts  |              |                                 |
| 12. Statement value at end of current period (Line 10 minus Line 11)                                | 6,088,717    | 3,768,701                       |

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

# NONE

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

# NONE

## SCHEDULE B - PART 2

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

**NONE**

# E02

## SCHEDULE B - PART 3

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

**NONE**

## SCHEDULE BA - PART 2

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

| 1<br><br>CUSIP<br>Ident-<br>ification | 2<br><br>Name<br>or Description   | Location      |                | 5<br><br>Name of<br>Vendor or<br>General<br>Partner | 6<br><br>NAIC<br>Designation,<br>NAIC<br>Designation<br>Modifier and<br>SVO<br>Administrative<br>Symbol | 7<br><br>Date<br>Originally<br>Acquired | 8<br><br>Type<br>and<br>Strategy | 9<br><br>Actual Cost<br>at Time of<br>Acquisition | 10<br><br>Additional<br>Investment Made<br>After Acquisition | 11<br><br>Amount of<br>Encumbrances | 12<br><br>Commitment<br>for Additional<br>Investment | 13<br><br>Percentage<br>of<br>Ownership |
|---------------------------------------|---|---------------|----------------|---|---|---|----------------------------------|---|--|-------------------------------------|--|---|
|                                       |   | 3<br><br>City | 4<br><br>State |   |   |   |                                  |   |  |                                     |  |   |
| 000000-00-0                           | PEAKLINE VENTURES II FEEDER, LLC  | PROVIDENCE    | RI             | PEAKLINE VENTURES II FEEDER, LLC                    |   | 06/12/2024                              | 1                                |   | 99,296   |                                     | 527,053  |   |
| 000000-00-0                           | PJC FUND VI, LP   | PROVIDENCE    | RI             | PJC FUND VI, LP                                     |   | 04/30/2022                              | 1                                |   | 160,000  |                                     | 1,289,999  |   |
| 2599999                               | Other - Interests in Joint Ventures, Partnerships or Limited Liability Companies (Including Non-Registered Private Funds)- Unaffiliated |               |                |   |   |   |                                  |   | 259,296  |                                     | 1,817,052  | X X X                                   |
|                                       |   |               |                |   |   |   |                                  |   |  |                                     |  |   |
| 6899999                               | Subtotal Unaffiliated   |               |                |   |   |   |                                  |   | 259,296  |                                     | 1,817,052  | X X X                                   |
|                                       |   |               |                |   |   |   |                                  |   |  |                                     |  |   |
|                                       |   |               |                |   |   |   |                                  |   |  |                                     |  |   |
| 7099999                               | Totals  |               |                |   |   |   |                                  |   | 259,296  |                                     | 1,817,052  | X X X                                   |

**E03**

## SCHEDULE BA - PART 3

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

[illegible]

## SCHEDULE D - PART 3

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

[illegible]

SCHEDULE D - PART 4

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

| 1                            | 2  | 3                | 4                    | 5                                     | 6             | 7            | 8              | 9   | Change in Book/Adjusted Carrying Value             |  |  |  |  | 15  | 16   | 17  | 18                                     | 19  | 20                                      | 21  |
|------------------------------|--|------------------|----------------------|---------------------------------------|---------------|--------------|----------------|---|--|--|--|--|--|---|--|---|--|---|---|---|
|                              |  |                  |                      |                                       |               |              |                |   | 10   | 11   | 12   | 13   | 14   |   |  |   |  |   |   |   |
| CUSIP<br>Ident-<br>ification | Description  | Disposal<br>Date | Name of<br>Purchaser | Number<br>of<br>Shares<br>of<br>Stock | Consideration | Par<br>Value | Actual<br>Cost | Prior<br>Year<br>Book/<br>Adjusted<br>Carrying<br>Value | Unrealized<br>Valuation<br>Increase/<br>(Decrease) | Current<br>Year's<br>(Amort-<br>ization)/<br>Accretion | Current<br>Year's<br>Other<br>Than<br>Temporary<br>Impairment<br>Recognize | Total<br>Change<br>in<br>B./A.C.V.<br>(10+11-12) | Total<br>Foreign<br>Exchange<br>Change in<br>B./A.C.V. | Book/<br>Adjusted<br>Carrying<br>Value at<br>Disposal<br>Date | Foreign<br>Exchange<br>Gain<br>(Loss) on<br>Disposal | Realized<br>Gain<br>(Loss) on<br>Disposal | Total<br>Gain<br>(Loss) on<br>Disposal | Bond<br>Interest/<br>Stock<br>Dividends<br>Received<br>During<br>Year | Stated<br>Contractu<br>Maturity<br>Date | NAIC<br>Designation,<br>NAIC<br>Designation<br>Modifier<br>and SVO<br>Administrativ<br>Symbol |
| 230563-CU-0                  | CUMBERLAND CNTY N J IMPT AUTH  | 09/01/202        | Maturity @ 100.00    |                                       | 310,000       | 310,000.00   | 315,056        | 310,670   |  | (670)  |  | (670)  |  | 310,000   |  |   |  | 4,495   | 09/01/202                               | 1.C FE  |
| 0059999999                   | Issuer Credit Obligations - Municipal Bonds - Special Revenues   |                  |                      |                                       | 310,000       | 310,000.00   | 315,056        | 310,670   |  | (670)  |  | (670)  |  | 310,000   |  |   |  | 4,495   | X X X                                   | X X X   |
| EIS                          | 02665W-DL-2  | 07/08/202        | Maturity @ 100.00    |                                       | 850,000       | 850,000.00   | 860,406        | 851,138   |  | (1,138)  |  | (1,138)  |  | 850,000   |  |   |  | 10,200  | 07/08/202                               | 1.G FE  |
|                              | 02665W-DN-8  | 09/10/202        | Maturity @ 100.00    |                                       | 250,000       | 250,000.00   | 250,835        | 250,118   |  | (118)  |  | (118)  |  | 250,000   |  |   |  | 2,500   | 09/10/202                               | 1.G FE  |
|                              | 20030N-CS-8  | 09/22/202        | Call @ 100.00        |                                       | 650,000       | 650,000.00   | 748,333        | 662,489   |  | (12,489)   |  | (12,489)   |  | 650,000   |  |   |  | 24,035  | 10/15/202                               | 1.G FE  |
|                              | 263534-CN-7  | 07/15/202        | Maturity @ 100.00    |                                       | 200,000       | 200,000.00   | 207,252        | 200,682   |  | (682)  |  | (682)  |  | 200,000   |  |   |  | 3,400   | 07/15/202                               | 1.G FE  |
|                              | 38150A-NU-5  | 08/15/202        | Maturity @ 100.00    |                                       | 350,000       | 350,000.00   | 350,000        | 350,000   |  |  |  |  |  | 350,000   |  |   |  | 15,050  | 08/15/202                               | 2.A FE  |
|                              | 46124H-AB-2  | 07/15/202        | Maturity @ 100.00    |                                       | 250,000       | 250,000.00   | 251,695        | 250,160   |  | (160)  |  | (160)  |  | 250,000   |  |   |  | 2,375   | 07/15/202                               | 1.G FE  |
|                              | 559222-AR-5  | 09/24/202        | Call @ 100.00        |                                       | 600,000       | 600,000.00   | 687,456        | 609,476   |  | (9,476)  |  | (9,476)  |  | 600,000   |  |   |  | 24,416  | 10/01/202                               | 1.G FE  |
|                              | 751212-AC-5  | 09/15/202        | Maturity @ 100.00    |                                       | 700,000       | 700,000.00   | 784,355        | 709,529   |  | (9,529)  |  | (9,529)  |  | 700,000   |  |   |  | 26,250  | 09/15/202                               | 1.G FE  |
|                              | 88579Y-AR-2  | 08/07/202        | Maturity @ 100.00    |                                       | 500,000       | 500,000.00   | 526,080        | 502,970   |  | (2,970)  |  | (2,970)  |  | 500,000   |  |   |  | 15,000  | 08/07/202                               | 2.A FE  |
|                              | 89114Q-CK-2  | 09/11/202        | Maturity @ 100.00    |                                       | 300,000       | 300,000.00   | 299,292        | 299,897   |  | 103  |  | 103  |  | 300,000   |  |   |  | 2,250   | 09/11/202                               | 1.G FE  |
|                              | 91324P-CP-5  | 07/15/202        | Maturity @ 100.00    |                                       | 250,000       | 250,000.00   | 273,388        | 252,428   |  | (2,428)  |  | (2,428)  |  | 250,000   |  |   |  | 9,375   | 07/15/202                               | 1.E FE  |
|                              | 966837-AE-6  | 09/05/202        | Call @ 100.00        |                                       | 250,000       | 250,000.00   | 300,275        | 256,947   |  | (6,947)  |  | (6,947)  |  | 250,000   |  |   |  | 9,822   | 12/03/202                               | 1.E FE  |
| 0089999999                   | Issuer Credit Obligations - Corporate Bonds (Unaffiliated)   |                  |                      |                                       | 5,150,000     | 5,150,000.00 | 5,539,367      | 5,195,834   |  | (45,834)   |  | (45,834)   |  | 5,150,000   |  |   |  | 144,673   | X X X                                   | X X X   |
| 31371M-GB-7                  | FN 255894 - RMBS   | 09/01/202        | Paydown              |                                       | 136           | 136.00       | 133            | 135   |  | 1  |  | 1  |  | 136   |  |   |  | 4   | 10/01/202                               | 1.A   |
| 1039999999                   | Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed ( |                  |                      |                                       | 136           | 136.00       | 133            | 135   |  | 1  |  | 1  |  | 136   |  |   |  | 4   | X X X                                   | X X X   |
| 00724F-10-1                  | ADOBE ORD  | 09/02/202        | NATL FINANCIAL SERV  | 357.00                                | 123,026       |              | 135,092        | 158,751   | (23,658)   |  |  | (23,658)   |  | 135,092   |  | (12,067)                                  | (12,067)                               |   |   |   |
| 285512-10-9                  | ELECTRONIC ARTS ORD  | 09/02/202        | NATL FINANCIAL SERV  | 465.00                                | 79,735        |              | 26,717         | 68,030  | (41,313)   |  |  | (41,313)   |  | 26,717  |  | 53,018                                    | 53,018                                 | 265   |   |   |
| 67066G-10-4                  | NVIDIA ORD   | 09/02/202        | NATL FINANCIAL SERV  | 5,315.00                              | 900,043       |              | 70,993         | 713,751   | (642,758)  |  |  | (642,758)  |  | 70,993  |  | 829,049                                   | 829,049                                | 106   |   |   |
| 68389X-10-5                  | ORACLE ORD   | 09/02/202        | NATL FINANCIAL SERV  | 400.00                                | 89,595        |              | 38,929         | 66,656  | (27,727)   |  |  | (27,727)   |  | 34,686  |  | 50,668                                    | 50,668                                 | 560   |   |   |
| 882508-10-4                  | TEXAS INSTRUMENTS ORD  | 09/02/202        | NATL FINANCIAL SERV  | 685.00                                | 135,664       |              | 62,371         | 128,444   | (66,073)   |  |  | (66,073)   |  | 34,910  |  | 73,293                                    | 73,293                                 | 2,795   |   |   |
| 5019999999                   | Common Stock - Industrial and Miscellaneous (Unaffiliated) - Publicly Traded   |                  |                      |                                       | 1,328,063     |              | 334,102        | 1,135,632   | (801,529)  |  |  | (801,529)  |  | 302,398   |  | 993,961                                   | 993,961                                | 3,726   | X X X                                   | X X X   |
|                              |  |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
| 5989999997                   | Subtotal - Common Stock - Part 4   |                  |                      |                                       | 1,328,063     | X X X        | 334,102        | 1,135,632   | (801,529)  |  |  | (801,529)  |  | 302,398   |  | 993,961                                   | 993,961                                | 3,726   | X X X                                   | X X X   |
|                              |  |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
| 5989999998                   | Summary Item from Part 5 for Common Stocks (N/A for Quarterly)   |                  |                      |                                       | X X X         | X X X        | X X X          | X X X   | X X X  | X X X  | X X X  | X X X  | X X X  | X X X   | X X X  | X X X                                     | X X X                                  | X X X   | X X X                                   | X X X   |
|                              |  |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
| 5989999999                   | Total - Common Stocks  |                  |                      |                                       | 1,328,063     | X X X        | 334,102        | 1,135,632   | (801,529)  |  |  | (801,529)  |  | 302,398   |  | 993,961                                   | 993,961                                | 3,726   | X X X                                   | X X X   |

SCHEDULE D - PART 4

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

| 1                            | 2                                   | 3                | 4                    | 5                                     | 6             | 7            | 8              | 9   | Change in Book/Adjusted Carrying Value             |  |  |  |  | 15  | 16   | 17  | 18                                     | 19  | 20                                      | 21  |
|------------------------------|-------------------------------------|------------------|----------------------|---------------------------------------|---------------|--------------|----------------|---|--|--|--|--|--|---|--|---|--|---|---|---|
|                              |                                     |                  |                      |                                       |               |              |                |   | 10   | 11   | 12   | 13   | 14   |   |  |   |  |   |   |   |
| CUSIP<br>Ident-<br>ification | Description                         | Disposal<br>Date | Name of<br>Purchaser | Number<br>of<br>Shares<br>of<br>Stock | Consideration | Par<br>Value | Actual<br>Cost | Prior<br>Year<br>Book/<br>Adjusted<br>Carrying<br>Value | Unrealized<br>Valuation<br>Increase/<br>(Decrease) | Current<br>Year's<br>(Amort-<br>ization)/<br>Accretion | Current<br>Year's<br>Other<br>Than<br>Temporary<br>Impairment<br>Recognize | Total<br>Change<br>in<br>B./A.C.V.<br>(10+11-12) | Total<br>Foreign<br>Exchange<br>Change in<br>B./A.C.V. | Book/<br>Adjusted<br>Carrying<br>Value at<br>Disposal<br>Date | Foreign<br>Exchange<br>Gain<br>(Loss) on<br>Disposal | Realized<br>Gain<br>(Loss) on<br>Disposal | Total<br>Gain<br>(Loss) on<br>Disposal | Bond<br>Interest/<br>Stock<br>Dividends<br>Received<br>During<br>Year | Stated<br>Contractu<br>Maturity<br>Date | NAIC<br>Designation,<br>NAIC<br>Designation<br>Modifier<br>and SVO<br>Administrativ<br>Symbol |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
| 5999999999                   | Total - Preferred and Common Stocks |                  |                      |                                       | 1,328,063     | X X X        | 334,102        | 1,135,632   | (801,529)  |  |  | (801,529)  |  | 302,398   |  | 993,961                                   | 993,961                                | 3,726   | X X X                                   | X X X   |
| E05.1                        |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
|                              |                                     |                  |                      |                                       |               |              |                |   |  |  |  |  |  |   |  |   |  |   |   |   |
| 6009999999                   | Totals                              |                  |                      |                                       | 6,788,199     | X X X        | 6,188,658      | 6,642,271   | (801,529)  | (46,503)   |  | (848,032)  |  | 5,762,534   |  | 993,961                                   | 993,961                                | 152,898   | X X X                                   | X X X   |



**SCHEDULE DB - PART A - SECTION 1**

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

**NONE**

(a)

# NONE

(b)

# NONE

### Future Contracts Open as of the Current Statement Date

**NONE**

# NONE

# E07

**NONE**

**NONE**

## SCHEDULE DB - PART D - SECTION 1

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

[illegible]

SCHEDULE DB - PART D - SECTION 2

Collateral for Derivative Instruments Open as of Current Statement Date

Collateral Pledged by Reporting Entity

| 1   | 2                        | 3                       | 4           | 5          | 6         | 7                                 | 8             | 9                              |
|---|--------------------------|-------------------------|-------------|------------|-----------|-----------------------------------|---------------|--------------------------------|
| Exchange,<br>Counterparty or Central<br>Clearinghouse   | Type of Asset<br>Pledged | CUSIP<br>Identification | Description | Fair Value | Par Value | Book / Adjusted<br>Carrying Value | Maturity Date | Type of Margin<br>(I, V or IV) |
| NONE  |                          |                         |             |            |           |                                   |               |                                |
| 0199999999 Total Collateral Pledged by Reporting Entity |                          |                         |             |            |           |                                   | X X X         | X X X                          |

EO9

Collateral Pledged to Reporting Entity

| 1   | 2                        | 3                       | 4           | 5          | 6         | 7                                 | 8             | 9                              |
|---|--------------------------|-------------------------|-------------|------------|-----------|-----------------------------------|---------------|--------------------------------|
| Exchange,<br>Counterparty or Central<br>Clearinghouse   | Type of Asset<br>Pledged | CUSIP<br>Identification | Description | Fair Value | Par Value | Book / Adjusted<br>Carrying Value | Maturity Date | Type of Margin<br>(I, V or IV) |
| NONE  |                          |                         |             |            |           |                                   |               |                                |
| 0299999999 Total Collateral Pledged to Reporting Entity |                          |                         |             |            |           | X X X                             | X X X         | X X X                          |

## SCHEDULE DB - PART E

Derivatives Hedging Variable Annuity Guarantees as of Current Statement Date

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

[illegible]

## SCHEDULE DL - PART 1

## SECURITIES LENDING COLLATERAL ASSETS

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

[illegible]

General Interrogatories:

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

## SCHEDULE DL - PART 2

## SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

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

| 1                       | 2           | 3                           | 4  | 5             | 6                                       | 7                 |
|-------------------------|-------------|-----------------------------|--|---------------|---|-------------------|
| CUSIP<br>Identification | Description | Restricted<br>Asset<br>Code | NAIC<br>Designation, NAIC<br>Designation<br>Modifier and SVO<br>Administraive Symbol | Fair<br>Value | Book /<br>Adjusted<br>Carrying<br>Value | Maturity<br>Dates |
| NONE                    |             |                             |  |               |   |                   |
| 9999999999              | Totals      |                             |  |               |   | XXX               |

General Interrogatories:

1. Total activity for the year to date

|               |   |
|---------------|---|
| Fair Value \$ | 0 |
|---------------|---|

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

2. Average balance for the year to date

|               |   |
|---------------|---|
| Fair Value \$ | 0 |
| Fair Value \$ | 0 |

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

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

| 1<br><br>Depository   |                        | 2<br><br>Restricted<br>Asset<br>Code | 3<br><br>Rate<br>of<br>Interest | 4<br><br>Amount of<br>Interest<br>Received<br>During Current<br>Quarter | 5<br><br>Amount of<br>Interest<br>Accrued at<br>Current<br>Statement Date | Book Balance at End of Each<br>Month During Current Quarter |              |             | 9<br><br>* |
|---|------------------------|--------------------------------------|---------------------------------|---|---|---|--------------|-------------|------------|
|   |                        |                                      |                                 |   |   | 6   | 7            | 8           |            |
|   |                        |                                      |                                 |   |   | First Month   | Second Month | Third Month |            |
| Name of Depository  | Location of Depository |                                      |                                 |   |   |   |              |             |            |
| CITIZENS BANK - CONTROL 19425961  | PROVIDENCE, RI 02903   |                                      |                                 |   |   | 3,272,928   | 1,386,363    | 1,186,147   |            |
| CITIZENS BANK - OPERATING 19426046  | PROVIDENCE, RI 02903   |                                      |                                 |   |   | (597,132)   | (78,599)     | (155,779)   |            |
| CITIZENS BANK - CLAIMS 99000679   | PROVIDENCE, RI 02903   |                                      |                                 |   |   | (1,440,618)   | (2,257,249)  | (1,689,899) |            |
| FIDELITY - CASH 636-107981  | PROVIDENCE, RI 02903   |                                      |                                 |   |   |   |              | 73,266      |            |
| 0199998 Deposits in ( ) depositories that do<br>not exceed the allowable limit in any one depository<br>(see Instructions) - Open Depositories      |                        | X X X                                | X X X                           |   |   |   |              |             | X X X      |
| 0199999 Total - Open Depositories   |                        | X X X                                | X X X                           |   |   | 1,235,178   | (949,485)    | (586,265)   | X X X      |
| Suspended Depositories  |                        |                                      |                                 |   |   |   |              |             |            |
| 0299998 Deposits in ( ) depositories that do<br>not exceed the allowable limit in any one depository<br>(see Instructions) - Suspended Depositories |                        | X X X                                | X X X                           |   |   |   |              |             | X X X      |
| 0299999 Total Suspended Depositories  |                        | X X X                                | X X X                           |   |   |   |              |             | X X X      |
| 0399999 Total Cash on Deposit   |                        | X X X                                | X X X                           |   |   | 1,235,178   | (949,485)    | (586,265)   | X X X      |
| 0499999 Cash in Company's Office  |                        | X X X                                | X X X                           | X X X   | X X X   | 250   | 250          | 250         | X X X      |
| 0599999 Total   |                        | X X X                                | X X X                           |   |   | 1,235,428   | (949,235)    | (586,015)   | X X X      |



## SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

[illegible]

E14