

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021  
OF THE CONDITION AND AFFAIRS OF THE

# MICO INSURANCE COMPANY

NAIC Group Code	0291 (Current)	0291 (Prior)	NAIC Company Code	40932	Employer's ID Number	31-1022150
Organized under the Laws of Country of Domicile	Ohio			State of Domicile or Port of Entry		OH
				United States of America		
Incorporated/Organized	11/30/1981			Commenced Business	12/03/1981	
Statutory Home Office	471 EAST BROAD STREET (Street and Number)			COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)		
Main Administrative Office	471 EAST BROAD STREET (Street and Number)			COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)		
				614-225-8211 (Area Code) (Telephone Number)		
Mail Address	471 EAST BROAD STREET (Street and Number or P.O. Box)			COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	471 EAST BROAD STREET (Street and Number)			COLUMBUS, OH, US 43215 (City or Town, State, Country and Zip Code)		
				614-225-8211 (Area Code) (Telephone Number)		
Internet Website Address	ENCOVA.COM					
Statutory Statement Contact	AMY E KUHLMAN (Name)			614-225-8285 (Area Code) (Telephone Number)		
	ACCOUNTING@ENCOVA.COM (E-mail Address)			614-225-8330 (FAX Number)		

## OFFICERS

## OTHER

GREGORY ARTHUR BURTON, EXECUTIVE CHAIR	OTHER	
JEFFREY LEIGH BENINTENDI THOMAS JOSEPH OBROKTA, JR	<b>DIRECTORS OR TRUSTEES</b> GRADY BRENDAN CAMPBELL MATTHEW CARL WILCOX	JAMES CHRISTOPHER HOWAT

State of OH County of FRANKLIN SS

**DIRECTORS OR TRUSTEES**  
GRADY BRENDAN CAMPBELL  
MATTHEW CARL WILCOX

JAMES CHRISTOPHER HOWAT

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.

THOMAS JOSPEH OBROKTA JR.  
PRESIDENT & CHIEF EXECUTIVE OFFICER

MARCHELLE ELAINE MOORE  
SECRETARY

JAMES CHRISTOPHER HOWAT  
TREASURER

Subscribed and sworn to before me this  
10th day of February 2022

- a. Is this an original filing? .....
- b. If no,
  - 1. State the amendment number .....
  - 2. Date filed .....

Yes [  ] No [  ]

subscribed and sworn to before me this

MARCHELLE ELAINE MOORE  
SECRETARY

JAMES CHRISTOPHER HOWAT  
TREASURER

subscribed and sworn to before me this

MARCHELLE ELAINE MOORE  
SECRETARY

JAMES CHRISTOPHER HOWAT  
TREASURER



Deborah Dailey  
Notary Public, State of Ohio  
My Commission Expires 11-26-22

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY

**ASSETS**

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	9,192,389		9,192,389	8,645,221
2. Stocks (Schedule D):				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	1,876,631		1,876,631	2,427,700
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....			0	0
3.2 Other than first liens .....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ .....(13,280) , Schedule E - Part 1), cash equivalents (\$ .....22,485,146 , Schedule E - Part 2) and short-term investments (\$ ..... , Schedule DA) .....	22,471,867		22,471,867	956,120
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives (Schedule DB) .....			0	0
8. Other invested assets (Schedule BA) .....	0		0	438,264
9. Receivable for securities .....			0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	33,540,887	0	33,540,887	12,467,305
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	54,869		54,869	44,572
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	486,214		486,214	55,463
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	2,929,854	3,509	2,926,345	272,851
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	471,707		471,707	(13,546)
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0	(24,776)
18.2 Net deferred tax asset .....			0	0
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	767,993		767,993	19,914
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	104,058	0	104,058	(132,439)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	38,355,582	3,509	38,352,073	12,689,344
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	38,355,582	3,509	38,352,073	12,689,344
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0	0
2501. Fees Receivable .....	70,624		70,624	1,932
2502. Surcharges Receivable .....	33,434		33,434	472
2503. Misc Other Assets .....	0		0	(134,843)
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	104,058	0	104,058	(132,439)

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8) .....	.0	.0
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6) .....	.0	.0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9) .....	.0	.0
4. Commissions payable, contingent commissions and other similar charges .....	.0	.0
5. Other expenses (excluding taxes, licenses and fees) .....	15,772	17,234
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	.0	.0
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses)) .....	133,127	.0
7.2 Net deferred tax liability .....	125,477	134,834
8. Borrowed money \$ ..... and interest thereon \$ .....	.0	.0
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ ..... 6,184,261 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... 0 for medical loss ratio rebate per the Public Health Service Act) .....	.0	.0
10. Advance premium .....	.0	.0
11. Dividends declared and unpaid:		
11.1 Stockholders .....	.0	.0
11.2 Policyholders .....	.0	.0
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	1,284,415	67,011
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20) .....	3,442,037	322,016
14. Amounts withheld or retained by company for account of others .....	.0	.0
15. Remittances and items not allocated .....	228,371	(200,476)
16. Provision for reinsurance (including \$ ..... 0 certified) (Schedule F, Part 3, Column 78) .....	.0	.0
17. Net adjustments in assets and liabilities due to foreign exchange rates .....	.0	.0
18. Drafts outstanding .....	.0	.0
19. Payable to parent, subsidiaries and affiliates .....	.0	.0
20. Derivatives .....	.0	.0
21. Payable for securities .....	10,976	.0
22. Payable for securities lending .....	.0	.0
23. Liability for amounts held under uninsured plans .....	.0	.0
24. Capital notes \$ ..... and interest thereon \$ .....	.0	.0
25. Aggregate write-ins for liabilities .....	59,920	(134,055)
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	5,300,094	206,564
27. Protected cell liabilities .....	.0	.0
28. Total liabilities (Lines 26 and 27) .....	5,300,094	206,564
29. Aggregate write-ins for special surplus funds .....	.0	.0
30. Common capital stock .....	2,252,000	2,252,000
31. Preferred capital stock .....	.0	.0
32. Aggregate write-ins for other than special surplus funds .....	.0	.0
33. Surplus notes .....	.0	.0
34. Gross paid in and contributed surplus .....	21,126,000	1,126,000
35. Unassigned funds (surplus) .....	9,673,979	9,104,789
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... ) .....	.0	.0
36.2 ..... shares preferred (value included in Line 31 \$ ..... ) .....	.0	.0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) .....	33,051,979	12,482,789
38. <b>TOTALS (Page 2, Line 28, Col. 3)</b> .....	<b>38,352,073</b>	<b>12,689,353</b>
<b>DETAILS OF WRITE-INS</b>		
2501. Misc. liability .....	59,920	(134,055)
2502. .....	.0	.0
2503. .....	.0	.0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	.0	.0
2599. <b>Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)</b> .....	<b>59,920</b>	<b>(134,055)</b>
2901. .....	.0	.0
2902. .....	.0	.0
2903. .....	.0	.0
2998. Summary of remaining write-ins for Line 29 from overflow page .....	.0	.0
2999. <b>Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)</b> .....	<b>0</b>	<b>0</b>
3201. .....	.0	.0
3202. .....	.0	.0
3203. .....	.0	.0
3298. Summary of remaining write-ins for Line 32 from overflow page .....	.0	.0
3299. <b>Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)</b> .....	<b>0</b>	<b>0</b>

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**STATEMENT OF INCOME**

	1 Current Year	2 Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4).....	0	0
<b>DEDUCTIONS:</b>		
2. Losses incurred (Part 2, Line 35, Column 7).....	0	0
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	0	0
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	0	0
5. Aggregate write-ins for underwriting deductions.....	0	0
6. Total underwriting deductions (Lines 2 through 5).....	0	0
7. Net income of protected cells.....	0	0
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7).....	0	0
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	260,474	203,329
10. Net realized capital gains or (losses) less capital gains tax of \$ 172,188 (Exhibit of Capital Gains (Losses) ).....	647,757	6,160
11. Net investment gain (loss) (Lines 9 + 10).....	908,231	209,489
<b>OTHER INCOME</b>		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ ).....	0	0
13. Finance and service charges not included in premiums.....	1,128	
14. Aggregate write-ins for miscellaneous income.....	0	(4,792)
15. Total other income (Lines 12 through 14).....	0	(3,664)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	908,231	205,825
17. Dividends to policyholders.....		
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	908,231	205,825
19. Federal and foreign income taxes incurred.....	(20,738)	49,019
20. Net income (Line 18 minus Line 19)(to Line 22).....	928,969	156,806
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	12,482,788	12,067,776
22. Net income (from Line 20).....	928,969	156,806
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (76,203).....	(292,933)	342,785
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	(66,845)	(84,579)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3).....	0	0
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....	0	0
29. Change in surplus notes.....		
30. Surplus (contributed to) withdrawn from protected cells.....		
31. Cumulative effect of changes in accounting principles.....		
32. Capital changes:		
32.1 Paid in.....		
32.2 Transferred from surplus (Stock Dividend).....		
32.3 Transferred to surplus.....		
33. Surplus adjustments:		
33.1 Paid in.....	20,000,000	0
33.2 Transferred to capital (Stock Dividend).....		
33.3 Transferred from capital.....		
34. Net remittances from or (to) Home Office.....		
35. Dividends to stockholders.....		
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....	0	0
37. Aggregate write-ins for gains and losses in surplus.....	0	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	20,569,191	415,012
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	33,051,979	12,482,788
<b>DETAILS OF WRITE-INS</b>		
0501.....		
0502.....		
0503.....		
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above).....	0	0
1401. Miscellaneous Revenue.....		(4,792)
1402.....		
1403.....		
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....	0	(4,792)
3701.....		
3702.....		
3703.....		
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above).....	0	0

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	340,859	(261,303)
2. Net investment income .....	281,395	(1,190,328)
3. Miscellaneous income .....	0	(3,664)
4. Total (Lines 1 through 3) .....	622,254	(1,455,295)
5. Benefit and loss related payments .....	31,053	(12,693)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	0	(1,475,464)
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	43,098	26,478
10. Total (Lines 5 through 9) .....	74,151	(1,461,679)
11. Net cash from operations (Line 4 minus Line 10) .....	548,103	6,384
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	2,486,331	2,760,301
12.2 Stocks .....	1,075,640	49,138
12.3 Mortgage loans .....	0	0
12.4 Real estate .....	0	0
12.5 Other invested assets .....	451,708	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0
12.7 Miscellaneous proceeds .....	10,976	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	4,024,654	2,809,439
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	3,043,875	2,736,866
13.2 Stocks .....	105,541	71,954
13.3 Mortgage loans .....	0	0
13.4 Real estate .....	0	0
13.5 Other invested assets .....	3,969	17,443
13.6 Miscellaneous applications .....	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	3,153,385	2,826,263
14. Net increase (decrease) in contract loans and premium notes .....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	871,269	(16,824)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....	0	0
16.2 Capital and paid in surplus, less treasury stock .....	20,000,000	0
16.3 Borrowed funds .....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0
16.5 Dividends to stockholders .....	0	0
16.6 Other cash provided (applied) .....	96,373	90,628
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	20,096,373	90,628
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	21,515,745	80,188
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	956,121	875,933
19.2 End of period (Line 18 plus Line 19.1) .....	22,471,866	956,121

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

20.0001. Non-Cash Exchanges .....	22,978
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## ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire .....				
2. Allied lines .....				
3. Farmowners multiple peril .....				
4. Homeowners multiple peril .....				
5. Commercial multiple peril .....				
6. Mortgage guaranty .....				
8. Ocean marine .....				
9. Inland marine .....				
10. Financial guaranty .....				
11.1 Medical professional liability - occurrence .....				
11.2 Medical professional liability - claims-made .....				
12. Earthquake .....				
13. Group accident and health .....				
14. Credit accident and health (group and individual) .....				
15. Other accident and health .....				
16. Workers' compensation .....				
17.1 Other liability - occurrence .....				
17.2 Other liability - claims-made .....				
17.3 Excess workers' compensation .....				
18.1 Products liability - occurrence .....				
18.2 Products liability - claims-made .....				
19.1, 19.2 Private passenger auto liability .....				
19.3, 19.4 Commercial auto liability .....				
21. Auto physical damage .....				
22. Aircraft (all perils) .....				
23. Fidelity .....				
24. Surety .....				
26. Burglary and theft .....				
27. Boiler and machinery .....				
28. Credit .....				
29. International .....				
30. Warranty .....				
31. Reinsurance - nonproportional assumed property .....				
32. Reinsurance - nonproportional assumed liability .....				
33. Reinsurance - nonproportional assumed financial lines .....				
34. Aggregate write-ins for other lines of business .....				
35. TOTALS .....				
<b>DETAILS OF WRITE-INS</b>				
3401. .....				
3402. .....				
3403. .....				
3498. Summary of remaining write-ins for Line 34 from overflow page .....				
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....				

**NONE**

## ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned But Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire .....					0
2. Allied lines .....					0
3. Farmowners multiple peril .....					0
4. Homeowners multiple peril .....					0
5. Commercial multiple peril .....					0
6. Mortgage guaranty .....					0
8. Ocean marine .....					0
9. Inland marine .....					0
10. Financial guaranty .....					0
11.1 Medical professional liability - occurrence .....					0
11.2 Medical professional liability - claims-made .....					0
12. Earthquake .....					0
13. Group accident and health .....					0
14. Credit accident and health (group and individual) .....					0
15. Other accident and health .....					0
16. Workers' compensation .....					0
17.1 Other liability - occurrence .....					0
17.2 Other liability - claims-made .....					0
17.3 Excess workers' compensation .....					0
18.1 Products liability - occurrence .....					0
18.2 Products liability - claims-made .....					0
19.1, 19.2 Private passenger auto liability .....					0
19.3, 19.4 Commercial auto liability .....					0
21. Auto physical damage .....					0
22. Aircraft (all perils) .....					0
23. Fidelity .....					0
24. Surety .....					0
26. Burglary and theft .....					0
27. Boiler and machinery .....					0
28. Credit .....					0
29. International .....					0
30. Warranty .....					0
31. Reinsurance - nonproportional assumed property .....					0
32. Reinsurance - nonproportional assumed liability .....					0
33. Reinsurance - nonproportional assumed financial lines .....					0
34. Aggregate write-ins for other lines of business	0	0	0	0	0
35. TOTALS	0	0	0	0	0
36. Accrued retrospective premiums based on experience .....					
37. Earned but unbilled premiums .....					
38. Balance (Sum of Line 35 through 37)					0
<b>DETAILS OF WRITE-INS</b>					
3401. ....					
3402. ....					
3403. ....					
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0

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

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 1B - PREMIUMS WRITTEN**

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	58,058	0	0	58,058	0	0
2. Allied lines	89,922	0	0	86,106	3,816	0
3. Farmowners multiple peril	0	0	0	0	0	0
4. Homeowners multiple peril	3,247,851	0	0	3,187,801	60,050	0
5. Commercial multiple peril	0	0	0	0	0	0
6. Mortgage guaranty	0	0	0	0	0	0
8. Ocean marine	0	0	0	0	0	0
9. Inland marine	104,867	0	0	104,867	0	0
10. Financial guaranty	0	0	0	0	0	0
11.1 Medical professional liability - occurrence		0	0	0	0	0
11.2 Medical professional liability - claims-made		0	0	0	0	0
12. Earthquake	32,832	0	0	32,832	0	0
13. Group accident and health	0	0	0	0	0	0
14. Credit accident and health (group and individual)	0	0	0	0	0	0
15. Other accident and health	0	0	0	0	0	0
16. Workers' compensation	0	0	0	0	0	0
17.1 Other liability - occurrence	213,121	0	0	206,060	7,061	0
17.2 Other liability - claims-made	0	0	0	0	0	0
17.3 Excess workers' compensation	0	0	0	0	0	0
18.1 Products liability - occurrence		0	0	0	0	0
18.2 Products liability - claims-made		0	0	0	0	0
19.1, 19.2 Private passenger auto liability	3,839,105	0	0	3,839,105	0	0
19.3, 19.4 Commercial auto liability	0	0	0	0	0	0
21. Auto physical damage	3,396,585	0	0	3,396,585	0	0
22. Aircraft (all perils)	0	0	0	0	0	0
23. Fidelity	0	0	0	0	0	0
24. Surety	0	0	0	0	0	0
26. Burglary and theft	0	0	0	0	0	0
27. Boiler and machinery	0	0	0	0	0	0
28. Credit	0	0	0	0	0	0
29. International	0	0	0	0	0	0
30. Warranty	0	0	0	0	0	0
31. Reinsurance - nonproportional assumed property	XXX	0	0	0	0	0
32. Reinsurance - nonproportional assumed liability	XXX	0	0	0	0	0
33. Reinsurance - nonproportional assumed financial lines	XXX	0	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0
35. TOTALS	10,982,341	0	0	10,911,414	70,927	0
<b>DETAILS OF WRITE-INS</b>						
3401.						
3402.						
3403.						
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [ ] No [ ]

If yes: 1. The amount of such installment premiums \$ .....

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

## ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3 )				
1. Fire .....	7,553	0	7,553	0	0	0	0	0.0
2. Allied lines .....	0	0	0	0	0	0	0	0.0
3. Farmowners multiple peril .....	0	0	0	0	0	0	0	0.0
4. Homeowners multiple peril .....	431,593	0	431,593	0	0	0	0	0.0
5. Commercial multiple peril .....	0	0	0	0	0	0	0	0.0
6. Mortgage guaranty .....	0	0	0	0	0	0	0	0.0
8. Ocean marine .....	0	0	0	0	0	0	0	0.0
9. Inland marine .....	1,129	0	1,129	0	0	0	0	0.0
10. Financial guaranty .....	0	0	0	0	0	0	0	0.0
11.1 Medical professional liability - occurrence .....	0	0	0	0	0	0	0	0.0
11.2 Medical professional liability - claims-made .....	0	0	0	0	0	0	0	0.0
12. Earthquake .....	0	0	0	0	0	0	0	0.0
13. Group accident and health .....	0	0	0	0	0	0	0	0.0
14. Credit accident and health (group and individual) .....	0	0	0	0	0	0	0	0.0
15. Other accident and health .....	0	0	0	0	0	0	0	0.0
16. Workers' compensation .....	0	0	0	0	0	0	0	0.0
17.1 Other liability - occurrence .....	0	0	0	0	0	0	0	0.0
17.2 Other liability - claims-made .....	0	0	0	0	0	0	0	0.0
17.3 Excess workers' compensation .....	0	0	0	0	0	0	0	0.0
18.1 Products liability - occurrence .....	0	0	0	0	0	0	0	0.0
18.2 Products liability - claims-made .....	0	0	0	0	0	0	0	0.0
19.1, 19.2 Private passenger auto liability .....	426,424	0	426,424	0	0	0	0	0.0
19.3, 19.4 Commercial auto liability .....	0	0	0	0	0	0	0	0.0
21. Auto physical damage .....	1,292,570	0	1,292,570	0	0	0	0	0.0
22. Aircraft (all perils) .....	0	0	0	0	0	0	0	0.0
23. Fidelity .....	0	0	0	0	0	0	0	0.0
24. Surety .....	0	0	0	0	0	0	0	0.0
26. Burglary and theft .....	0	0	0	0	0	0	0	0.0
27. Boiler and machinery .....	0	0	0	0	0	0	0	0.0
28. Credit .....	0	0	0	0	0	0	0	0.0
29. International .....	0	0	0	0	0	0	0	0.0
30. Warranty .....	0	0	0	0	0	0	0	0.0
31. Reinsurance - nonproportional assumed property .....	XXX	0	0	0	0	0	0	0.0
32. Reinsurance - nonproportional assumed liability .....	XXX	0	0	0	0	0	0	0.0
33. Reinsurance - nonproportional assumed financial lines .....	XXX	0	0	0	0	0	0	0.0
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0.0
35. TOTALS .....	2,159,269	0	2,159,269	0	0	0	0	0.0
<b>DETAILS OF WRITE-INS</b>								
3401. ....								
3402. ....								
3403. ....								
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0.0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0.0

## ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire .....	114,800	0	114,800	0	2,100	0	2,100	0	0
2. Allied lines .....	0	0	0	0	2,700	0	2,700	0	0
3. Farmowners multiple peril .....	0	0	0	0	0	0	0	0	0
4. Homeowners multiple peril .....	210,334	0	210,334	0	85,000	0	85,000	0	0
5. Commercial multiple peril .....	0	0	0	0	0	0	0	0	0
6. Mortgage guaranty .....	0	0	0	0	0	0	0	0	0
8. Ocean marine .....	0	0	0	0	0	0	0	0	0
9. Inland marine .....	0	0	0	0	5,200	0	5,200	0	0
10. Financial guaranty .....	0	0	0	0	0	0	0	0	0
11.1 Medical professional liability - occurrence .....	0	0	0	0	0	0	0	0	0
11.2 Medical professional liability - claims-made .....	0	0	0	0	0	0	0	0	0
12. Earthquake .....	0	0	0	0	0	0	0	0	0
13. Group accident and health .....	0	0	0	0	0	0	0	(a)	0
14. Credit accident and health (group and individual) .....	0	0	0	0	0	0	0	0	0
15. Other accident and health .....	0	0	0	0	0	0	0	(a)	0
16. Workers' compensation .....	0	0	0	0	0	0	0	0	0
17.1 Other liability - occurrence .....	0	0	0	0	37,000	0	37,000	0	0
17.2 Other liability - claims-made .....	0	0	0	0	0	0	0	0	0
17.3 Excess workers' compensation .....	0	0	0	0	0	0	0	0	0
18.1 Products liability - occurrence .....	0	0	0	0	0	0	0	0	0
18.2 Products liability - claims-made .....	0	0	0	0	0	0	0	0	0
19.1, 19.2 Private passenger auto liability .....	542,361	0	542,361	0	230,000	0	230,000	0	0
19.3, 19.4 Commercial auto liability .....	0	0	0	0	0	0	0	0	0
21. Auto physical damage .....	129,800	0	129,800	0	20,000	0	20,000	0	0
22. Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0
23. Fidelity .....	0	0	0	0	0	0	0	0	0
24. Surety .....	0	0	0	0	0	0	0	0	0
26. Burglary and theft .....	0	0	0	0	0	0	0	0	0
27. Boiler and machinery .....	0	0	0	0	0	0	0	0	0
28. Credit .....	0	0	0	0	0	0	0	0	0
29. International .....	0	0	0	0	0	0	0	0	0
30. Warranty .....	0	0	0	0	0	0	0	0	0
31. Reinsurance - nonproportional assumed property .....	XXX			0	XXX			0	0
32. Reinsurance - nonproportional assumed liability .....	XXX			0	XXX			0	0
33. Reinsurance - nonproportional assumed financial lines .....	XXX			0	XXX			0	0
34. Aggregate write-ins for other lines of business .....	0	0	0	0	0	0	0	0	0
35. TOTALS .....	997,295	0	997,295	0	382,000	0	382,000	0	0
<b>DETAILS OF WRITE-INS</b>									
3401. ....									
3402. ....									
3403. ....									
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0

(a) Including \$ ..... for present value of life indemnity claims.

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct .....	256,943	0	0	256,943
1.2 Reinsurance assumed .....	0	0	0	0
1.3 Reinsurance ceded .....	256,943	0	0	256,943
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3) .....	0	0	0	0
2. Commission and brokerage:				
2.1 Direct excluding contingent .....	0	1,719,538	0	1,719,538
2.2 Reinsurance assumed, excluding contingent .....	0	0	0	0
2.3 Reinsurance ceded, excluding contingent .....	0	1,719,538	0	1,719,538
2.4 Contingent - direct .....	0	66,799	0	66,799
2.5 Contingent - reinsurance assumed .....	0	0	0	0
2.6 Contingent - reinsurance ceded .....	0	66,799	0	66,799
2.7 Policy and membership fees .....	0	0	0	0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) .....	0	0	0	0
3. Allowances to managers and agents .....	0	0	0	0
4. Advertising .....	0	0	0	0
5. Boards, bureaus and associations .....	0	0	0	0
6. Surveys and underwriting reports .....	0	0	0	0
7. Audit of assureds' records .....	0	0	0	0
8. Salary and related items:				
8.1 Salaries .....	0	0	4,286	4,286
8.2 Payroll taxes .....	0	0	179	179
9. Employee relations and welfare .....	0	0	820	820
10. Insurance .....	0	0	0	0
11. Directors' fees .....	0	0	635	635
12. Travel and travel items .....	0	0	548	548
13. Rent and rent items .....	0	0	6,529	6,529
14. Equipment .....	0	0	843	843
15. Cost or depreciation of EDP equipment and software .....	0	0	637	637
16. Printing and stationery .....	0	0	28	28
17. Postage, telephone and telegraph, exchange and express .....	0	0	2,749	2,749
18. Legal and auditing .....	0	0	192	192
19. Totals (Lines 3 to 18) .....	0	0	17,446	17,446
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....	0	0	0	0
20.2 Insurance department licenses and fees .....	0	0	0	0
20.3 Gross guaranty association assessments .....	0	0	0	0
20.4 All other (excluding federal and foreign income and real estate) .....	0	0	18,746	18,746
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) .....	0	0	18,746	18,746
21. Real estate expenses .....	0	0	0	0
22. Real estate taxes .....	0	0	0	0
23. Reimbursements by uninsured plans .....	0	0	0	0
24. Aggregate write-ins for miscellaneous expenses .....	0	0	1,357	1,357
25. Total expenses incurred .....	0	0	37,548	(a) 37,548
26. Less unpaid expenses - current year .....	0	0	15,772	15,772
27. Add unpaid expenses - prior year .....	0	0	17,234	17,234
28. Amounts receivable relating to uninsured plans, prior year .....	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year .....	0	0	0	0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29) .....	0	0	39,010	39,010
<b>DETAILS OF WRITE-INS</b>				
2401. c .....			1,357	1,357
2402. .....				
2403. .....				
2498. Summary of remaining write-ins for Line 24 from overflow page .....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above) .....	0	0	1,357	1,357

(a) Includes management fees of \$ ..... to affiliates and \$ ..... to non-affiliates.

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**EXHIBIT OF NET INVESTMENT INCOME**

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds .....	(a) .....	(11,871)
1.1 Bonds exempt from U.S. tax .....	(a) .....	(11,871)
1.2 Other bonds (unaffiliated) .....	(a) .....	192,099
1.3 Bonds of affiliates .....	(a) .....	176,746
2.1 Preferred stocks (unaffiliated) .....	(b) .....	113,117
2.11 Preferred stocks of affiliates .....	(b) .....	112,852
2.2 Common stocks (unaffiliated) .....	(c) .....	348
2.21 Common stocks of affiliates .....	(d) .....	523
3. Mortgage loans .....	(e) .....	3,969
4. Real estate .....	(f) .....	3,969
5. Contract loans .....	(g) .....	0
6. Cash, cash equivalents and short-term investments .....	(h) .....	450
7. Derivative instruments .....	(i) .....	450
8. Other invested assets .....	(j) .....	298,022
9. Aggregate write-ins for investment income .....	(k) .....	287,725
10. Total gross investment income .....	(l) .....	287,725
11. Investment expenses .....	(g) .....	18,803
12. Investment taxes, licenses and fees, excluding federal income taxes .....	(g) .....	18,746
13. Interest expense .....	(h) .....	0
14. Depreciation on real estate and other invested assets .....	(i) .....	0
15. Aggregate write-ins for deductions from investment income .....	(j) .....	0
16. Total deductions (Lines 11 through 15) .....	(k) .....	37,548
17. Net investment income (Line 10 minus Line 16) .....	(l) .....	260,474
<b>DETAILS OF WRITE-INS</b>		
0901. Miscellaneous income .....	431	431
0902. Prior year income .....	19	19
0903. .....	0	0
0998. Summary of remaining write-ins for Line 9 from overflow page .....	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	450	450
1501. .....	0	0
1502. .....	0	0
1503. .....	0	0
1598. Summary of remaining write-ins for Line 15 from overflow page .....	0	0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....	0	0

(a) Includes \$ 9,513 accrual of discount less \$ 42,194 amortization of premium and less \$ 769 paid for accrued interest on purchases.

(b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.

(c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.

(d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.

(e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

(f) Includes \$ accrual of discount less \$ amortization of premium.

(g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.

(h) Includes \$ interest on surplus notes and \$ interest on capital notes.

(i) Includes \$ 0 depreciation on real estate and \$ depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds .....	114,898	0	114,898	(111,368)	0
1.1 Bonds exempt from U.S. tax .....	0	0	0	0	0
1.2 Other bonds (unaffiliated) .....	18,679	0	18,679	95	0
1.3 Bonds of affiliates .....	0	0	0	0	0
2.1 Preferred stocks (unaffiliated) .....	0	0	0	0	0
2.11 Preferred stocks of affiliates .....	0	0	0	0	0
2.2 Common stocks (unaffiliated) .....	469,455	(123)	469,332	(50,303)	0
2.21 Common stocks of affiliates .....	0	0	0	0	0
3. Mortgage loans .....	0	0	0	0	0
4. Real estate .....	0	0	0	0	0
5. Contract loans .....	0	0	0	0	0
6. Cash, cash equivalents and short-term investments .....	0	0	0	0	0
7. Derivative instruments .....	0	0	0	0	0
8. Other invested assets .....	217,035	0	217,035	(207,559)	0
9. Aggregate write-ins for capital gains (losses) .....	0	0	0	0	0
10. Total capital gains (losses) .....	820,068	(123)	819,945	(369,136)	0
<b>DETAILS OF WRITE-INS</b>			0	0	0
0901. .....	0	0	0	0	0
0902. .....	0	0	0	0	0
0903. .....	0	0	0	0	0
0998. Summary of remaining write-ins for Line 9 from overflow page .....	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	0	0	0	0	0

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**EXHIBIT OF NON-ADMITTED ASSETS**

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....		0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....		0	0
2.2 Common stocks .....		0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....		0	0
3.2 Other than first liens .....		0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....		0	0
4.2 Properties held for the production of income .....		0	0
4.3 Properties held for sale .....		0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....		0	0
6. Contract loans .....		0	0
7. Derivatives (Schedule DB) .....		0	0
8. Other invested assets (Schedule BA) .....		0	0
9. Receivables for securities .....		0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....		0	0
11. Aggregate write-ins for invested assets .....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	0	0	0
13. Title plants (for Title insurers only) .....		0	0
14. Investment income due and accrued .....		0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....		0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....	3,509	3,509	0
15.3 Accrued retrospective premiums and contracts subject to redetermination .....		0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....		0	0
16.2 Funds held by or deposited with reinsured companies .....		0	0
16.3 Other amounts receivable under reinsurance contracts .....		0	0
17. Amounts receivable relating to uninsured plans .....		0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....		0	0
18.2 Net deferred tax asset .....		0	0
19. Guaranty funds receivable or on deposit .....		0	0
20. Electronic data processing equipment and software .....		0	0
21. Furniture and equipment, including health care delivery assets .....		0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....		0	0
23. Receivables from parent, subsidiaries and affiliates .....		0	0
24. Health care and other amounts receivable .....		0	0
25. Aggregate write-ins for other than invested assets .....	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	3,509	3,509	0
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		0	0
28. Total (Lines 26 and 27) .....	3,509	3,509	0
<b>DETAILS OF WRITE-INS</b>			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0
2501. ....			
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	0	0	0

## NOTES TO FINANCIAL STATEMENTS

**NOTE 1 Summary of Significant Accounting Policies and Going Concern**
**A. Accounting Practices**

This statement has been completed in accordance with the accounting practices and procedures prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the State of Ohio. A reconciliation of the company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below.

	F/S SSAP #	F/S Page	F/S Line #	2021	2020
<b>NET INCOME</b>					
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 928,969	\$ 156,806
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 928,969	\$ 156,806
<b>SURPLUS</b>					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 33,051,979	\$ 12,482,789
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 33,051,979	\$ 12,482,789

The preparation of financial statements in conformity with Statutory Accounting Principles as described in the NAIC Annual Statement Instructions and the Accounting Policies and Procedures Manual requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

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

The preparation of financial statements in conformity with Statutory Accounting Principles as described in the NAIC Annual Statement Instructions and the Accounting Policies and Procedures Manual requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

**C. Accounting Policy**

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by daily and pro rata methods for direct business and are based on reports received from ceding companies and/or pools for assumed business.

- (1) Basis for Short-Term Investments  
Short-term investments consist of class 1 money market mutual funds, agencies, and treasury bonds. Short term investments are stated at amortized cost.
- (2) Basis for Bonds and Amortization Schedule  
Bonds not back by other loans are stated at amortized cost using the scientific amortization method.
- (3) Basis for Common Stocks  
Common Stocks are valued at market.
- (4) Basis for Preferred Stocks  
Preferred stocks are stated in accordance with the guidance provided in SSAP No. 32: Investments in Preferred Stock.
- (5) Basis for Mortgage Loans  
The Company did not have any mortgage loans.
- (6) Basis for Loan-Backed Securities and Adjustment Methodology  
Loan-backed securities are stated in accordance with the guidance provided in SSAP No. 43R: Loan-backed and Structured Securities. The retrospective adjustment method is used to value these securities
- (7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities  
The Company does not have any investments in subsidiaries or affiliates
- (8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities  
The Company has investments in limited partnerships and limited liability companies. In accordance with SSAP No. 48: Joint Ventures, Partnerships and Limited Liability Companies, the investments are recorded using the equity method of accounting based on the underlying audited U.S. GAAP equity values of the holdings. The company also has partnership investments in low income housing tax credit properties. In accordance with SSAP No. 93: Accounting for Low Income Housing Tax Credit Property Investments, the investments are reported at amortized cost.
- (9) Accounting Policies for Derivatives  
The Company does not hold any derivative instruments.
- (10) Anticipated Investment Income Used in Premium Deficiency Calculation  
The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53: Property/Casualty Contracts -Premiums
- (11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses  
Unpaid loss and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based upon past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates. While management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments reflected in the period determined.
- (12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period  
The Motorists Insurance Group standardized its thresholds for capitalization across all member companies. The Group also implemented updates for software licenses and maintenance agreements that allow amortization over service periods for material transactions.

# NOTES TO FINANCIAL STATEMENTS

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(13) Method Used to Estimate Pharmaceutical Rebate Receivables  
 The Company has no pharmaceutical rebate receivables to report.

## D. Going Concern

Management has concluded that 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**

A. Discontinued Operation Disposed of or Classified as Held for Sale  
 Not Applicable

B. Change in Plan of Sale of Discontinued Operation  
 Not Applicable

C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal  
 Not Applicable

D. Equity Interest Retained in the Discontinued Operation After Disposal  
 Not Applicable

**NOTE 5 Investments**

A. Mortgage Loans, including Mezzanine Real Estate Loans  
 Not Applicable

B. Debt Restructuring  
 Not Applicable

C. Reverse Mortgages  
 Not Applicable

D. Loan-Backed Securities  
 (1) Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from Broker dealer survey values and internal estimates.

(2)-(3) Not Applicable

(4) At December 31, 2021, the estimated fair value and gross unrealized losses for loan-backed securities, aggregated 'by length of time the securities have been in a continuous loss position were as follows:

a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ 27,922
2. 12 Months or Longer	\$ -

b) The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$ 2,136,348
2. 12 Months or Longer	\$ -

(5) The company performed an analysis of loan-backed securities and determined that exposure to credit risk was not a factor and did not warrant any other-than-temporary impairments.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions  
 Not Applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing  
 Not Applicable

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing  
 Not Applicable

H. Repurchase Agreements Transactions Accounted for as a Sale  
 Not Applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale  
 Not Applicable

J. Real Estate  
 Not Applicable

K. Low Income Housing tax Credits (LIHTC)  
 Not Applicable

## NOTES TO FINANCIAL STATEMENTS

## L. Restricted Assets

## 1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						6	7		
	Current Year					5				
	1	2	3	4						
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)			
a. Subject to contractual obligation for which liability is not shown					\$ -	\$ -	\$ -			
b. Collateral held under security lending agreements					\$ -	\$ -	\$ -			
c. Subject to repurchase agreements					\$ -	\$ -	\$ -			
d. Subject to reverse repurchase agreements					\$ -	\$ -	\$ -			
e. Subject to dollar repurchase agreements					\$ -	\$ -	\$ -			
f. Subject to dollar reverse repurchase agreements					\$ -	\$ -	\$ -			
g. Placed under option contracts					\$ -	\$ -	\$ -			
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock					\$ -	\$ -	\$ -			
i. FHLB capital stock					\$ -	\$ -	\$ -			
j. On deposit with states	\$ 2,077,652				\$ 2,077,652	\$ 2,079,666	\$ (2,014)			
k. On deposit with other regulatory bodies					\$ -	\$ -	\$ -			
l. Pledged collateral to FHLB (including assets backing funding agreements)					\$ -	\$ -	\$ -			
m. Pledged as collateral not captured in other categories					\$ -	\$ -	\$ -			
n. Other restricted assets					\$ -	\$ -	\$ -			
o. Total Restricted Assets	\$ 2,077,652	\$ -	\$ -	\$ -	\$ 2,077,652	\$ 2,079,666	\$ (2,014)			

(a) Subset of Column 1

(b) Subset of Column 3

Restricted Asset Category	Current Year				11			
	8	9	Percentage					
			10	11				
Restricted Asset Category	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)				
a. Subject to contractual obligation for which liability is not shown		\$ -	0.000%	0.000%				
b. Collateral held under security lending agreements		\$ -	0.000%	0.000%				
c. Subject to repurchase agreements		\$ -	0.000%	0.000%				
d. Subject to reverse repurchase agreements		\$ -	0.000%	0.000%				
e. Subject to dollar repurchase agreements		\$ -	0.000%	0.000%				
f. Subject to dollar reverse repurchase agreements		\$ -	0.000%	0.000%				
g. Placed under option contracts		\$ -	0.000%	0.000%				
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		\$ -	0.000%	0.000%				
i. FHLB capital stock		\$ -	0.000%	0.000%				
j. On deposit with states	\$ 2,077,652		5.417%	5.417%				
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%				
l. Pledged collateral to FHLB (including assets backing funding agreements)		\$ -	0.000%	0.000%				
m. Pledged as collateral not captured in other categories		\$ -	0.000%	0.000%				
n. Other restricted assets		\$ -	0.000%	0.000%				
o. Total Restricted Assets	\$ -	\$ 2,077,652	5.417%	5.417%				

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

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

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)  
Not Applicable
3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)  
Not Applicable
4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements  
Not Applicable

M. Working Capital Finance Investments  
Not ApplicableN. Offsetting and Netting of Assets and Liabilities  
Not ApplicableO. 5GI Securities  
Not Applicable

## NOTES TO FINANCIAL STATEMENTS

P. Short Sales  
Not Applicable

Q. Prepayment Penalty and Acceleration Fees

General Account    Protected Cell

1. Number of CUSIPs
2. Aggregate Amount of Investment Income

R. Reporting Entity's Share of Cash Pool by Asset Type  
Not Applicable

**NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies**  
Not Applicable

**NOTE 7 Investment Income**  
Not Applicable

**NOTE 8 Derivative Instruments**

Not Applicable

**NOTE 9 Income Taxes**

A. Deferred Tax Assets/(Liabilities)

1. The components of the net deferred tax assets/(liabilities)

	2021			2020			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	\$ 10,005	\$ 203	\$ 10,208	\$ 65,262	\$ 1,519	\$ 66,781	\$ (55,257)	\$ (1,316)	\$ (56,573)
(b) Statutory Valuation Allowance Adjustment			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 10,005	\$ 203	\$ 10,208	\$ 65,262	\$ 1,519	\$ 66,781	\$ (55,257)	\$ (1,316)	\$ (56,573)
(d) Deferred Tax Assets Nonadmitted			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 10,005	\$ 203	\$ 10,208	\$ 65,262	\$ 1,519	\$ 66,781	\$ (55,257)	\$ (1,316)	\$ (56,573)
(f) Deferred Tax Liabilities	\$ 11,796	\$ 123,888	\$ 135,684	\$ 208	\$ 201,407	\$ 201,615	\$ 11,588	\$ (77,519)	\$ (65,931)
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (1,791)	\$ (123,685)	\$ (125,476)	\$ 65,054	\$ (199,888)	\$ (134,834)	\$ (66,845)	\$ 76,203	\$ 9,358

2. Admission Calculation Components SSAP No. 101

	2021			2020			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.			\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	\$ 4,934,276	XXX	XXX	\$ 1,876,337	XXX	XXX	\$ 3,057,939
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ 10,005	\$ 203	\$ 10,208	\$ 65,262	\$ 1,519	\$ 66,781	\$ (55,257)	\$ (1,316)	\$ (56,573)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 10,005	\$ 203	\$ 10,208	\$ 65,262	\$ 1,519	\$ 66,781	\$ (55,257)	\$ (1,316)	\$ (56,573)

3. Other Admissibility Criteria

2021                    2020

- a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount. 16386.540% 4359.000%
- b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above. \$ 32,895,173 \$ 12,508,912

## NOTES TO FINANCIAL STATEMENTS

## 4. Impact of Tax Planning Strategies

	2021		2020		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 10,005	\$ 203	\$ 65,262	\$ 1,519	\$ (55,257)	\$ (1,316)
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies			0.000%	0.000%	0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 10,005	\$ 203	\$ 65,262	\$ 1,519	\$ (55,257)	\$ (1,316)
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies			0.000%	0.000%	0.000%	0.000%

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

Yes [ ] No [ X ]

## B. Deferred Tax Liabilities that are not recognized

Not Applicable

## C. Current income taxes incurred consist of the following major components:

1. Current Income Tax
  - (a) Federal
  - (b) Foreign
  - (c) Subtotal
- (d) Federal income tax on net capital gains
- (e) Utilization of capital loss carry-forwards
- (f) Other
- (g) Federal and foreign income taxes incurred

(1) 2021	(2) 2020	(3) (Col. 1 - 2) Change
\$ (13,122)	\$ 52,213	\$ (65,335)
\$ (13,122)	\$ 52,213	\$ (65,335)
\$ 172,188	\$ 1,607	\$ 170,581
\$ (7,616)	\$ (3,194)	\$ (4,422)
\$ 151,450	\$ 50,626	\$ 100,824

2. Deferred Tax Assets:
  - (a) Ordinary:
    - (1) Discounting of unpaid losses
    - (2) Unearned premium reserve
    - (3) Policyholder reserves
    - (4) Investments
    - (5) Deferred acquisition costs
    - (6) Policyholder dividends accrual
    - (7) Fixed Assets
    - (8) Compensation and benefits accrual
    - (9) Pension accrual
    - (10) Receivables - nonadmitted
    - (11) Net operating loss carry-forward
    - (12) Tax credit carry-forward
    - (13) Other (including items <5% of total ordinary tax assets)
    - (99) Subtotal
  - (b) Statutory valuation allowance adjustment
  - (c) Nonadmitted
  - (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)
  - (e) Capital:
    - (1) Investments
    - (2) Net capital loss carry-forward
    - (3) Real estate
    - (4) Other (including items <5% of total ordinary tax assets)
    - (99) Subtotal
  - (f) Statutory valuation allowance adjustment
  - (g) Nonadmitted
  - (h) Admitted capital deferred tax assets (2e99 - 2f - 2g)
  - (i) Admitted deferred tax assets (2d + 2h)

(1) 2021	(2) 2020	(3) (Col. 1 - 2) Change
\$ 9,268	\$ 64,525	\$ (55,257)
\$ 737	\$ 737	\$ -
\$ 10,005	\$ 65,262	\$ (55,257)
\$ 203	\$ 1,519	\$ (1,316)
\$ 203	\$ 1,519	\$ (1,316)
\$ 203	\$ 1,519	\$ (1,316)
\$ 10,208	\$ 66,781	\$ (56,573)

## NOTES TO FINANCIAL STATEMENTS

3. Deferred Tax Liabilities:

(a) Ordinary:

- (1) Investments
- (2) Fixed Assets
- (3) Deferred and uncollected premium
- (4) Policyholder reserves
- (5) Other (including items <5% of total ordinary tax liabilities)
- (99) Subtotal

(b) Capital:

- (1) Investments
- (2) Real estate
- (3) Other (including items <5% of total capital tax liabilities)
- (99) Subtotal

(c) Deferred tax liabilities (3a99 + 3b99)

4. Net deferred tax assets/liabilities (2i - 3c)

(1) 2021	(2) 2020	(3) (Col. 1 - 2) Change
\$ 11,796	\$ 208	\$ 11,588
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
<b>\$ 11,796</b>	<b>\$ 208</b>	<b>\$ 11,588</b>
\$ 123,888	\$ 201,407	\$ (77,519)
\$ -	\$ -	\$ -
\$ -	\$ -	\$ -
<b>\$ 123,888</b>	<b>\$ 201,407</b>	<b>\$ (77,519)</b>
<b>\$ 135,684</b>	<b>\$ 201,615</b>	<b>\$ (65,931)</b>
<b>\$ (125,476)</b>	<b>\$ (134,834)</b>	<b>\$ 9,358</b>

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

2021	
Amount	Effective Tax Rate (%)
\$ 226,888	21.0%
\$ (1,745)	-0.2%
\$ (5,531)	-0.5%
<b>\$ 219,612</b>	<b>20.3%</b>
\$ 151,450	14.0%
\$ -	%
\$ 68,162	6.3%
<b>\$ 219,612</b>	<b>20.3%</b>

E. Operating Loss and Tax Carry Forwards and Protective Tax Deposits

- (1) At December 31, 2021, the Company did not have any operating loss or tax credit carry forwards.
- (2) At December 31, 2021, the Company did not have any income tax expense for the current year that is available for recoupment.
- (3) The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

F. Consolidated Federal Income Tax Return

- (1) The Company's Federal income tax return is consolidated with the following entities:

AlleghenyPoint Insurance Company  
 BrickStreet Mutual Insurance Company  
 Consumers Insurance USA, Inc.  
 Encova Insurance Agency, Inc  
 Encova Service Corporation  
 Iowa American Insurance Company  
 Iowa Mutual Insurance Company  
 MCM Insurance Agency Inc of MA  
 Motorists Commercial Mutual Insurance Company  
 Motorists Mutual Insurance Company  
 NorthStone Insurance Company  
 Phenix Mutual Fire Insurance Company  
 PinnaclePoint Insurance Company  
 SummitPoint Insurance Company  
 Wilson Mutual Insurance Company

- (2) The method of allocation between the companies is subject to written agreement, approved by the Board of Directors. Allocation is based upon separate return calculations with current credit for net losses. Intercompany tax balances are settled annually when the federal income tax return is filed.

G. Federal or Foreign Federal Income Tax Loss Contingencies

As of December 31, 2021, the Company had no unrecognized tax benefits.

H. Repatriation Transition Tax (RTT)

The Company is not subject to the Repatriation Transition Tax.

I. Alternative Minimum Tax (AMT) Credit

Not Applicable

## NOTES TO FINANCIAL STATEMENTS

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**NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**
**A. Nature of the Relationship Involved**

Effective January 1, 2021, a mutual holding company structure went into effect. Through this conversion, the Company's parent company and mutual affiliates became stock companies under Encova Holdings, Inc., which is 100% owned by Encova Mutual Insurance Group, Inc.

The Company is a member of an affiliated group of companies and is party to various transactions and agreements with other members of the group. Primarily those transactions are composed of:

- IT and Payroll processing services are provided by a non-insurance member of the group.
- The P&C Companies within the group participate in a pooling arrangement.
- The lead company to the pool provides management services to the other members of the Group. All Companies in the Group are parties to a cost sharing.
- The Various companies have entered into a tax sharing agreement with each company that qualifies to be included in a consolidated return.
- Selected members of the group participated in intercompany loan agreements.

**B. Transactions**

Not Applicable

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

Not Applicable

**D. Amounts Due From or To Related Parties**

As of December 31, 2021 and 2020, the Company reported net amounts due from/(due to) affiliates of \$767,993 and \$19,914 respectively. All amounts were settled within 60 days.

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

See Note A

**F. Guarantees or Undertakings**

The Company had no guarantees or undertakings for the benefit of an affiliate or related party that resulted in a material contingency exposure to the Company or any related parties during the periods reported.

**G. Nature of the Control Relationship**

As of December 31, 2021, all outstanding shares of the Company were owned by Motorists Mutual Insurance Company, an Ohio-based property/casualty insurer.

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

The Company did not own any shares, directly or indirectly, of an upstream intermediate entity or ultimate parent during the periods reported.

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

The Company did not have any investments in subsidiary, controlled, or affiliated entities that exceed 10% of admitted assets during the periods reported.

**J. Investments in Impaired SCAs**

The Company did not recognize any impairment write-downs for investments in subsidiary, controlled, or affiliated entities during the periods reported.

**K. Investment in Foreign Insurance Subsidiary**

The Company did not have any investments in foreign insurance subsidiaries during the periods reported.

**L. Investment in Downstream Noninsurance Holding Company**

The Company did not have any investments in downstream non-insurance holding companies.

**M. All SCA Investments**

Not Applicable

**N. Investment in Insurance SCAs**

Not Applicable

**O. SCA or SSAP 48 Entity Loss Tracking**

Not Applicable

**NOTE 11 Debt**
**A. Debt, Including Capital Notes**

Not Applicable

**B. FHLB (Federal Home Loan Bank) Agreements**

Not Applicable

**NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**
**A. Defined Benefit Plan**

Not Applicable

**B. Investment Policies and Strategies**

Not Applicable

**C. The fair value of each class of plan assets**

Not Applicable

**D. Basis Used to Determine Expected Long-Term Rate-of-Return on Assets Assumption**

Not Applicable

**E. Defined Contribution Plan**

The Company participates in an Incentive Savings Plan under Section 401(k) of the Internal Revenue Code sponsored by Motorists Mutual Insurance Company covering substantially all of its employees. The Plan matches employee contributions of 5% and 7% of total eligible compensation for 2021 and 2020, respectively. Employer contributions are immediately vested. The Company's share of the contribution to the plan was \$34,872 and \$2,724, respectively. The Company participates in two Non-qualified supplemental retirement plans for selected employees. One plan provides for contributions at the Company's discretion on a yearly basis. The other is composed of a single contribution for selected employees. Employees vest at age 60 or when certain vesting events occur. The Company's share of the expenses is allocated through the cost allocation model.

## NOTES TO FINANCIAL STATEMENTS

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- F. Multiemployer Plans  
Not Applicable
- G. Consolidated/Holding Company Plans  
The Company participated in a non-contributory defined pension plan sponsored by Motorists, until Motorists elected to freeze its benefit plans effective December 31, 2017. In addition, the Company shares in certain other post-retirement benefits provided through a plan sponsored by Motorists Mutual. The Company has no legal obligation for benefits under these plans. Motorists Mutual allocates amounts to the Company based on a cost sharing agreement. In 2021 and 2020, the Company was allocated (\$124,013) and \$2,576, respectively, as a portion of the periodic pension costs and post-retirement benefits.
- H. Postemployment Benefits and Compensated Absences  
The Company generally has no obligations to current or former employees for benefits after their employment but before their retirement other than for compensation related to earned paid time off. The liability for earned but unused paid time off has been accrued.
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)  
Not Applicable

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

- A. Number of Share and Par or State Value of Each Class  
As of December 31, 2021, the Company had 1,000 shares authorized and 563 shares issued and outstanding with a par value of \$4,000.
- B. Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues  
Not Applicable
- C. Dividend Restrictions  
Not Applicable
- D. Dates and Amounts of Dividends Paid  
Not Applicable
- E. Profits that may be Paid as Ordinary Dividends to Stockholders  
Not Applicable
- F. Restrictions Placed on Unassigned Funds (Surplus)  
Not Applicable
- G. Amount of Advances to Surplus not Repaid  
Not Applicable
- H. Amount of Stock Held for Special Purposes  
Not Applicable
- I. Reasons for Changes in Balance of Special Surplus Funds from Prior Period  
Not Applicable
- J. The Portion of Unassigned Funds (Surplus) Represented or Reduced by Cumulative Unrealized Gains and Losses is \$589,942.
- K. The Company Issued the Following Surplus Debentures or Similar Obligations  
Not Applicable
- L. The Impact of Any Restatement Due to Prior Quasi-Reorganizations is as Follows:  
Not Applicable
- M. Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization  
Not Applicable

**NOTE 14 Liabilities, Contingencies and Assessments**

- A. Contingent Commitments  
Not Applicable
- B. Assessments
  - (1) Nature of Any Assets That Could Have a Material Financial Effect  
The Company is subject to guaranty fund and other assessments by the states in which it conducts business. Guaranty fund assessments are accrued upon notification of the insolvency. Other assessments are recognized 1) when assessed by a state, 2) when premiums are written for premium-based assessments, or 3) when losses are incurred for loss based assessments. Incurred assessments are subject to the intercompany pooling arrangement described in Note 26. The company's net paid guaranty fund assessments totaled \$0 for the years ended December 31, 2021 and 2020, respectively. The company's net accrued liabilities for guaranty funds were \$0 as of December 31, 2021 and 2020, respectively. Per the accounting practices and procedures prescribed by the company's state of domicile, receivables for premium tax credits are not reflected in the accompanying financial statements.
  - (2) Assessments  
Not Applicable
  - (3) Undiscounted and Discounted Guaranty Fund Assessments  
Not Applicable
- C. Gain Contingencies  
Not Applicable
- D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits  
Not Applicable
- E. Product Warranties
  - (1)-(2) Not Applicable

## NOTES TO FINANCIAL STATEMENTS

F. Joint and Several Liabilities  
Not Applicable

G. All Other Contingencies  
Not Applicable

**NOTE 15 Leases**

A. Lessee Operating Lease:

- (1) The Company has allocated expenses related to leases of building space, vehicles, and various office equipment. The Company recognized expense for the years ending December 31, 2021 and 2020 of \$16,508 and \$782, respectively.
- (2) a. At December 31, 2021, the minimum aggregate rental commitments are as follows:  
Not applicable
- (3) For Sale-Leaseback Transactions  
Not applicable

B. Lessor Leases  
Not Applicable

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

Not Applicable

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

A. Transfers of Receivables Reported as Sales  
Not Applicable

B. Transfer and Servicing of Financial Assets  
Not Applicable

C. Wash Sales  
Not Applicable

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

Not Applicable

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

Not Applicable

**NOTE 20 Fair Value Measurements**

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

SSAP No. 100, Fair Value Measurements, clarifies the definition of estimated fair value and establishes a hierarchy for measuring estimated fair value. The hierarchy established by this standard consists of three levels to indicate the quality of the estimated fair value measurements as described below:

Level 1 - Quoted Prices in Active Markets for Identical Assets and Liabilities: Unadjusted quoted prices for identical assets or liabilities in active markets that are readily and regularly obtainable.

Level 2 - Significant Other Observable Inputs: Quoted prices in markets that are not active or inputs that are observable either directly or indirectly. These inputs can include quoted prices for similar but not identical assets or liabilities other than quoted prices in Level 1.

Level 3 - Significant Unobservable Inputs: Unobservable inputs that are supported by little or no market activity and are significant to the determination of estimated fair value of assets or liabilities. Unobservable inputs reflect the entity's assumptions about the assumptions that market participants would use in pricing the asset or liability.

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value Common Stocks, unaffiliated	\$ 1,876,631				\$ 1,876,631
Total assets at fair value/NAV	\$ 1,876,631	\$ -	\$ -	\$ -	\$ 1,876,631

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

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

Not Applicable

(3) Policies when Transfers Between Levels are Recognized

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred between Levels 1, 2 or 3. The Company had no transfers into or out of any of the levels during the years ended December 31, 2021 and 2020.

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

Common Stocks, unaffiliated- According to statutory accounting rules, common stocks are reported at fair value.

(5) Fair Value Disclosures

Not Applicable

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements  
Not Applicable

## NOTES TO FINANCIAL STATEMENTS

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## C. Fair Value Level

accounted for under the equity method (subsidiaries, joint ventures and ventures). The estimated fair values are categorized into the three-level fair value hierarchy as described above.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 9,447,817	\$ 9,192,389		\$ 9,447,817			
unaffiliated	\$ 1,876,631	\$ 1,876,631	\$ 1,876,631				

## Bonds and Common Stocks

When available, the estimated fair values for bonds, including loan-backed and structured securities, and certain short-term investments are based on quoted prices in active markets that are readily and regularly obtainable. Generally, these investments are classified in Level 1. Generally, these are the most liquid of the Company's securities holdings and valuation of these securities does not involve management's judgment.

When quoted prices in active markets are not available, the determination of estimated fair value is based on market standard valuation methodologies, giving priority to observable inputs. The significant inputs to the market standard valuation methodologies for certain types of securities with reasonable levels of price transparency are inputs that are observable in the market or can be derived principally from or corroborated by observable market data. Generally, these investments are classified as Level 2.

When observable inputs are not available, the market standard valuation methodologies for determining the estimated fair value of certain types of securities that trade infrequently, and therefore have little or no price transparency, rely on inputs that are significant to the estimated fair value that are not observable in the market or cannot be derived principally from or corroborated by observable market data. These unobservable inputs can be based in large part on management's judgement or estimation, and cannot be supported by reference or market activity. Even though these inputs are unobservable, management believes they are consistent with what other market participants would use when pricing such securities and are considered appropriate given the circumstances. Generally, these investments are classified as Level 3.

The estimated fair value of cash approximates carrying value and is classified as Level 1 given the nature of cash.

D. Not Practicable to Estimate Fair Value  
Not ApplicableE. NAV Practical Expedient Investments  
Not Applicable**NOTE 21 Other Items**A. Unusual or Infrequent Items  
Not ApplicableB. Troubled Debt Restructuring: Debtors  
Not ApplicableC. Other Disclosures  
Not ApplicableD. Business Interruption Insurance Recoveries  
Not ApplicableE. State Transferable and Non-transferable Tax Credits  
Not ApplicableF. Subprime Mortgage Related Risk Exposure  
(1) Description of the Subprime-Mortgage-Related Exposure and Related Risk Management Policies  
The Company does not engage in subprime residential mortgage lending.

The Company's exposure to subprime lending is limited to investments within the fixed maturity investment portfolio which contains securities collateralized by mortgages that might have characteristics of subprime lending such as adjustable rate mortgages and alternative documentation mortgages. Currently the Company has no exposure to subprime loans within the fixed maturity investment portfolio.

(2) Direct exposure through investments in subprime mortgage loans.  
Not Applicable(3) Direct exposure through other investments.  
Not Applicable(4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.  
Not ApplicableG. Insurance-Linked Securities (ILS) Contracts  
Not ApplicableH. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy  
Not Applicable

## NOTES TO FINANCIAL STATEMENTS

**NOTE 22 Events Subsequent**

The Company did not have any recognized subsequent events for the periods reported.

Subsequent events have been considered through February 24, 2022 for these statutory financial statements which are to be issued on March 1, 2022.

A. Federal Affordable Care Act (YES/NO)?

Yes [ ] No [ X ]

		2021	2020
B.	ACA Fee Assessment Payable for the Upcoming Year	\$ -	\$ -
C.	ACA Fee Assessment Paid	\$ -	\$ -
D.	Premium Written Subject to ACA 9010 Assessment	\$ -	\$ -
E.	Total Adjusted Capital Before Surplus Adjustment (Five-Year Historical Line 28)	\$ 33,051,979	\$ 12,482,789
F.	Total Adjusted Capital After Surplus Adjustment (Five-Year Historical Line 28 minus 22B above)	\$ 33,051,979	\$ 12,482,789
G.	Authorized Control Level (Five-Year Historical Line 29)	\$ 201,702	\$ 286,392

H. Would reporting the ACA assessment as of December 31, 2021 have triggered an RBC action level (YES/NO)?

Yes [ ] No [ X ]

**NOTE 23 Reinsurance**

A. Unsecured Reinsurance Recoverables

Individual Reinsurers with Unsecured Reinsurance Recoverables Exceeding 3% of Policyholder Surplus

Individual Reinsurers Who Are Members of a Group

Group Code	FEIN	Reinsurer Name	Unsecured Amount
14621	31-4259550	Motorists Mutual Insurance Company	\$ 4,804,859

B. Reinsurance Recoverable in Dispute

Not Applicable

C. Reinsurance Assumed and Ceded

(1)

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates			\$ 6,143,893	\$ 1,993,486	\$ (6,143,893)	\$ (1,993,486)
b. All Other			\$ 40,368	\$ 13,969	\$ (40,368)	\$ (13,969)
c. Total	\$ -	\$ -	\$ 6,184,261	\$ 2,007,455	\$ (6,184,261)	\$ (2,007,455)
d. Direct Unearned Premium Reserve						\$ 6,184,261

(2)

	Direct	Assumed	Ceded	Net
a. Contingent Commission	\$ 61,801			\$ 61,801
b. Sliding Scale Adjustments				\$ -
c. Other Profit Commission Arrangements				\$ -
d. TOTAL	\$ 61,801	\$ -	\$ -	\$ 61,801

(3) Not Applicable

D. Uncollectible Reinsurance

Not Applicable

F. Retroactive Reinsurance

Not Applicable

G. Reinsurance Accounted for as a Deposit

Not Applicable

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements

Not Applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not Applicable

K. Reinsurance Credit

Not Applicable

**NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination**

F. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

Yes [ ] No [ X ]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year  
Not applicable

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.  
Not applicable

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year  
Not applicable

## NOTES TO FINANCIAL STATEMENTS

(5) ACA Risk Corridors Receivable as of Reporting Date  
Not applicable

**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**  
Not Applicable

**NOTE 26 Intercompany Pooling Arrangements**

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

	NAIC Company Code	Pooling Percentage
Lead Entity and all Affiliated Entities		
Motorists Mutual Insurance Company (Lead Entity)	14621	32.4%
BrickStreet Mutual Insurance Company	12372	48.0%
Motorists Commercial Mutual Insurance Company	13331	10.3%
Consumers Insurance USA, Inc.	10204	2.1%
Iowa Mutual Insurance Company	14338	1.7%
Wilson Mutual Insurance Company	19950	1.7%
Phenix Mutual Fire Insurance Company	23175	1.6%
PinnaclePoint Insurance Company	15137	0.8%
SummitPoint Insurance Company	15136	0.8%
Iowa American Insurance Company	31577	0.6%
MICO Insurance Company	40932	%
NorthStone Insurance Company	13045	%
AlleghenyPoint Insurance Company	13016	%

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

The pooling arrangement covered premiums, losses and underwriting expenses for all lines during the year. Related finance and service charge income, agent and premium balance charge-offs, deficiency reserves, and policyholder dividends were also subject to the pooling arrangement.

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

D. Identification of all Pool Members that are Parties to Reinsurance Agreements with Non-Affiliated Reinsurers  
participant its share of the pool.

E. Explanation of Discrepancies Between Entries of Pooled Business

There are no discrepancies between any entries regarding pooled business on the assumed and ceded reinsurance schedules of other pooled participants.

F. Description of Intercompany Sharing

Underwriting-related balance sheet items such as premiums receivable, installments, reinsurance assumed premium receivables and loss payables, reinsurance ceded premium payables and loss receivables, general expense receivables and payables, funds held balances, advanced premiums, and outstanding drafts were also pooled.

G. Amounts Due To/From Lead Entity and all Affiliated Entities Participating in the Intercompany Pool

As of December 31, 2021, the lead company reported an aggregate pooling-related balance of \$23,714,417 payable to the other pool participants.

**NOTE 27 Structured Settlements**

Not Applicable

**NOTE 28 Health Care Receivables**

Not Applicable

**NOTE 29 Participating Policies**

Not Applicable

**NOTE 30 Premium Deficiency Reserves**

As of December 31, 2021 the Company reported no premium deficiency reserves.

(1) Liability carried for premium deficiency reserves	\$ -
(2) Date of the most recent evaluation of this liability	01/21/2022
(3) Was anticipated investment income utilized in the calculation?	Yes [ X ] No [ ]

**NOTE 31 High Deductibles**

Not Applicable

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

Not Applicable

**NOTE 33 Asbestos/Environmental Reserves**

Not Applicable

**NOTE 34 Subscriber Savings Accounts**

Not Applicable

**NOTE 35 Multiple Peril Crop Insurance**

Not Applicable

**NOTE 36 Financial Guaranty Insurance**

Not Applicable

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**  
**GENERAL**

1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? .....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]			
1.2	If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.				
1.3	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? .....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ] N/A [ <input type="checkbox"/> ]			
1.4	State Regulating? .....	OHIO			
1.5	Is the reporting entity publicly traded or a member of a publicly traded group? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
1.6	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....				
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
2.2	If yes, date of change: .....				
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made. ....	12/31/2018			
3.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. ....	12/31/2018			
3.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). ....	06/03/2020			
3.4	By what department or departments?				
	OHIO DEPARTMENT OF INSURANCE .....				
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? .....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ] N/A [ <input checked="" type="checkbox"/> ]			
3.6	Have all of the recommendations within the latest financial examination report been complied with? .....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ] N/A [ <input checked="" type="checkbox"/> ]			
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:				
	4.11 sales of new business? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
	4.12 renewals? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
4.2	During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:				
	4.21 sales of new business? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
	4.22 renewals? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
	If yes, complete and file the merger history data file with the NAIC.				
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%; text-align: center;">1 Name of Entity</td> <td style="width: 33.33%; text-align: center;">2 NAIC Company Code</td> <td style="width: 33.33%; text-align: center;">3 State of Domicile</td> </tr> </table>			1 Name of Entity	2 NAIC Company Code	3 State of Domicile
1 Name of Entity	2 NAIC Company Code	3 State of Domicile			
6.1	Has the 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 [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
6.2	If yes, give full information: .....				
7.1	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? .....	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]			
7.2	If yes,				
	7.21 State the percentage of foreign control; .....	%			
	7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">1 Nationality</td> <td style="width: 50%; text-align: center;">2 Type of Entity</td> </tr> </table>			1 Nationality	2 Type of Entity	
1 Nationality	2 Type of Entity				

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]

8.2 If the response to 8.1 is yes, please identify the name of the DIHC.

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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the reporting entity? ..... Yes [ ] No [ X ]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? ..... Yes [ ] No [ X ] N/A [ ]

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

KPMG LLP 191 W. Nationwide Blvd., Suite 500, Columbus OH 43215

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [ X ]

10.2 If the response to 10.1 is yes, provide information related to this exemption:

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [ X ]

10.4 If the response to 10.3 is yes, provide information related to this exemption:

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [ X ] No [ ] N/A [ ]

10.6 If the response to 10.5 is no or n/a, please explain

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Derek A. Jones, FCAS, MAAA, Milliman, One Pennsylvania Plaza, 38th Floor, New York, NY 10119, who is a consulting actuary for the Encova Mutual Insurance Group

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [ X ]

12.11 Name of real estate holding company ....

12.12 Number of parcels involved .....

12.13 Total book/adjusted carrying value ..... \$ .....

12.2 If, yes provide explanation:

**13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ ]

Yes [ ] No [ ]

13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ ]

Yes [ ] No [ ]

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ ]

Yes [ ] No [ ]

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [ X ] No [ ]

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.

14.11 If the response to 14.1 is No, please explain:

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

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

Yes [ ] No [ X ]

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

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [ X ]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

**BOARD OF DIRECTORS**

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [ X ] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [ X ] No [ ]

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? ..... Yes [ X ] No [ ]

**FINANCIAL**

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [ X ]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers.....	\$ .....
20.12 To stockholders not officers.....	\$ .....
20.13 Trustees, supreme or grand (Fraternal Only) .....	\$ .....

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers.....	\$ .....
20.22 To stockholders not officers.....	\$ .....
20.23 Trustees, supreme or grand (Fraternal Only) .....	\$ .....

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [ X ]

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

21.21 Rented from others.....	\$ .....
21.22 Borrowed from others.....	\$ .....
21.23 Leased from others .....	\$ .....
21.24 Other .....	\$ .....

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ ] No [ X ]

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment \$ .....	\$ .....
22.22 Amount paid as expenses .....	\$ .....
22.23 Other amounts paid .....	\$ .....

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

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ .....,700,929

24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? ..... Yes [ ] No [ X ]

24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

**INVESTMENT**

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

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

25.02 If no, give full and complete information relating thereto

.....  
25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

.....  
25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. .... \$ .....

.....  
25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. .... \$ .....

.....  
25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... Yes [ ] No [ ] N/A [ X ]

.....  
25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... Yes [ ] No [ ] N/A [ X ]

.....  
25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? ..... Yes [ ] No [ ] N/A [ X ]

.....  
25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

25.091	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. ....	\$ .....	0
25.092	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ .....	0
25.093	Total payable for securities lending reported on the liability page. ....	\$ .....	0

.....  
26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). ..... Yes [ X ] No [ ]

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

26.21	Subject to repurchase agreements .....	\$ .....	.....
26.22	Subject to reverse repurchase agreements .....	\$ .....	.....
26.23	Subject to dollar repurchase agreements .....	\$ .....	.....
26.24	Subject to reverse dollar repurchase agreements .....	\$ .....	.....
26.25	Placed under option agreements .....	\$ .....	.....
26.26	Letter stock or securities restricted as to sale - excluding FHLB Capital Stock .....	\$ .....	.....
26.27	FHLB Capital Stock .....	\$ .....	.....
26.28	On deposit with states .....	\$ .....	2,077,652
26.29	On deposit with other regulatory bodies .....	\$ .....	.....
26.30	Pledged as collateral - excluding collateral pledged to an FHLB .....	\$ .....	.....
26.31	Pledged as collateral to FHLB - including assets backing funding agreements .....	\$ .....	.....
26.32	Other .....	\$ .....	.....

.....  
26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....	.....	.....

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

.....  
27.2 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.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

.....  
27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? .. Yes [ ] No [ ]

.....  
27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41	Special accounting provision of SSAP No. 108 .....	Yes [ ] No [ ]
27.42	Permitted accounting practice .....	Yes [ ] No [ ]
27.43	Other accounting guidance .....	Yes [ ] No [ ]

.....  
27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: ..... Yes [ ] No [ ]

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

.....  
28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? ..... Yes [ ] No [ X ]

.....  
28.2 If yes, state the amount thereof at December 31 of the current year. .... \$ .....

.....  
29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? ..... Yes [ X ] No [ ]

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

1 Name of Custodian(s)	2 Custodian's Address
BNY Mellon .....	500 Grant Street One Mellon Center, Suite #1035, Pittsburgh, PA 15258 .....

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**GENERAL INTERROGATORIES**

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

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

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [ ] No [ X ]

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

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

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

1 Name of Firm or Individual	2 Affiliation
New England Asset Management, Inc. .....	U.....
Northern Trust Investments, Inc. .....	U.....

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

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ X ] No [ ]

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
109846 .....	New England Asset Management, Inc. .....	KUR85E5PS4G0FZTFC130 .....	SEC .....	NO.....
105900 .....	Northern Trust Investments, Inc. .....	BEL4B8X7EHJU845Y2N39 .....	SEC .....	NO.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?..... Yes [ X ] No [ ]

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
04314H-85-7 .....	Artisan Intl Val Fund 1 .....	872,121 .....
464287-65-5 .....	ISHARES Russ 2000 ETF .....	61,640 .....
30.2999 - Total .....	.....	933,761 .....

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

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
Artisan Intl Val Fund 1 .....	Samsung Electronics Co Ltd .....	39,769 .....	12/31/2021 .....
Artisan Intl Val Fund 1 .....	Compass Group PLC .....	38,809 .....	12/31/2021 .....
Artisan Intl Val Fund 1 .....	Arch Capital Group LTD .....	37,937 .....	12/31/2021 .....
Artisan Intl Val Fund 1 .....	Novartis AG .....	35,234 .....	12/31/2021 .....
Artisan Intl Val Fund 1 .....	ABB Ltd .....	34,536 .....	12/31/2021 .....
ISHARES Russ 2000 ETF .....	Ovintiv Inc .....	240 .....	12/31/2021 .....
ISHARES Russ 2000 ETF .....	Macy's Inc .....	197 .....	12/31/2021 .....
ISHARES Russ 2000 ETF .....	BJ's Wholesale Club Holdings Inc .....	191 .....	12/31/2021 .....
ISHARES Russ 2000 ETF .....	AMC Entertainment Holdings Inc Class A .....	191 .....	12/31/2021 .....
ISHARES Russ 2000 ETF .....	Tenet Healthcare Corp .....	185 .....	12/31/2021 .....

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**GENERAL INTERROGATORIES**

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds .....	9,542,368	9,797,816	255,448
31.2 Preferred stocks .....	.0	.0	0
31.3 Totals .....	9,542,368	9,797,816	255,448

31.4 Describe the sources or methods utilized in determining the fair values:

The Fair Value of securities is determined using quoted market prices when available, external pricing service, SVO pricing, fair values available from custodians or investment managers .....

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? ..... Yes [ X ] No [ ]

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? ..... Yes [ X ] No [ ]

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D: .....

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

33.2 If no, list exceptions: .....

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

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

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

35. 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 ]

36. 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 ]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? ..... Yes [ ] No [ ] N/A [ X ]

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**GENERAL INTERROGATORIES**

**OTHER**

38.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....48,010

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

1 Name	2 Amount Paid
Insurance Services Office Inc .....	48,010

39.1 Amount of payments for legal expenses, if any? .....\$ .....

39.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....

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

40.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY AND CASUALTY INTERROGATORIES**

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force? .....	Yes [ ] No [ X ]	
1.2	If yes, indicate premium earned on U. S. business only. ....	\$ .....	
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? .....	\$ .....	
1.31	Reason for excluding .....		
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. ....	\$ .....	
1.5	Indicate total incurred claims on all Medicare Supplement Insurance. ....	\$ .....	0
1.6	Individual policies:	Most current three years: 1.61 Total premium earned ..... \$ ..... 0 1.62 Total incurred claims ..... \$ ..... 0 1.63 Number of covered lives ..... 0	
		All years prior to most current three years 1.64 Total premium earned ..... \$ ..... 0 1.65 Total incurred claims ..... \$ ..... 0 1.66 Number of covered lives ..... 0	
1.7	Group policies:	Most current three years: 1.71 Total premium earned ..... \$ ..... 0 1.72 Total incurred claims ..... \$ ..... 0 1.73 Number of covered lives ..... 0	
		All years prior to most current three years 1.74 Total premium earned ..... \$ ..... 0 1.75 Total incurred claims ..... \$ ..... 0 1.76 Number of covered lives ..... 0	
2.	Health Test:	1 Current Year 2 Prior Year	
2.1	Premium Numerator .....	0	
2.2	Premium Denominator .....	0	
2.3	Premium Ratio (2.1/2.2) .....	0.000	
2.4	Reserve Numerator .....	0	
2.5	Reserve Denominator .....	0	
2.6	Reserve Ratio (2.4/2.5) .....	0.000	
3.1	Did the reporting entity issue participating policies during the calendar year? .....	Yes [ ] No [ X ]	
3.2	If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year: 3.21 Participating policies ..... \$ .....		
	3.22 Non-participating policies ..... \$ .....		
4.	For mutual reporting Entities and Reciprocal Exchanges Only:		
4.1	Does the reporting entity issue assessable policies? .....	Yes [ ] No [ ]	
4.2	Does the reporting entity issue non-assessable policies? .....	Yes [ ] No [ ]	
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders? .....	% .....	
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. ....	\$ .....	
5.	For Reciprocal Exchanges Only:		
5.1	Does the Exchange appoint local agents? .....	Yes [ ] No [ ]	
5.2	If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation ..... Yes [ ] No [ ] N/A [ ] 5.22 As a direct expense of the exchange ..... Yes [ ] No [ ] N/A [ ]		
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? ....		
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? .....	Yes [ ] No [ ]	
5.5	If yes, give full information ....		

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY AND CASUALTY INTERROGATORIES**

6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?  
 Those Companies that concentrate in the Workers Compensation business, and which the Company has exposure to through the intercompany pooling arrangement, purchase catastrophic reinsurance at levels that are deemed adequate to protect against excessive loss. In addition, losses arising from claims under the federal black lung programs for dates of injury prior to 2016 are subject to ADC arrangement related to black lung claims. In addition, single locations, where excessive concentration of potential losses have been identified, are subject to facultative reinsurance above the layers contained in the catastrophic policies.

6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process.  
 The Lead Company in the pooling arrangement performs a concentration of risk study using modeling software to determine the probable maximum insurance loss. The software utilized includes Management Solutions (RMS) RiskLink and AIR Touchstone catastrophe models. Analysis is performed for the perils of hurricane, severe convective storm, winter storm, and earthquake. The PML driver on low return periods (~20 years) is severe convective storm. Starting around the 100 year return period, hurricane becomes the largest driver of the PML. The highest concentration of exposure (total insured value) is in Ohio. Ohio also has the highest gross average annual loss (Gross AAL). 8 of the top 10 counties for exposure are in Ohio. The other two counties are in Kentucky and Rhode Island. 7 of the top 10 counties for Gross AAL are in Ohio. The other counties are in Kentucky, Rhode Island, and South Carolina. The Encova Mutual Insurance Group utilizes Guy Carpenter's CATography tool to analyze and manage property risk. The Group to which this Company is a party through its pooling arrangement works with reinsurer brokers to assist in developing maximum probable losses. Both Property and Casualty exposures are analyzed for probable maximum loss and include various scenarios.

6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  
 The Company purchases catastrophic reinsurance at levels that are deemed adequate to protect against excessive loss.

6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?

Yes [  ] No [  ]

6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss.

7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)?

Yes [  ] No [  ]

7.2 If yes, indicate the number of reinsurance contracts containing such provisions:

7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?

Yes [  ] No [  ]

8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?

Yes [  ] No [  ]

8.2 If yes, give full information

9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:

- (a) A contract term longer than two years and the contract is noncancelable by the reporting entity during the contract term;
- (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
- (c) Aggregate stop loss reinsurance coverage;
- (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
- (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
- (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.

Yes [  ] No [  ]

9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:

- (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
- (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.

Yes [  ] No [  ]

9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:

- (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
- (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
- (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4 Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:

- (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
- (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?

Yes [  ] No [  ]

9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:

- (a) The entity does not utilize reinsurance; or
- (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or
- (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.

Yes [  ] No [  ]

Yes [  ] No [  ]

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurance a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [  ] No [  ] N/A [  ]

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**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY AND CASUALTY INTERROGATORIES**

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? ..... Yes [ ] No [ X ]

11.2 If yes, give full information  
.....

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:  
 12.11 Unpaid losses ..... \$  
 12.12 Unpaid underwriting expenses (including loss adjustment expenses) ..... \$

12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral, and other funds ..... \$

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? ..... Yes [ ] No [ ] N/A [ X ]

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:  
 12.41 From ..... %  
 12.42 To ..... %

12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? ..... Yes [ ] No [ X ]

12.6 If yes, state the amount thereof at December 31 of the current year:  
 12.61 Letters of credit ..... \$  
 12.62 Collateral and other funds ..... \$

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): ..... \$ 0

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? ..... Yes [ ] No [ X ]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. ..... 2

14.1 Is the company a cedant in a multiple cedant reinsurance contract? ..... Yes [ X ] No [ ]

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:  
Premiums are allocated to cedant based on experience weighted earned premiums subject to the contract. Reinsurance recoveries are distributed based on each cedant's share of the aggregate losses subject to the contract.

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? ..... Yes [ ] No [ X ]

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? ..... Yes [ X ] No [ ]

14.5 If the answer to 14.4 is no, please explain:  
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? ..... Yes [ ] No [ X ]

15.2 If yes, give full information  
.....

16.1 Does the reporting entity write any warranty business? ..... Yes [ ] No [ X ]  
If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home	.....	.....	.....	.....	.....
16.12 Products	.....	.....	.....	.....	.....
16.13 Automobile	.....	.....	.....	.....	.....
16.14 Other*	.....	.....	.....	.....	.....

\* Disclose type of coverage:  
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY  
**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY AND CASUALTY INTERROGATORIES**

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance? ..... Yes [ ] No [ X ]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance .....	\$ .....
17.12 Unfunded portion of Interrogatory 17.11 .....	\$ .....
17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 .....	\$ .....
17.14 Case reserves portion of Interrogatory 17.11 .....	\$ .....
17.15 Incurred but not reported portion of Interrogatory 17.11 .....	\$ .....
17.16 Unearned premium portion of Interrogatory 17.11 .....	\$ .....
17.17 Contingent commission portion of Interrogatory 17.11 .....	\$ .....

18.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

18.2 If yes, please provide the amount of custodial funds held as of the reporting date. ..... \$ .....

18.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

18.4 If yes, please provide the balance of funds administered as of the reporting date. ..... \$ .....

19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [ X ] No [ ]

19.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ ]

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**

**FIVE-YEAR HISTORICAL DATA**

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

	1 2021	2 2020	3 2019	4 2018	5 2017
<b>Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	4,052,226	209,753	0	0	0
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	3,682,264	187,473	0	0	0
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	3,247,851	206,292	0	0	0
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
6. Total (Line 35)	10,982,341	603,518	0	0	0
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	0	0	0	0	0
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
12. Total (Line 35)	0	0	0	0	0
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8)	0	0	0	0	0
14. Net investment gain or (loss) (Line 11)	908,231	209,489	303,046	568,263	281,544
15. Total other income (Line 15)	0	(3,664)	0	40	(40)
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	(20,738)	49,019	60,120	62,106	69,564
18. Net income (Line 20)	928,969	156,806	242,926	506,197	211,940
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	38,352,073	12,876,452	12,094,010	11,536,074	11,563,151
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	486,214	55,463	0	0	0
20.2 Deferred and not yet due (Line 15.2)	2,926,345	272,851	0	0	0
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26)	5,300,094	393,664	26,234	68,178	140,826
22. Losses (Page 3, Line 1)	0	0	0	0	0
23. Loss adjustment expenses (Page 3, Line 3)	0	0	0	0	0
24. Unearned premiums (Page 3, Line 9)	0	0	0	0	0
25. Capital paid up (Page 3, Lines 30 & 31)	2,252,000	2,252,000	2,252,000	2,252,000	2,252,000
26. Surplus as regards policyholders (Page 3, Line 37)	33,051,979	12,482,789	12,067,776	11,467,898	11,422,325
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11)	548,103	6,383	221,567	220,036	141,451
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital	33,051,979	12,482,789	12,067,776	11,467,898	11,422,325
29. Authorized control level risk-based capital	201,702	286,392	243,725	202,695	236,461
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0</b>					
30. Bonds (Line 1)	27.4	69.3	71.9	73.3	72.3
31. Stocks (Lines 2.1 & 2.2)	5.6	19.5	17.3	14.4	18.7
32. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 & 4.3)	0.0	0.0	0.0	0.0	0.0
34. Cash, cash equivalents and short-term investments (Line 5)	67.0	7.7	7.2	8.7	5.5
35. Contract loans (Line 6)	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7)	0.0	0.0	0.0	0.0	0.0
37. Other invested assets (Line 8)	0.0	3.5	3.5	3.5	3.5
38. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
39. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0	0.0	0.0
40. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)	0	0	0	0	0
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	0	0	0	0	0
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47	0	0	0	0	0
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.0	0.0	0.0	0.0	0.0

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY**  
**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2021	2 2020	3 2019	4 2018	5 2017
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24) .....	(292,933)	342,785	335,147	(503,121)	247,863
52. Dividends to stockholders (Line 35) .....	0	0	0	0	0
53. Change in surplus as regards policyholders for the year (Line 38) .....	20,569,191	415,012	599,879	45,572	457,294
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	426,424	(32,829)	(5,563)	7,358	13,341
55. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	1,301,252	10,771	(2,183)	(3,128)	(1,624)
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	431,593	0	0	0	0
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	0	0	0	0	0
58. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
59. Total (Line 35) .....	2,159,269	(22,058)	(7,746)	4,230	11,717
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4) .....	0	0	0	0	0
61. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	0	0	0	0	0
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	0	0	0	0	0
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) .....	0	0	0	0	0
64. Nonproportional reinsurance lines (Lines 31, 32 & 33) .....	0	0	0	0	0
65. Total (Line 35) .....	0	0	0	0	0
<b>Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0</b>					
66. Premiums earned (Line 1) .....	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2) .....	0.0	0.0	0.0	0.0	0.0
68. Loss expenses incurred (Line 3) .....	0.0	0.0	0.0	0.0	0.0
69. Other underwriting expenses incurred (Line 4) .....	0.0	0.0	0.0	0.0	0.0
70. Net underwriting gain (loss) (Line 8) .....	0.0	0.0	0.0	0.0	0.0
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) .....	0.0	0.0	0.0	0.0	0.0
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .....	0.0	0.0	0.0	0.0	0.0
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0) .....	0.0	0.0	0.0	0.0	0.0
<b>One Year Loss Development (\$000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11) .....	0	0	0	0	0
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) .....	0.0	0.0	0.0	0.0	0.0
<b>Two Year Loss Development (\$000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) .....	0	0	0	0	0
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0) .....	0.0	0.0	0.0	0.0	0.0

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? .....

Yes  No

If no, please explain: .....

Schedule P - Part 1 - Summary

**N O N E**

Schedule P - Part 2 - Summary

**N O N E**

Schedule P - Part 3 - Summary

**N O N E**

Schedule P - Part 4 - Summary

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY

## SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	Active Status (a)	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		Dividends Paid or Credited to Policyholders on Direct Business	Direct Losses Paid (Deducting Salvage)	Direct Losses Incurred	Direct Losses Unpaid	Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
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	L	25,210	7,761	0	0	100	100	176
15. Indiana .....	IN	L	427,063	247,468	0	129,658	176,142	46,584	3,089
16. Iowa .....	IA	L	781,630	281,235	0	181,068	228,695	47,627	3,088
17. Kansas .....	KS	N							
18. Kentucky .....	KY	L	964,340	286,065	0	58,829	141,240	82,411	9,288
19. Louisiana .....	LA	N							
20. Maine .....	ME	N							
21. Maryland .....	MD	N							
22. Massachusetts .....	MA	N							
23. Michigan .....	MI	N							
24. Minnesota .....	MN	L	0	0	0	0	0	0	
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	L	5,283,208	2,791,555	0	1,113,519	1,863,866	763,047	39,440
37. Oklahoma .....	OK	N							
38. Oregon .....	OR	N							
39. Pennsylvania .....	PA	L	253,334	74,116	0	29,767	56,467	26,700	1,272
40. Rhode Island .....	RI	N							
41. South Carolina .....	SC	N							
42. South Dakota .....	SD	N							
43. Tennessee .....	TN	L	0	0	0	0	0	0	
44. Texas .....	TX	N							
45. Utah .....	UT	N							
46. Vermont .....	VT	N							
47. Virginia .....	VA	L	0	0	0	0	0	0	
48. Washington .....	WA	N							
49. West Virginia .....	WV	L	2,344,018	1,322,285	0	455,243	778,443	340,400	14,297
50. Wisconsin .....	WI	L	903,538	323,923	0	191,185	263,611	72,426	2,953
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	XXX	0	0	0	0	0	0	0
59. Totals		XXX	10,982,341	5,334,409	0	2,159,269	3,508,564	1,379,295	73,603

## DETAILS OF WRITE-INS

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

## (a) Active Status Counts:

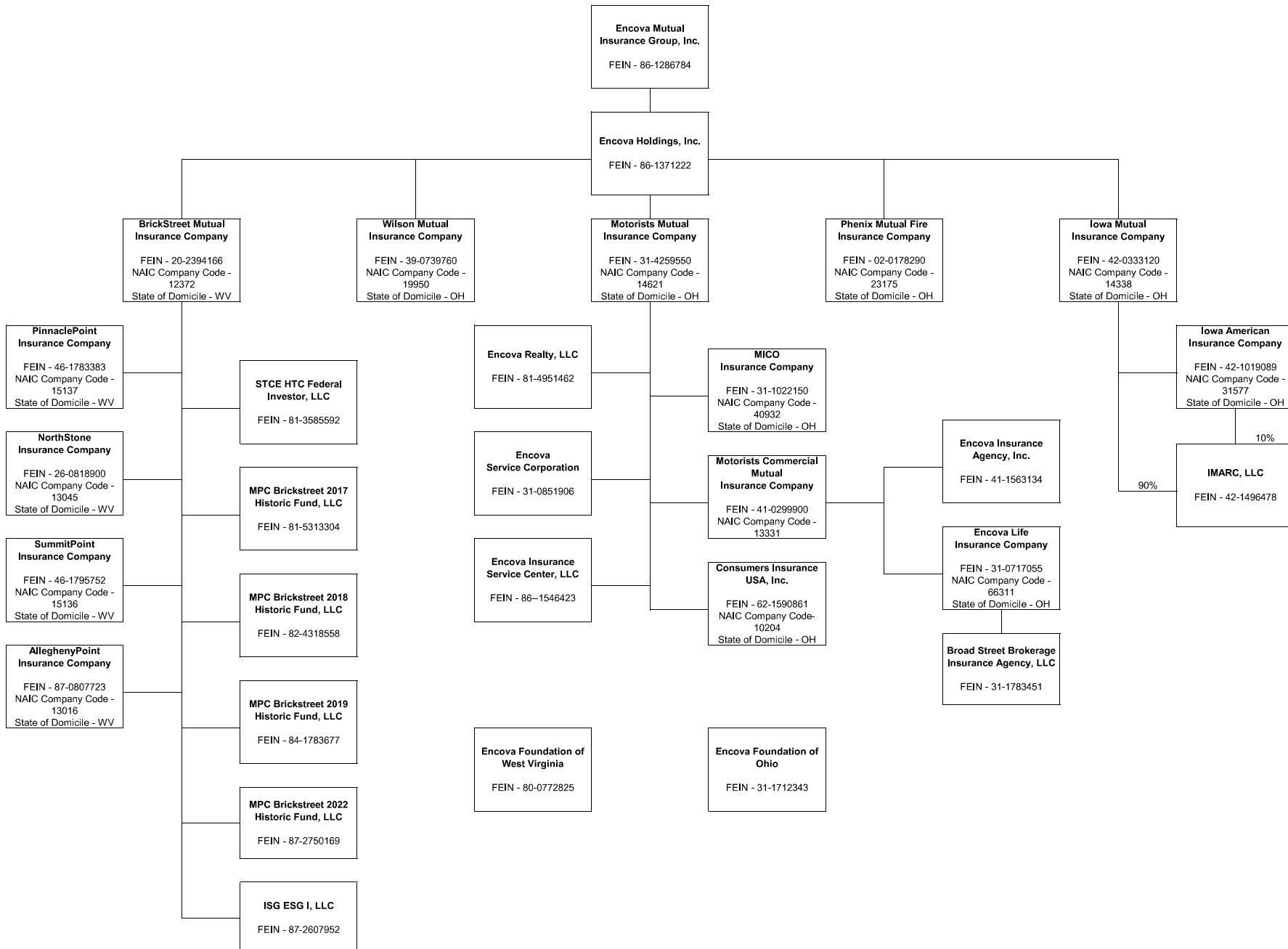
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	11	R - Registered - Non-domiciled RRGs.....	0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI).....	0	Q - Qualified - Qualified or accredited reinsurer.....	0
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile.....	0	N - None of the above - Not allowed to write business in the state.....	46

## (b) Explanation of basis of allocation of premiums by states, etc.

Premiums are assigned to state based on the principal garaging location.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MICO INSURANCE COMPANY  
**OVERFLOW PAGE FOR WRITE-INS**