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**ANNUAL STATEMENT**  
FOR THE YEAR ENDED DECEMBER 31, 2024  
OF THE CONDITION AND AFFAIRS OF THE  
**CINCINNATI EQUITABLE INSURANCE COMPANY**

NAIC Group Code.....0067,.....0067.....NAIC Company Code.....16721....Employer's ID Number.....31-0239840.....  
(Current)(Prior)

|   |                                   |  |                  |
|---|-----------------------------------|--|------------------|
| Organized under the Laws of .....           | OH .....                          | State of Domicile or Port of Entry ..... | OH .....         |
| Country of Domicile .....                   | US .....                          |  |                  |
| Incorporated/Organized .....                | 01/24/1827 .....                  | Commenced Business .....                 | 07/17/1826 ..... |
| Statutory Home Office .....                 | 525 VINE STREET, SUITE 1925 ..... | CINCINNATI, OH, US 45202 .....           |                  |
| Main Administrative Office .....            | 525 VINE STREET, SUITE 1925 ..... |  |                  |
|   | CINCINNATI, OH, US 45202 .....    | 513-621-1826 .....                       |                  |
|   |                                   | (Telephone)                              |                  |
| Mail Address .....                          | 525 VINE STREET, SUITE 1925 ..... | CINCINNATI, OH, US 45202 .....           |                  |
| Primary Location of Books and Records ..... | 525 VINE STREET, SUITE 1925 ..... |  |                  |
|   | CINCINNATI, OH, US 45202 .....    | 513-621-1826 .....                       |                  |
|   |                                   | (Telephone)                              |                  |
| Internet Website Address .....              | WWW.CINEQLIFE.COM .....           |  |                  |
| Statutory Statement Contact .....           | JOSHUA CHARLES KORSON .....       | 517-649-4756 .....                       |                  |
|   |                                   | (Telephone)                              |                  |
|   | JKORSON@FBINSMI.COM .....         | 513-621-4531 .....                       |                  |
|   |                                   | (Telephone)                              |                  |

## OFFICERS

DONALD EUGENE SIMON, EXECUTIVE VICE PRESIDENT .....  
THOMAS LIGOURI NUGENT, TREASURER.....

**OTHER**

JOSHUA CHARLES KORSON#, CORPORATE CONTROLLER.....  
DEBRA RANEE DANSBY#, VICE PRESIDENT - MARKETING.....  
BRETT JEROME THELEN#, VICE PRESIDENT - IT .....

ROGER DOUGLAS GRAFF#, VICE PRESIDENT - CLAIMS .....

EXERCISES AND PROBLEMS

TEES  
CARL JOSEPH BEDNARSKI.....  
MICHAEL ALLEN DERUITER.....  
MICHAEL CHARLES FUSILIER.....  
JENNIFER LYNN LEWIS.....  
MATTHEW RICKER MCHATTE#.....  
ABRAHAM JOHN PASCH.....  
JEFFERY BLAIR SANBORN.....  
LARRY MARTIN SHAW.....

State of Michigan.....

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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.

Carl Joseph Bednarski  
Donald Eugene Simon  
Thomas Ligouri Nugent

Subscribed and sworn to before me  
this \_\_\_\_\_ day of  
\_\_\_\_\_, 2025

- a. Is this an original filing? Yes
- b. If no:
  1. State the amendment number:
  2. Date filed:
  3. Number of pages attached:

**ASSETS**

|   | Current Year |                            |  | Prior Year                  |
|---|--------------|----------------------------|--|-----------------------------|
|   | 1<br>Assets  | 2<br>Nonadmitted<br>Assets | 3<br>Net Admitted<br>Assets<br>(Cols. 1 - 2) | 4<br>Net Admitted<br>Assets |
| 1. Bonds (Schedule D).....  | 2,883,988    |                            | 2,883,988                                    | 2,974,701                   |
| 2. Stocks (Schedule D):   |              |                            |  |                             |
| 2.1 Preferred stocks.....   |              |                            |  |                             |
| 2.2 Common stocks.....  |              |                            |  |                             |
| 3. Mortgage loans on real estate (Schedule B):  |              |                            |  |                             |
| 3.1 First liens.....  |              |                            |  |                             |
| 3.2 Other than first liens.....   |              |                            |  |                             |
| 4. Real estate (Schedule A):  |              |                            |  |                             |
| 4.1 Properties occupied by the company (less \$..... encumbrances).....   |              |                            |  |                             |
| 4.2 Properties held for the production of income (less \$..... encumbrances).....   |              |                            |  |                             |
| 4.3 Properties held for sale (less \$..... encumbrances).....   |              |                            |  |                             |
| 5. Cash (\$.....52,603, Schedule E - Part 1), cash equivalents (\$.....132,048, Schedule E - Part 2) and short-term investments (\$....., Schedule DA)..... | 184,651      |                            | 184,651                                      | 47,415                      |
| 6. Contract loans (including \$..... premium notes).....  |              |                            |  |                             |
| 7. Derivatives (Schedule DB).....   |              |                            |  |                             |
| 8. Other invested assets (Schedule BA).....   |              |                            |  |                             |
| 9. Receivables for securities.....  |              |                            |  |                             |
| 10. Securities lending reinvested collateral assets (Schedule DL).....  |              |                            |  |                             |
| 11. Aggregate write-ins for invested assets.....  |              |                            |  |                             |
| 12. Subtotals, cash and invested assets (Lines 1 to 11).....  | 3,068,639    |                            | 3,068,639                                    | 3,022,117                   |
| 13. Title plants less \$..... charged off (for Title insurers only).....  |              |                            |  |                             |
| 14. Investment income due and accrued.....  | 25,194       |                            | 25,194                                       | 25,404                      |
| 15. Premiums and considerations:  |              |                            |  |                             |
| 15.1 Uncollected premiums and agents' balances in the course of collection.....   | 5,973        |                            | 5,973  |                             |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$..... earned but unbilled premiums).....         |              |                            |  |                             |
| 15.3 Accrued retrospective premiums (\$.....) and contracts subject to redetermination (\$.....).....   | 7,011        |                            | 7,011  |                             |
| 16. Reinsurance:  |              |                            |  |                             |
| 16.1 Amounts recoverable from reinsurers.....   |              |                            |  |                             |
| 16.2 Funds held by or deposited with reinsured companies.....   |              |                            |  |                             |
| 16.3 Other amounts receivable under reinsurance contracts.....  |              |                            |  |                             |
| 17. Amounts receivable relating to uninsured plans.....   |              |                            |  |                             |
| 18.1 Current federal and foreign income tax recoverable and interest thereon.....   |              |                            |  |                             |
| 18.2 Net deferred tax asset.....  | 5,430        | 5,428                      | 2  |                             |
| 19. Guaranty funds receivable or on deposit.....  |              |                            |  |                             |
| 20. Electronic data processing equipment and software.....  |              |                            |  |                             |
| 21. Furniture and equipment, including health care delivery assets (\$.....).....   |              |                            |  |                             |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates.....   |              |                            |  |                             |
| 23. Receivables from parent, subsidiaries and affiliates.....   | 17,431       |                            | 17,431                                       |                             |
| 24. Health care (\$.....) and other amounts receivable.....   |              |                            |  |                             |
| 25. Aggregate write-ins for other-than-invested assets.....   |              |                            |  |                             |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....   | 3,129,678    | 5,428                      | 3,124,250                                    | 3,047,520                   |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....  |              |                            |  |                             |
| 28. Total (Lines 26 and 27).....  | 3,129,678    | 5,428                      | 3,124,250                                    | 3,047,520                   |
| <b>Details of Write-Ins</b>   |              |                            |  |                             |
| 1101.....   |              |                            |  |                             |
| 1102.....   |              |                            |  |                             |
| 1103.....   |              |                            |  |                             |
| 1198. Summary of remaining write-ins for Line 11 from overflow page.....  |              |                            |  |                             |
| 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....   |              |                            |  |                             |
| 2501.....   |              |                            |  |                             |
| 2502.....   |              |                            |  |                             |
| 2503.....   |              |                            |  |                             |
| 2598. Summary of remaining write-ins for Line 25 from overflow page.....  |              |                            |  |                             |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....   |              |                            |  |                             |

**LIABILITIES, SURPLUS AND OTHER FUNDS**

|   | 1<br>Current Year | 2<br>Prior Year |
|---|-------------------|-----------------|
| 1. Losses (Part 2A, Line 35, Column 8)  |                   |                 |
| 2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)   |                   |                 |
| 3. Loss adjustment expenses (Part 2A, Line 35, Column 9)  |                   |                 |
| 4. Commissions payable, contingent commissions and other similar charges  |                   |                 |
| 5. Other expenses (excluding taxes, licenses and fees)  |                   | 2,650           |
| 6. Taxes, licenses and fees (excluding federal and foreign income taxes)  |                   |                 |
| 7.1 Current federal and foreign income taxes (including \$..... on realized capital gains (losses))   | 19,482            | 18,589          |
| 7.2 Net deferred tax liability  |                   | 1,819           |
| 8. Borrowed money \$..... and interest thereon \$.....  |                   |                 |
| 9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$.....14,739 and including warranty reserves of \$..... and accrued accident and health experience rating refunds including \$..... for medical loss ratio rebate per the Public Health Service Act) |                   |                 |
| 10. Advance premium   | 182               |                 |
| 11. Dividends declared and unpaid:  |                   |                 |
| 11.1 Stockholders   |                   |                 |
| 11.2 Policyholders  |                   |                 |
| 12. Ceded reinsurance premiums payable (net of ceding commissions)  | 19,042            |                 |
| 13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)  |                   |                 |
| 14. Amounts withheld or retained by company for account of others   |                   |                 |
| 15. Remittances and items not allocated   |                   |                 |
| 16. Provision for reinsurance (including \$..... certified) (Schedule F, Part 3 Column 78)  |                   |                 |
| 17. Net adjustments in assets and liabilities due to foreign exchange rates   |                   |                 |
| 18. Drafts outstanding  |                   |                 |
| 19. Payable to parent, subsidiaries and affiliates  | 16,021            | 1,740           |
| 20. Derivatives   |                   |                 |
| 21. Payable for securities  |                   |                 |
| 22. Payable for securities lending  |                   |                 |
| 23. Liability for amounts held under uninsured plans  |                   |                 |
| 24. Capital notes \$..... and interest thereon \$.....  |                   |                 |
| 25. Aggregate write-ins for liabilities   |                   |                 |
| 26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)   | 54,727            | 24,799          |
| 27. Protected cell liabilities  |                   |                 |
| 28. Total liabilities (Lines 26 and 27)   | 54,727            | 24,799          |
| 29. Aggregate write-ins for special surplus funds   |                   |                 |
| 30. Common capital stock  | 1,000,000         | 1,000,000       |
| 31. Preferred capital stock   |                   |                 |
| 32. Aggregate write-ins for other-than-special surplus funds  |                   |                 |
| 33. Surplus notes   |                   |                 |
| 34. Gross paid in and contributed surplus   | 1,949,915         | 1,949,915       |
| 35. Unassigned funds (surplus)  | 119,609           | 72,807          |
| 36. Less treasury stock, at cost:   |                   |                 |
| 36.1 shares common (value included in Line 30 \$.....)  |                   |                 |
| 36.2 shares preferred (value included in Line 31 \$.....)   |                   |                 |
| 37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)  | 3,069,523         | 3,022,722       |
| 38. Totals (Page 2, Line 28, Col. 3)  | 3,124,250         | 3,047,520       |
| <b>Details of Write-Ins</b>   |                   |                 |
| 2501. Uncashed Checks - Escheats  |                   |                 |
| 2502.   |                   |                 |
| 2503.   |                   |                 |
| 2598. Summary of remaining write-ins for Line 25 from overflow page   |                   |                 |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)  |                   |                 |
| 2901.   |                   |                 |
| 2902.   |                   |                 |
| 2903.   |                   |                 |
| 2998. Summary of remaining write-ins for Line 29 from overflow page   |                   |                 |
| 2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)  |                   |                 |
| 3201.   |                   |                 |
| 3202.   |                   |                 |
| 3203.   |                   |                 |
| 3298. Summary of remaining write-ins for Line 32 from overflow page   |                   |                 |
| 3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)  |                   |                 |

## STATEMENT OF INCOME

|   |  | 1<br>Current Year | 2<br>Prior Year |
|---|--|-------------------|-----------------|
| <b>Underwriting Income</b>  |  |                   |                 |
| 1. Premiums earned (Part 1, Line 35, Column 4)  |  | —                 |                 |
| Deductions:   |  |                   |                 |
| 2. Losses incurred (Part 2, Line 35, Column 7)  |  | (75)              |                 |
| 3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)  |  |                   |                 |
| 4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)   |  | 13,809            | 29,384          |
| 5. Aggregate write-ins for underwriting deductions  |  |                   |                 |
| 6. Total underwriting deductions (Lines 2 through 5)  |  | 13,809            | 29,309          |
| 7. Net income of protected cells  |  |                   |                 |
| 8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)   |  | (13,809)          | (29,309)        |
| <b>Investment Income</b>  |  |                   |                 |
| 9. Net investment income earned (Exhibit of Net Investment Income, Line 17)   |  | 116,793           | 123,717         |
| 10. Net realized capital gains (losses) less capital gains tax of \$..... (Exhibit of Capital Gains (Losses))   |  |                   |                 |
| 11. Net investment gain (loss) (Lines 9 + 10)   |  | 116,793           | 123,717         |
| <b>Other Income</b>   |  |                   |                 |
| 12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$..... amount charged off \$.....(2,592))                        |  | 2,592             |                 |
| 13. Finance and service charges not included in premiums  |  |                   |                 |
| 14. Aggregate write-ins for miscellaneous income  |  |                   |                 |
| 15. Total other income (Lines 12 through 14)  |  | 2,592             |                 |
| 16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)     |  | 105,576           | 94,408          |
| 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) |  | 105,576           | 94,408          |
| 19. Federal and foreign income taxes incurred   |  | 19,404            | 18,511          |
| 20. Net income (Line 18 minus Line 19) (to Line 22)   |  | 86,172            | 75,897          |
| <b>Capital and Surplus Account</b>  |  |                   |                 |
| 21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)  |  | 3,022,722         | 3,423,848       |
| 22. Net income (from Line 20)   |  | 86,172            | 75,897          |
| 23. Net transfers (to) from Protected Cell accounts   |  |                   |                 |
| 24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....(8,650)   |  | (32,541)          | 3,783           |
| 25. Change in net unrealized foreign exchange capital gain (loss)   |  |                   |                 |
| 26. Change in net deferred income tax   |  | (1,401)           | (3,030)         |
| 27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)   |  | (5,428)           | 1,627           |
| 28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)  |  |                   |                 |
| 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  |  | —                 | —               |
| 33.2 Transferred to capital (Stock Dividend)  |  |                   |                 |
| 33.3 Transferred from capital   |  |                   |                 |
| 34. Net remittances from or (to) Home Office  |  |                   |                 |
| 35. Dividends to stockholders   |  |                   | (479,403)       |
| 36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)   |  |                   |                 |
| 37. Aggregate write-ins for gains and losses in surplus   |  |                   |                 |
| 38. Change in surplus as regards to policyholders (Lines 22 through 37)   |  | 46,802            | (401,126)       |
| 39. Surplus as regards to policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)  |  | 3,069,523         | 3,022,722       |
| <b>Details of Write-Ins</b>   |  |                   |                 |
| 0501.   |  |                   |                 |
| 0502.   |  |                   |                 |
| 0503.   |  |                   |                 |
| 0598. Summary of remaining write-ins for Line 5 from overflow page  |  |                   |                 |
| 0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)   |  |                   |                 |
| 1401.   |  |                   |                 |
| 1402.   |  |                   |                 |
| 1403.   |  |                   |                 |
| 1498. Summary of remaining write-ins for Line 14 from overflow page   |  |                   |                 |
| 1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)  |  |                   |                 |
| 3701.   |  |                   |                 |
| 3702.   |  |                   |                 |
| 3703.   |  |                   |                 |
| 3798. Summary of remaining write-ins for Line 37 from overflow page   |  |                   |                 |
| 3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)  |  |                   |                 |

**CASH FLOW**

|  |  | 1<br>Current Year | 2<br>Prior Year |
|--|--|-------------------|-----------------|
| <b>Cash from Operations</b>  |  |                   |                 |
| 1. Premiums collected net of reinsurance.....  |  | 6,241             |                 |
| 2. Net investment income.....  |  | 116,524           | 127,849         |
| 3. Miscellaneous income.....   |  | 2,592             |                 |
| 4. Total (Lines 1 to 3).....   |  | 125,357           | 127,849         |
| 5. Benefit and loss related payments.....  |  |                   | (75)            |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....                    |  |                   |                 |
| 7. Commissions, expenses paid and aggregate write-ins for deductions.....                                      |  | 16,459            | 29,624          |
| 8. Dividends paid to policyholders.....  |  |                   |                 |
| 9. Federal and foreign income taxes paid (recovered) net of \$..... tax on capital gains (losses).....         |  | 18,512            | 16,910          |
| 10. Total (Lines 5 through 9).....   |  | 34,970            | 46,459          |
| 11. Net cash from operations (Line 4 minus Line 10).....   |  | 90,387            | 81,390          |
| <b>Cash from Investments</b>   |  |                   |                 |
| 12. Proceeds from investments sold, matured or repaid:   |  |                   |                 |
| 12.1 Bonds.....  |  | 50,000            | 45,227          |
| 12.2 Stocks.....   |  |                   |                 |
| 12.3 Mortgage loans.....   |  |                   |                 |
| 12.4 Real estate.....  |  |                   |                 |
| 12.5 Other invested assets.....  |  |                   |                 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....                           |  |                   | –               |
| 12.7 Miscellaneous proceeds.....   |  | –                 | –               |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7).....   |  | 50,000            | 45,227          |
| 13. Cost of investments acquired (long-term only):   |  |                   |                 |
| 13.1 Bonds.....  |  |                   | 202,397         |
| 13.2 Stocks.....   |  |                   |                 |
| 13.3 Mortgage loans.....   |  |                   |                 |
| 13.4 Real estate.....  |  |                   |                 |
| 13.5 Other invested assets.....  |  |                   |                 |
| 13.6 Miscellaneous applications.....   |  | –                 | –               |
| 13.7 Total investments acquired (Lines 13.1 to 13.6).....  |  | –                 | 202,397         |
| 14. Net increase / (decrease) in contract loans and premium notes.....   |  |                   |                 |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14).....                                   |  | 50,000            | (157,170)       |
| <b>Cash from Financing and Miscellaneous Sources</b>   |  |                   |                 |
| 16. Cash provided (applied):   |  |                   |                 |
| 16.1 Surplus notes, capital notes.....   |  |                   |                 |
| 16.2 Capital and paid in surplus, less treasury stock.....   |  | –                 | –               |
| 16.3 Borrowed funds.....   |  | –                 | –               |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities.....                               |  |                   |                 |
| 16.5 Dividends to stockholders.....  |  |                   | –               |
| 16.6 Other cash provided (applied).....  |  | (3,151)           | 1,663           |
| 17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)..... |  | (3,151)           | 1,663           |
| <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).....       |  | 137,236           | (74,117)        |
| 19. Cash, cash equivalents and short-term investments:   |  |                   |                 |
| 19.1 Beginning of year.....  |  | 47,415            | 121,532         |
| 19.2 End of year (Line 18 plus Line 19.1).....   |  | 184,651           | 47,415          |

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

|             |  |  |
|-------------|--|--|
| 20,000..... |  |  |
|-------------|--|--|

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 1 – PREMIUMS EARNED

| Line of Business   | 1<br>Net Premiums Written per Column 6, Part 1B | 2<br>Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1 | 3<br>Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A | 4<br>Premiums Earned During Year (Cols. 1 + 2 - 3) |
|--|---|--|--|--|
| 1. Fire.....   |   |  |  |  |
| 2.1 Allied lines.....  |   |  |  |  |
| 2.2 Multiple peril crop.....   |   |  |  |  |
| 2.3 Federal flood.....   |   |  |  |  |
| 2.4 Private crop.....  |   |  |  |  |
| 2.5 Private flood.....   |   |  |  |  |
| 3. Farmowners multiple peril.....  |   | –  |  | –  |
| 4. Homeowners multiple peril.....  |   |  |  |  |
| 5.1 Commercial multiple peril (non-liability portion).....               |   |  |  |  |
| 5.2 Commercial multiple peril (liability portion).....                   |   |  |  |  |
| 6. Mortgage guaranty.....  |   |  |  |  |
| 8. Ocean marine.....   |   | –  |  | –  |
| 9.1 Inland marine.....   |   | –  |  | –  |
| 9.2 Pet insurance plans.....   |   |  |  |  |
| 10. Financial guaranty.....  |   |  |  |  |
| 11.1 Medical professional liability – occurrence.....                    |   |  |  |  |
| 11.2 Medical professional liability – claims-made.....                   |   |  |  |  |
| 12. Earthquake.....  |   |  |  |  |
| 13.1 Comprehensive (hospital and medical) individual.....                |   |  |  |  |
| 13.2 Comprehensive (hospital and medical) group.....                     |   |  |  |  |
| 14. Credit accident and health (group and individual).....               |   |  |  |  |
| 15.1 Vision only.....  |   |  |  |  |
| 15.2 Dental only.....  |   |  |  |  |
| 15.3 Disability income.....  |   |  |  |  |
| 15.4 Medicare supplement.....  |   |  |  |  |
| 15.5 Medicaid Title XIX.....   |   |  |  |  |
| 15.6 Medicare Title XVIII.....   |   |  |  |  |
| 15.7 Long-term care.....   |   |  |  |  |
| 15.8 Federal employees health benefits plan.....                         |   |  |  |  |
| 15.9 Other health.....   |   |  |  |  |
| 16. Workers' compensation.....   |   |  |  |  |
| 17.1 Other liability – occurrence.....                                   |   |  |  |  |
| 17.2 Other liability – claims-made.....                                  |   |  |  |  |
| 17.3 Excess workers' compensation.....                                   |   |  |  |  |
| 18.1 Products liability – occurrence.....                                |   |  |  |  |
| 18.2 Products liability – claims-made.....                               |   |  |  |  |
| 19.1 Private passenger auto no-fault (personal injury protection).....   |   |  |  |  |
| 19.2 Other private passenger auto liability.....                         |   |  |  |  |
| 19.3 Commercial auto no-fault (personal injury protection).....          |   |  |  |  |
| 19.4 Other commercial auto liability.....                                |   |  |  |  |
| 21.1 Private passenger auto physical damage.....                         |   |  |  |  |
| 21.2 Commercial 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 through 3403 plus 3498) (Line 34 above).....    |   |  |  |  |

**NONE**

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 1A – RECAPITULATION OF ALL PREMIUMS

| Line of Business   | 1<br>Amount<br>Unearned<br>(Running One<br>Year or Less<br>from Date of<br>Policy) (a) | 2<br>Amount<br>Unearned<br>(Running<br>More Than<br>One Year<br>from Date of<br>Policy) (a) | 3<br>Earned but<br>Unbilled<br>Premium | 4<br>Reserve for<br>Rate Credits<br>and<br>Retrospective<br>Adjustments<br>Based on<br>Experience | 5<br>Total Reserve<br>for Unearned<br>Premiums<br>Cols.<br>1+2+3+4 |
|--|--|---|--|---|--|
| 1. Fire.....   |  |   |  |   |  |
| 2.1 Allied lines.....  |  |   |  |   |  |
| 2.2 Multiple peril crop.....   |  |   |  |   |  |
| 2.3 Federal flood.....   |  |   |  |   |  |
| 2.4 Private crop.....  |  |   |  |   |  |
| 2.5 Private flood.....   |  |   |  |   |  |
| 3. Farmowners multiple peril.....  |  |   |  |   |  |
| 4. Homeowners multiple peril.....  |  |   |  |   |  |
| 5.1 Commercial multiple peril (non-liability portion).....               |  |   |  |   |  |
| 5.2 Commercial multiple peril (liability portion).....                   |  |   |  |   |  |
| 6. Mortgage guaranty.....  |  |   |  |   |  |
| 8. Ocean marine.....   |  |   |  |   |  |
| 9.1 Inland marine.....   |  |   |  |   |  |
| 9.2 Pet insurance plans.....   |  |   |  |   |  |
| 10. Financial guaranty.....  |  |   |  |   |  |
| 11.1 Medical professional liability – occurrence.....                    |  |   |  |   |  |
| 11.2 Medical professional liability – claims-made.....                   |  |   |  |   |  |
| 12. Earthquake.....  |  |   |  |   |  |
| 13.1 Comprehensive (hospital and medical) individual.....                |  |   |  |   |  |
| 13.2 Comprehensive (hospital and medical) group.....                     |  |   |  |   |  |
| 14. Credit accident and health (group and individual).....               |  |   |  |   |  |
| 15.1 Vision only.....  |  |   |  |   |  |
| 15.2 Dental only.....  |  |   |  |   |  |
| 15.3 Disability income.....  |  |   |  |   |  |
| 15.4 Medicare supplement.....  |  |   |  |   |  |
| 15.5 Medicaid Title XIX.....   |  |   |  |   |  |
| 15.6 Medicare Title XVIII.....   |  |   |  |   |  |
| 15.7 Long-term care.....   |  |   |  |   |  |
| 15.8 Federal employees health benefits plan.....                         |  |   |  |   |  |
| 15.9 Other health.....   |  |   |  |   |  |
| 16. Workers' compensation.....   |  |   |  |   |  |
| 17.1 Other liability – occurrence.....                                   |  |   |  |   |  |
| 17.2 Other liability – claims-made.....                                  |  |   |  |   |  |
| 17.3 Excess workers' compensation.....                                   |  |   |  |   |  |
| 18.1 Products liability—occurrence.....                                  |  |   |  |   |  |
| 18.2 Products liability—claims-made.....                                 |  |   |  |   |  |
| 19.1 Private passenger auto no-fault (personal injury protection).....   |  |   |  |   |  |
| 19.2 Other private passenger auto liability.....                         |  |   |  |   |  |
| 19.3 Commercial auto no-fault (personal injury protection).....          |  |   |  |   |  |
| 19.4 Other commercial auto liability.....                                |  |   |  |   |  |
| 21.1 Private passenger auto physical damage.....                         |  |   |  |   |  |
| 21.2 Commercial 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.....  |  |   |  |   |  |
| 36. Accrued retrospective premiums based on experience.....              | XXX  | XXX   | XXX                                    | XXX   |  |
| 37. Earned but unbilled premiums.....                                    | XXX  | XXX   | XXX                                    | XXX   |  |
| 38. Balance (Sum of Lines 35 through 37).....                            | XXX  | XXX   | XXX                                    | XXX   |  |
| <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 through 3403 plus 3498) (Line 34 above).....    |  |   |  |   |  |

(a) State here basis of computation used in each case: Daily Pro Rata

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 1B – PREMIUMS WRITTEN

| Line of Business   | 1<br>Direct Business<br>(a) | Reinsurance Assumed  |                              | Reinsurance Ceded  |                            | 6<br>Net Premiums<br>Written Cols.<br>1+2+3-4-5 |
|--|-----------------------------|----------------------|------------------------------|--------------------|----------------------------|---|
|  |                             | 2<br>From Affiliates | 3<br>From Non-<br>Affiliates | 4<br>To Affiliates | 5<br>To Non-<br>Affiliates |   |
| 1. Fire.....   |                             |                      |                              |                    |                            |   |
| 2.1 Allied lines.....  |                             |                      |                              |                    |                            |   |
| 2.2 Multiple peril crop.....   |                             |                      |                              |                    |                            |   |
| 2.3 Federal flood.....   |                             |                      |                              |                    |                            |   |
| 2.4 Private crop.....  |                             |                      |                              |                    |                            |   |
| 2.5 Private flood.....   |                             |                      |                              |                    |                            |   |
| 3. Farmowners multiple peril.....  | 18,573                      |                      |                              | 18,145             | 428                        | –   |
| 4. Homeowners multiple peril.....  |                             |                      |                              |                    |                            |   |
| 5.1 Commercial multiple peril (non-liability portion).....               |                             |                      |                              |                    |                            |   |
| 5.2 Commercial multiple peril (liability portion).....                   |                             |                      |                              |                    |                            |   |
| 6. Mortgage guaranty.....  |                             |                      |                              |                    |                            |   |
| 8. Ocean marine.....   |                             |                      |                              |                    |                            |   |
| 9.1 Inland marine.....   | 34                          |                      |                              | 34                 |                            | –   |
| 9.2 Pet insurance plans.....   |                             |                      |                              |                    |                            |   |
| 10. Financial guaranty.....  |                             |                      |                              |                    |                            |   |
| 11.1 Medical professional liability – occurrence.....                    |                             |                      |                              |                    |                            |   |
| 11.2 Medical professional liability – claims-made.....                   |                             |                      |                              |                    |                            |   |
| 12. Earthquake.....  |                             |                      |                              |                    |                            |   |
| 13.1 Comprehensive (hospital and medical) individual.....                |                             |                      |                              |                    |                            |   |
| 13.2 Comprehensive (hospital and medical) group.....                     |                             |                      |                              |                    |                            |   |
| 14. Credit accident and health (group and individual).....               |                             |                      |                              |                    |                            |   |
| 15.1 Vision only.....  |                             |                      |                              |                    |                            |   |
| 15.2 Dental only.....  |                             |                      |                              |                    |                            |   |
| 15.3 Disability income.....  |                             |                      |                              |                    |                            |   |
| 15.4 Medicare supplement.....  |                             |                      |                              |                    |                            |   |
| 15.5 Medicaid Title XIX.....   |                             |                      |                              |                    |                            |   |
| 15.6 Medicare Title XVIII.....   |                             |                      |                              |                    |                            |   |
| 15.7 Long-term care.....   |                             |                      |                              |                    |                            |   |
| 15.8 Federal employees health benefits plan.....                         |                             |                      |                              |                    |                            |   |
| 15.9 Other health.....   |                             |                      |                              |                    |                            |   |
| 16. Workers' compensation.....   |                             |                      |                              |                    |                            |   |
| 17.1 Other liability – occurrence.....                                   |                             |                      |                              |                    |                            |   |
| 17.2 Other liability – claims-made.....                                  |                             |                      |                              |                    |                            |   |
| 17.3 Excess workers' compensation.....                                   |                             |                      |                              |                    |                            |   |
| 18.1 Products liability – occurrence.....                                |                             |                      |                              |                    |                            |   |
| 18.2 Products liability – claims-made.....                               |                             |                      |                              |                    |                            |   |
| 19.1 Private passenger auto no-fault (personal injury protection).....   |                             |                      |                              |                    |                            |   |
| 19.2 Other private passenger auto liability.....                         |                             |                      |                              |                    |                            |   |
| 19.3 Commercial auto no-fault (personal injury protection).....          |                             |                      |                              |                    |                            |   |
| 19.4 Other commercial auto liability.....                                |                             |                      |                              |                    |                            |   |
| 21.1 Private passenger auto physical damage.....                         |                             |                      |                              |                    |                            |   |
| 21.2 Commercial auto physical damage.....                                |                             |                      |                              |                    |                            |   |
| 22. Aircraft (all perils).....   |                             |                      |                              |                    |                            |   |
| 23. Fidelity.....  |                             |                      |                              |                    |                            |   |
| 24. Surety.....  |                             |                      |                              |                    |                            |   |
| 26. Burglary and theft.....  |                             |                      |                              |                    |                            |   |
| 27. Boiler and machinery.....  | 435                         |                      |                              |                    | 435                        | –   |
| 28. Credit.....  |                             |                      |                              |                    |                            |   |
| 29. International.....   |                             |                      |                              |                    |                            |   |
| 30. Warranty.....  |                             |                      |                              |                    |                            |   |
| 31. Reinsurance - nonproportional assumed property.....                  | XXX                         |                      |                              |                    |                            |   |
| 32. Reinsurance - nonproportional assumed liability.....                 | XXX                         |                      |                              |                    |                            |   |
| 33. Reinsurance - nonproportional assumed financial lines.....           | XXX                         |                      |                              |                    |                            |   |
| 34. Aggregate write-ins for other lines of business.....                 |                             |                      |                              |                    |                            |   |
| 35. TOTALS.....  | 19,042                      |                      |                              | 18,179             | 863                        | –   |
| <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 through 3403 plus 3498)<br>(Line 34 above)..... |                             |                      |                              |                    |                            |   |

(a) Does the company's direct premiums written include premiums recorded on an installment basis? NO

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

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

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2 - LOSSES PAID AND INCURRED

| Line of Business  | Losses Paid Less Salvage |                     |                       |                                | 5   | 6                            | 7   | 8  |
|---|--------------------------|---------------------|-----------------------|--------------------------------|---|------------------------------|---|--|
|   | 1                        | 2                   | 3                     | 4                              |   |                              |   |  |
|   | Direct Business          | Reinsurance Assumed | Reinsurance Recovered | Net Payments (Cols. 1 + 2 - 3) | Net Losses Unpaid Current Year<br>(Part 2A, Col. 8) | Net Losses Unpaid Prior Year | Losses Incurred Current Year<br>(Cols. 4 + 5 - 6) | Percentage of Losses Incurred<br>(Col. 7, Part 2) to Premiums<br>Earned (Col. 4, Part 1) |
| 1. Fire .....   |                          |                     |                       |                                |   |                              |   | %  |
| 2.1 Allied lines .....  |                          |                     |                       |                                |   |                              |   | %  |
| 2.2 Multiple peril crop .....   |                          |                     |                       |                                |   |                              |   | %  |
| 2.3 Federal flood .....   |                          |                     |                       |                                |   |                              |   | %  |
| 2.4 Private crop .....  |                          |                     |                       |                                |   |                              |   | %  |
| 2.5 Private flood .....   |                          |                     |                       |                                |   |                              |   | %  |
| 3. Farmowners multiple peril .....  |                          |                     |                       |                                |   |                              |   | %  |
| 4. Homeowners multiple peril .....  |                          |                     |                       |                                |   |                              |   | %  |
| 5.1 Commercial multiple peril (non-liability portion) .....               |                          |                     |                       |                                |   |                              |   | %  |
| 5.2 Commercial multiple peril (liability portion) .....                   |                          |                     |                       |                                |   |                              |   | %  |
| 6. Mortgage guaranty .....  |                          |                     |                       |                                |   |                              |   | %  |
| 8. Ocean marine .....   |                          |                     |                       |                                |   |                              |   | %  |
| 9.1 Inland marine .....   |                          |                     |                       |                                |   |                              |   | %  |
| 9.2 Pet insurance plans .....   |                          |                     |                       |                                |   |                              |   | %  |
| 10. Financial guaranty .....  |                          |                     |                       |                                |   |                              |   | %  |
| 11.1 Medical professional liability – occurrence .....                    |                          |                     |                       |                                |   |                              |   | %  |
| 11.2 Medical professional liability – claims-made .....                   |                          |                     |                       |                                |   |                              |   | %  |
| 12. Earthquake .....  |                          |                     |                       |                                |   |                              |   | %  |
| 13.1 Comprehensive (hospital and medical) individual .....                |                          |                     |                       |                                |   |                              |   | %  |
| 13.2 Comprehensive (hospital and medical) group .....                     |                          |                     |                       |                                |   |                              |   | %  |
| 14. Credit accident and health (group and individual) .....               |                          |                     |                       |                                |   |                              |   | %  |
| 15.1 Vision only .....  |                          |                     |                       |                                |   |                              |   | %  |
| 15.2 Dental only .....  |                          |                     |                       |                                |   |                              |   | %  |
| 15.3 Disability income .....  |                          |                     |                       |                                |   |                              |   | %  |
| 15.4 Medicare supplement .....  |                          |                     |                       |                                |   |                              |   | %  |
| 15.5 Medicaid Title XIX .....   |                          |                     |                       |                                |   |                              |   | %  |
| 15.6 Medicare Title XVIII .....   |                          |                     |                       |                                |   |                              |   | %  |
| 15.7 Long-term care .....   |                          |                     |                       |                                |   |                              |   | %  |
| 15.8 Federal employees health benefits plan .....                         |                          |                     |                       |                                |   |                              |   | %  |
| 15.9 Other health .....   |                          |                     |                       |                                |   |                              |   | %  |
| 16. Workers' compensation .....   |                          |                     |                       |                                |   |                              |   | %  |
| 17.1 Other liability – occurrence .....                                   |                          |                     |                       |                                |   |                              |   | %  |
| 17.2 Other liability – claims-made .....                                  |                          |                     |                       |                                |   |                              |   | %  |
| 17.3 Excess workers' compensation .....                                   |                          |                     |                       |                                |   |                              |   | %  |
| 18.1 Products liability – occurrence .....                                |                          |                     |                       |                                |   |                              |   | %  |
| 18.2 Products liability – claims-made .....                               |                          |                     |                       |                                |   |                              |   | %  |
| 19.1 Private passenger auto no-fault (personal injury protection) .....   |                          |                     |                       |                                |   |                              |   | %  |
| 19.2 Other private passenger auto liability .....                         |                          |                     |                       |                                |   |                              |   | %  |
| 19.3 Commercial auto no-fault (personal injury protection) .....          |                          |                     |                       |                                |   |                              |   | %  |
| 19.4 Other commercial auto liability .....                                |                          |                     |                       |                                |   |                              |   | %  |
| 21.1 Private passenger auto physical damage .....                         |                          |                     |                       |                                |   |                              |   | %  |
| 21.2 Commercial 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 .....                  | XXX                      |                     |                       |                                |   |                              |   | %  |
| 32. Reinsurance - nonproportional assumed liability .....                 | XXX                      |                     |                       |                                |   |                              |   | %  |
| 33. Reinsurance - nonproportional assumed financial lines .....           | XXX                      |                     |                       |                                |   |                              |   | %  |
| 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 through 3403 plus 3498) (Line 34 above) .....    |                          |                     |                       |                                |   |                              |   |  |

NONE

## UNDERWRITING AND INVESTMENT EXHIBIT

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

| Line of Business  | Reported Losses |                          |                                     |   | Incurred But Not Reported |                          |                        | 8   | 9 |
|---|-----------------|--------------------------|-------------------------------------|---|---------------------------|--------------------------|------------------------|-----|---|
|   | 1<br>Direct     | 2<br>Reinsurance Assumed | 3<br>Deduct Reinsurance Recoverable | 4<br>Net Losses Excl. Incurred But Not Reported (Cols. 1+2-3) | 5<br>Direct               | 6<br>Reinsurance Assumed | 7<br>Reinsurance Ceded |     |   |
| 1. Fire   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 2.1 Allied lines  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 2.2 Multiple peril crop   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 2.3 Federal flood   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 2.4 Private crop  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 2.5 Private flood   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 3. Farmowners multiple peril  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 4. Homeowners multiple peril  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 5.1 Commercial multiple peril (non-liability portion)               |                 |                          |                                     |   |                           |                          |                        |     |   |
| 5.2 Commercial multiple peril (liability portion)                   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 6. Mortgage guaranty  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 8. Ocean marine   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 9.1 Inland marine   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 9.2 Pet insurance plans   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 10. Financial guaranty  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 11.1 Medical professional liability – occurrence                    |                 |                          |                                     |   |                           |                          |                        |     |   |
| 11.2 Medical professional liability – claims-made                   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 12. Earthquake  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 13.1 Comprehensive (hospital and medical) individual                |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 13.2 Comprehensive (hospital and medical) group                     |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 14. Credit accident and health (group and individual)               |                 |                          |                                     |   |                           |                          |                        |     |   |
| 15.1 Vision only  |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 15.2 Dental only  |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 15.3 Disability income  |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 15.4 Medicare supplement  |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 15.5 Medicaid Title XIX   |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 15.6 Medicare Title XVIII   |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 15.7 Long-term care   |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 15.8 Federal employees health benefits plan                         |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 15.9 Other health   |                 |                          |                                     |   |                           |                          |                        | (a) |   |
| 16. Workers' compensation   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 17.1 Other liability – occurrence                                   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 17.2 Other liability – claims-made                                  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 17.3 Excess workers' compensation                                   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 18.1 Products liability – occurrence                                |                 |                          |                                     |   |                           |                          |                        |     |   |
| 18.2 Products liability – claims-made                               |                 |                          |                                     |   |                           |                          |                        |     |   |
| 19.1 Private passenger auto no-fault (personal injury protection)   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 19.2 Other private passenger liability                              |                 |                          |                                     |   |                           |                          |                        |     |   |
| 19.3 Commercial auto no-fault (personal injury protection)          |                 |                          |                                     |   |                           |                          |                        |     |   |
| 19.4 Other commercial auto liability                                |                 |                          |                                     |   |                           |                          |                        |     |   |
| 21.1 Private passenger auto physical damage                         |                 |                          |                                     |   |                           |                          |                        |     |   |
| 21.2 Commercial 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                  | XXX             |                          |                                     |   |                           | XXX                      |                        |     |   |
| 32. Reinsurance - nonproportional assumed liability                 | XXX             |                          |                                     |   |                           | XXX                      |                        |     |   |
| 33. Reinsurance - nonproportional assumed financial lines           | XXX             |                          |                                     |   |                           | XXX                      |                        |     |   |
| 34. Aggregate write-ins for other lines of business                 |                 |                          |                                     |   |                           |                          |                        |     |   |
| 35. TOTALS  |                 |                          |                                     |   |                           |                          |                        |     |   |
| Details of Write-Ins  |                 |                          |                                     |   |                           |                          |                        |     |   |
| 3401.   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 3402.   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 3403.   |                 |                          |                                     |   |                           |                          |                        |     |   |
| 3498. Summary of remaining write-ins for Line 34 from overflow page |                 |                          |                                     |   |                           |                          |                        |     |   |
| 3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)    |                 |                          |                                     |   |                           |                          |                        |     |   |

(a) Including \$ for present value of life indemnity claims reported in Lines 13 and 15.

NONE

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 3 – EXPENSES

|   | 1                        | 2                           | 3                   | 4          |
|---|--------------------------|-----------------------------|---------------------|------------|
|   | Loss Adjustment Expenses | Other Underwriting Expenses | Investment Expenses | Total      |
| 1. Claim adjustment services:   |                          |                             |                     |            |
| 1.1. Direct.....  |                          |                             |                     |            |
| 1.2. Reinsurance assumed.....   |                          |                             |                     |            |
| 1.3. Reinsurance ceded.....   |                          |                             |                     |            |
| 1.4. Net claim adjustment services (1.1+1.2-1.3).....                                   |                          |                             |                     |            |
| 2. Commission and brokerage:  |                          |                             |                     |            |
| 2.1. Direct, excluding contingent.....  |                          | 3,037                       |                     | 3,037      |
| 2.2. Reinsurance assumed, excluding contingent.....                                     |                          | 3,037                       |                     | 3,037      |
| 2.3. Reinsurance ceded, excluding contingent.....                                       |                          |                             |                     |            |
| 2.4. Contingent—direct.....   |                          |                             |                     |            |
| 2.5. Contingent—reinsurance assumed.....  |                          |                             |                     |            |
| 2.6. Contingent—reinsurance ceded.....  |                          |                             |                     |            |
| 2.7. Policy and membership fees.....  |                          |                             |                     |            |
| 2.8. Net commission and brokerage (2.1+2.2-2.3+2.4+2.5-2.6+2.7).....                    |                          | —                           |                     | —          |
| 3. Allowances to manager and agents.....  |                          |                             |                     |            |
| 4. Advertising.....   |                          | 13,809                      |                     | 13,809     |
| 5. Boards, bureaus and associations.....  |                          |                             |                     |            |
| 6. Surveys and underwriting reports.....  |                          |                             |                     |            |
| 7. Audit of assureds' records.....  |                          |                             |                     |            |
| 8. Salary and related items:  |                          |                             |                     |            |
| 8.1. Salaries.....  |                          |                             |                     |            |
| 8.2. Payroll taxes.....   |                          |                             |                     |            |
| 9. Employee relations and welfare.....  |                          |                             |                     |            |
| 10. Insurance.....  |                          |                             |                     |            |
| 11. Directors' fees.....  |                          |                             |                     |            |
| 12. Travel and travel items.....  |                          |                             |                     |            |
| 13. Rent and rent items.....  |                          |                             |                     |            |
| 14. Equipment.....  |                          |                             |                     |            |
| 15. Cost or depreciation of EDP equipment and software.....                             |                          |                             |                     |            |
| 16. Printing and stationery.....  |                          |                             |                     |            |
| 17. Postage, telephone and telegraph, exchange and express.....                         |                          |                             |                     |            |
| 18. Legal and auditing.....   |                          |                             |                     |            |
| 19. Totals (Lines 3 to 18).....   |                          | 13,809                      |                     | 13,809     |
| 20. Taxes, licenses and fees:   |                          |                             |                     |            |
| 20.1. State and local insurance taxes deducting guaranty association credits of \$..... |                          |                             |                     |            |
| 20.2. Insurance department licenses and fees.....                                       |                          |                             | 774                 | 774        |
| 20.3. Gross guaranty association assessments.....                                       |                          |                             |                     |            |
| 20.4. All other (excluding federal and foreign income and real estate).....             |                          |                             |                     |            |
| 20.5. Total taxes, licenses and fees (20.1+20.2+20.3+20.4).....                         |                          |                             | 774                 | 774        |
| 21. Real estate expenses.....   |                          |                             |                     |            |
| 22. Real estate taxes.....  |                          |                             |                     |            |
| 23. Reimbursements by uninsured plans.....  |                          |                             |                     |            |
| 24. Aggregate write-ins for miscellaneous expenses.....                                 |                          |                             |                     |            |
| 25. Total expenses incurred.....  |                          | 13,809                      | 774                 | (a) 14,583 |
| 26. Less unpaid expenses—current year.....  |                          |                             |                     |            |
| 27. Add unpaid expenses—prior year.....   |                          | 2,650                       |                     | 2,650      |
| 28. Amounts receivable relating to uninsured plans, prior year.....                     |                          |                             |                     |            |
| 29. Amounts receivable relating to uninsured plans, current year.....                   |                          |                             |                     |            |
| 30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....                             |                          | 16,459                      | 774                 | 17,233     |
| <b>Details of Write-Ins</b>   |                          |                             |                     |            |
| 2401.....   |                          |                             |                     |            |
| 2402.....   |                          |                             |                     |            |
| 2403.....   |                          |                             |                     |            |
| 2498. Summary of remaining write-ins for Line 24 from overflow page.....                |                          |                             |                     |            |
| 2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above).....                   |                          |                             |                     |            |

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

## EXHIBIT OF NET INVESTMENT INCOME

|   | 1                     | 2                  |
|---|-----------------------|--------------------|
|   | Collected During Year | Earned During Year |
| 1. U.S. Government bonds  | (a)                   |                    |
| 1.1. Bonds exempt from U.S. tax   | (a)                   | 7,371              |
| 1.2. Other bonds (unaffiliated)   | (a)                   | 108,256            |
| 1.3. Bonds of affiliates  | (a)                   |                    |
| 2.1. Preferred stocks (unaffiliated)                                    | (b)                   |                    |
| 2.11. Preferred stocks of affiliates                                    | (b)                   |                    |
| 2.2. Common stocks (unaffiliated)                                       |                       |                    |
| 2.21. Common stocks of affiliates                                       |                       |                    |
| 3. Mortgage loans   | (c)                   |                    |
| 4. Real estate  | (d)                   |                    |
| 5. Contract loans   |                       |                    |
| 6. Cash, cash equivalents and short-term investments                    | (e)                   | 2,149              |
| 7. Derivative instruments   | (f)                   |                    |
| 8. Other invested assets  |                       |                    |
| 9. Aggregate write-ins for investment income                            |                       |                    |
| 10. Total gross investment income                                       |                       | 117,776            |
| 11. Investment expenses   |                       | (g)                |
| 12. Investment taxes, licenses and fees, excluding federal income taxes |                       | (g)                |
| 13. Interest expense  |                       | (h)                |
| 14. Depreciation on real estate and other invested assets               |                       | (i)                |
| 15. Aggregate write-ins for deductions from investment income           |                       |                    |
| 16. Total deductions (Lines 11 through 15)                              |                       | 774                |
| 17. Net investment income (Line 10 minus Line 16)                       |                       | 116,793            |
| <b>Details of Write-Ins</b>   |                       |                    |
| 0901.   |                       |                    |
| 0902.   |                       |                    |
| 0903.   |                       |                    |
| 0998. Summary of remaining write-ins for Line 09 from overflow page     |                       |                    |
| 0999. Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)        |                       |                    |
| 1501.   |                       |                    |
| 1502.   |                       |                    |
| 1503.   |                       |                    |
| 1598. Summary of remaining write-ins for Line 15 from overflow page     |                       |                    |
| 1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)        |                       |                    |

(a) Includes \$5,604 accrual of discount less \$5,126 amortization of premium and less \$— paid for accrued interest on purchases.

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

(c) Includes \$ accrual of discount less \$ amortization of premium and less \$ 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 \$ depreciation on real estate and \$ depreciation on other invested assets.

## EXHIBIT OF CAPITAL GAINS (LOSSES)

|   | 1  | 2                             | 3  | 4   | 5   |
|---|--|-------------------------------|--|---|---|
|   | Realized Gain (Loss)<br>On Sales or Maturity | Other Realized<br>Adjustments | Total Realized<br>Capital Gain (Loss)<br>(Columns 1 + 2) | Change in Unrealized<br>Capital Gain (Loss) | Change in Unrealized<br>Foreign Exchange<br>Capital Gain (Loss) |
| 1. U.S. Government bonds  |  |                               |  |   |   |
| 1.1. Bonds exempt from U.S. tax                                     |  |                               |  | (46,473)                                    |   |
| 1.2. Other bonds (unaffiliated)                                     |  |                               |  | 5,282                                       |   |
| 1.3. Bonds of affiliates  |  |                               |  |   |   |
| 2.1. Preferred stocks (unaffiliated)                                |  |                               |  |   |   |
| 2.11. Preferred stocks of affiliates                                |  |                               |  |   |   |
| 2.2. Common stocks (unaffiliated)                                   |  |                               |  |   |   |
| 2.21. Common stocks of affiliates                                   |  |                               |  |   |   |
| 3. Mortgage loans   |  |                               |  |   |   |
| 4. Real estate  |  |                               |  |   |   |
| 5. Contract loans   |  |                               |  |   |   |
| 6. Cash, cash equivalents and short-term investments                |  |                               |  |   |   |
| 7. Derivative instruments   |  |                               |  |   |   |
| 8. Other invested assets  |  |                               |  |   |   |
| 9. Aggregate write-ins for capital gains (losses)                   |  |                               |  |   |   |
| 10. Total capital gains (losses)                                    |  |                               |  | (41,191)                                    |   |
| <b>Details of Write-Ins</b>   |  |                               |  |   |   |
| 0901.   |  |                               |  |   |   |
| 0902.   |  |                               |  |   |   |
| 0903.   |  |                               |  |   |   |
| 0998. Summary of remaining write-ins for Line 09 from overflow page |  |                               |  |   |   |
| 0999. Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)    |  |                               |  |   |   |

## EXHIBIT OF NONADMITTED ASSETS

|   | 1<br>Current Year<br>Total<br>Nonadmitted<br>Assets | 2<br>Prior Year Total<br>Nonadmitted<br>Assets | 3<br>Change in Total<br>Nonadmitted<br>Assets<br>(Col. 2 - Col. 1) |
|---|---|--|--|
| 1. Bonds (Schedule D).....  |   |  |  |
| 2. Stocks (Schedule D):   |   |  |  |
| 2.1. Preferred stocks.....  |   |  |  |
| 2.2. Common stocks.....   |   |  |  |
| 3. Mortgage loans on real estate (Schedule B):  |   |  |  |
| 3.1. First liens.....   |   |  |  |
| 3.2. Other than first liens.....  |   |  |  |
| 4. Real estate (Schedule A):  |   |  |  |
| 4.1. Properties occupied by the company.....  |   |  |  |
| 4.2. Properties held for the production of income.....  |   |  |  |
| 4.3. Properties held for sale.....  |   |  |  |
| 5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....     |   |  |  |
| 6. Contract loans.....  |   |  |  |
| 7. Derivatives (Schedule DB).....   |   |  |  |
| 8. Other invested assets (Schedule BA).....   |   |  |  |
| 9. Receivables for securities.....  |   |  |  |
| 10. Securities lending reinvested collateral assets (Schedule DL).....  |   |  |  |
| 11. Aggregate write-ins for invested assets.....  |   |  |  |
| 12. Subtotals, cash and invested assets (Lines 1 to 11).....  |   |  |  |
| 13. Title plants (for Title insurers only).....   |   |  |  |
| 14. Investment income due and accrued.....  |   |  |  |
| 15. Premiums and considerations:  |   |  |  |
| 15.1. Uncollected premiums and agents' balances in the course of collection.....                                    |   |  |  |
| 15.2. Deferred premiums, agents' balances and installments booked but deferred and not yet due.....                 |   |  |  |
| 15.3. Accrued retrospective premiums and contracts subject to redetermination.....                                  |   |  |  |
| 16. Reinsurance:  |   |  |  |
| 16.1. Amounts recoverable from reinsurers.....  |   |  |  |
| 16.2. Funds held by or deposited with reinsured companies.....  |   |  |  |
| 16.3. Other amounts receivable under reinsurance contracts.....   |   |  |  |
| 17. Amounts receivable relating to uninsured plans.....   |   |  |  |
| 18.1. Current federal and foreign income tax recoverable and interest thereon.....                                  |   | 5,428  | (5,428)  |
| 18.2. Net deferred tax asset.....   | 5,428   |  | (5,428)  |
| 19. Guaranty funds receivable or on deposit.....  |   |  |  |
| 20. Electronic data processing equipment and software.....  |   |  |  |
| 21. Furniture and equipment, including health care delivery assets.....   |   |  |  |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates.....                                     |   |  |  |
| 23. Receivables from parent, subsidiaries and affiliates.....   |   |  |  |
| 24. Health care and other amounts receivable.....   |   |  |  |
| 25. Aggregate write-ins for other-than-invested assets.....   |   |  |  |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)..... | 5,428   |  | (5,428)  |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....                                    |   |  |  |
| 28. Total (Lines 26 and 27).....  | 5,428   |  | (5,428)  |
| <b>Details of Write-Ins</b>   |   |  |  |
| 1101.....   |   |  |  |
| 1102.....   |   |  |  |
| 1103.....   |   |  |  |
| 1198. Summary of remaining write-ins for Line 11 from overflow page.....  |   |  |  |
| 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....   |   |  |  |
| 2501.....   |   |  |  |
| 2502.....   |   |  |  |
| 2503.....   |   |  |  |
| 2598. Summary of remaining write-ins for Line 25 from overflow page.....  |   |  |  |
| 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....   |   |  |  |

## Notes to the Financial Statements

### 1. Summary of Significant Accounting Policies and Going Concern

#### A. Accounting Practices

The financial statements of Cincinnati Equitable Insurance Company are presented on the basis of accounting practices prescribed or permitted by the Ohio Insurance Department.

The Ohio Insurance Department recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual, version effective March 2024, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Ohio. The State of Ohio has not adopted and prescribed or permitted practices that differ from NAIC SAP.

|   | SSAP # | F/S Page | F/S Line # | 2024         | 2023         |
|---|--------|----------|------------|--------------|--------------|
| Net Income  |        |          |            |              |              |
| (1) State basis (Page 4, Line 20, Columns 1 & 2) .....                          | XXX    | XXX      | XXX        | \$ 86,172    | \$ 75,897    |
| (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        | \$ 86,172    | \$ 75,897    |
| Surplus   |        |          |            |              |              |
| (5) State basis (Page 3, Line 37, Columns 1 & 2) .....                          | XXX    | XXX      | XXX        | \$ 3,069,523 | \$ 3,022,722 |
| (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        | \$ 3,069,523 | \$ 3,022,722 |

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make certain estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of 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 pro rata methods for direct business and are based on reports received from ceding companies for reinsurance.

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

In addition, the company uses the following accounting policies:

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at amortized cost using the interest method.

The Company does not hold any SVO Identified Bond ETFs on Schedule D-1.

- (3) Common Stocks at market value.
- (4) Preferred stocks are stated in accordance with the guidance provided in SSAP No. 32.
- (5) Mortgage loans on real estate are reported at the balance of unpaid principle less valuation allowance.
- (6) Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair market value. The retrospective adjustment method is used to value all securities except for interest only securities or securities where the yield had become negative, these are valued using the prospective method.
- (7) The Company owns no subsidiaries.
- (8) The Company has no interest in Joint Ventures.
- (9) All derivatives, if any, are stated at fair value.
- (10) The Company does not anticipate investment income as a factor in the premium deficiency calculation.

(11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and 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 are reflected in the period determined.

(12) The Company has not modified its capitalization policy from the prior period.

(13) Pharmaceutical rebate receivables - None

#### D. Going Concern

The Company has no Going Concern issues.

### 2. Accounting Changes and Corrections of Errors - None

## Notes to the Financial Statements

### 3. Business Combinations and Goodwill - None

### 4. Discontinued Operations - None

### 5. Investments

#### A. Mortgage Loans, including Mezzanine Real Estate Loans - None

#### B. Debt Restructuring - None

#### C. Reverse Mortgages - None

#### D. Loan-Backed Securities

(1) Prepayment assumptions for single class and multi-class mortgage-backed/asset-backed securities were obtained from broker dealer survey values or NAIC RMBS/ CMBS modeling.

(2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) - None

(3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities - None

(4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss - None

(5) Support for concluding impairments are not other-than-temporary - None

#### E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None

#### F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None

#### G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None

#### H. Repurchase Agreements Transactions Accounted for as a Sale - None

#### I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None

#### J. Real Estate - None

#### K. Low-Income Housing Tax Credits (LIHTC) - None

#### L. Restricted Assets

(1) Restricted assets (including pledged)

| Restricted Asset Category  | Gross (Admitted & Nonadmitted) Restricted |  |  |   |               |                       |                               | Current Year                 |                                 |   |  |
|--|---|--|--|---|---------------|-----------------------|-------------------------------|------------------------------|---------------------------------|---|--|
|  | Current Year                              |  |  |   |               |                       |                               |                              |                                 |   |  |
|  | (1)                                       | (2)  | (3)  | (4)   | (5)           | (6)                   | (7)                           | (8)                          | (9)                             | (10)                                      | (11)                                   |
|  | Total General Account (G/A)               | G/A Supporting Protected Cell Account Activity | Total Protected Cell Account Restricted Assets | Protected Cell Account Assets Supporting G/A Activity | Total (1 + 3) | Total From Prior Year | Increase / (Decrease) (5 - 6) | Total Nonadmitted Restricted | Total Admitted Restricted (5-8) | Gross (Admitted & Nonadmitted) Restricted | Admitted Restricted to Total Assets, % |
| 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  | 1,486,715                                 |  |  |   | 1,486,715     | 1,537,215             | (50,501)                      |                              | 1,486,715                       | 47.504                                    | 47.586                                 |
| k. On deposit with other regulatory bodies   |   |  |  |   |               |                       |                               |                              |                                 |   |  |
| l. Pledged as collateral to FHLB (including assets backing funding agreements)     |   |  |  |   |               |                       |                               |                              |                                 |   |  |
| m. Pledged as collateral not captured in other categories                          |   |  |  |   |               |                       |                               |                              |                                 |   |  |
| n. Other restricted assets   |   |  |  |   |               |                       |                               |                              |                                 |   |  |
| o. Total restricted assets (Sum of a through n)                                    | \$ 1,486,715                              | \$ .....                                       | \$ .....                                       | \$ .....  | \$ 1,486,715  | \$ 1,537,215          | \$ (50,501)                   | \$ .....                     | \$ 1,486,715                    | 47.504 %                                  | 47.586 %                               |

(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) - None

(3) Detail of other restricted assets (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - None

(4) Collateral received and reflected as assets within the reporting entity's financial statements - None

## Notes to the Financial Statements

### 5. Investments (Continued)

- M. Working Capital Finance Investments - None
- N. Offsetting and Netting of Assets and Liabilities - None
- O. 5GI Securities - None
- P. Short Sales - None
- Q. Prepayment Penalty and Acceleration Fees

The Company had no Prepayment Penalties or 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

| Asset Type                       | Percent Share    |
|----------------------------------|------------------|
| (1) Cash.....                    | 28.500 %         |
| (2) Cash Equivalents.....        | 71.500 %         |
| (3) Short-Term Investments.....  | %                |
| (4) Total (Must Equal 100%)..... | <u>100.000 %</u> |

### S. Aggregate Collateral Loans by Qualifying Investment Collateral - None

### 6. Joint Ventures, Partnerships and Limited Liability Companies - None

### 7. Investment Income

The Company has no excluded investment income due and accrued.

- A. Due and Accrued Income Excluded from Surplus - None
- B. Total Amount Excluded - Not Applicable
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued

| Interest Income Due and Accrued | Amount               |
|---------------------------------|----------------------|
| 1. Gross.....                   | \$..... 25,194 ..... |
| 2. Nonadmitted.....             | \$.....              |
| 3. Admitted.....                | \$..... 25,194 ..... |

### D. The aggregate deferred interest - Not Applicable

### E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance - Not Applicable

### 8. Derivative Instruments - None

### 9. Income Taxes

#### A. Components of the Net Deferred Tax Asset/(Liability)

##### (1) Change between years by tax character

|  | 2024               |                  |                    | 2023           |                    |                    | Change                |                      |                    |
|--|--------------------|------------------|--------------------|----------------|--------------------|--------------------|-----------------------|----------------------|--------------------|
|  | (1)                | (2)              | (3)                | (4)            | (5)                | (6)                | (7)                   | (8)                  | (9)                |
|  | Ordinary           | Capital          | Total<br>(Col 1+2) | Ordinary       | Capital            | Total<br>(Col 4+5) | Ordinary<br>(Col 1-4) | Capital<br>(Col 2-5) | Total<br>(Col 7+8) |
| (a) Gross deferred tax assets.....   | \$..... 8 ..       | \$..... 8,650 .. | \$..... 8,658 ..   | \$..... 557 .. | \$.....            | \$..... 557 ..     | \$..... (549) ..      | \$..... 8,650 ..     | \$..... 8,101 ..   |
| (b) Statutory valuation allowance<br>adjustments.....                              |                    |                  |                    |                |                    |                    |                       |                      |                    |
| (c) Adjusted gross deferred tax assets<br>(1a - 1b).....                           | 8 ..               | 8,650 ..         | 8,658 ..           | 557 ..         |                    | 557 ..             | (549) ..              | 8,650 ..             | 8,101 ..           |
| (d) Deferred tax assets nonadmitted.....   | 5,428 ..           |                  | 5,428 ..           |                |                    |                    | 5,428 ..              |                      | 5,428 ..           |
| (e) Subtotal net admitted deferred tax<br>asset (1c - 1d).....                     | \$..... (5,420) .. | \$..... 8,650 .. | \$..... 3,230 ..   | \$..... 557 .. | \$.....            | \$..... 557 ..     | \$..... (5,977) ..    | \$..... 8,650 ..     | \$..... 2,673 ..   |
| (f) Deferred tax liabilities.....  | 5 ..               | 3,223 ..         | 3,228 ..           | 11 ..          | 2,365 ..           | 2,376 ..           | (6) ..                | 858 ..               | 852 ..             |
| (g) Net admitted deferred tax asset/(net<br>deferred tax liability) (1e - 1f)..... | \$..... (5,425) .. | \$..... 5,427 .. | \$..... 2 ..       | \$..... 546 .. | \$..... (2,365) .. | \$..... (1,819) .. | \$..... (5,971) ..    | \$..... 7,792 ..     | \$..... 1,821 ..   |

## Notes to the Financial Statements

### 9. Income Taxes (Continued)

#### (2) Admission calculation components SSAP No. 101

|   | 2024              |                 |                    | 2023          |                   |                    | Change                |                      |                    |
|---|-------------------|-----------------|--------------------|---------------|-------------------|--------------------|-----------------------|----------------------|--------------------|
|   | (1)               | (2)             | (3)                | (4)           | (5)               | (6)                | (7)                   | (8)                  | (9)                |
|   | Ordinary          | Capital         | Total<br>(Col 1+2) | Ordinary      | Capital           | Total<br>(Col 4+5) | Ordinary<br>(Col 1-4) | Capital<br>(Col 2-5) | Total<br>(Col 7+8) |
| (a) Federal income taxes paid in prior years recoverable through loss carrybacks.....   | \$ 54,817         | \$ 88           | \$ 54,905          | \$ 32,232     | \$ 1,830          | \$ 34,062          | \$ 22,585             | \$ (1,742)           | \$ 20,843          |
| (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 (lesser of 2(b)1 and 2(b)2 below)..... | (60,237)          | 8,562           | (51,675)           | (31,675)      | (1,830)           | (33,505)           | (28,562)              | 10,392               | (18,170)           |
| 1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date.....   | 2                 | 2               | 557                | 557           | (555)             |                    |                       |                      | (555)              |
| 2. Adjusted gross deferred tax assets allowed per limitation threshold.....   | XXX               | XXX             | 460,336            | XXX           | XXX               | 453,991            | XXX                   | XXX                  | 6,345              |
| (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.....   | (5)               | (3,223)         | (3,228)            | (11)          | (2,365)           | (2,376)            | 6                     | (858)                | (852)              |
| (d) Deferred tax assets admitted as the result of application of SSAP No. 101.  | \$ (5,425)        | \$ 5,427        | \$ 2               | \$ 546        | \$ (2,365)        | \$ (1,819)         | \$ (5,971)            | \$ 7,792             | \$ 1,821           |
| Total (2(a) + 2(b) + 2(c)).....   | <u>\$ (5,425)</u> | <u>\$ 5,427</u> | <u>\$ 2</u>        | <u>\$ 546</u> | <u>\$ (2,365)</u> | <u>\$ (1,819)</u>  | <u>\$ (5,971)</u>     | <u>\$ 7,792</u>      | <u>\$ 1,821</u>    |

#### (3) Ratio used as basis of admissibility

|   | 2024         | 2023         |
|---|--------------|--------------|
| (a) Ratio percentage used to determine recovery period and threshold limitation amount.....                               | 2,480.061 %  | 3,028.450 %  |
| (b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above..... | \$ 3,069,521 | \$ 3,022,722 |

#### (4) Impact of tax-planning strategies

##### (a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage

|   | 2024       |          | 2023     |            | Change                 |                       |
|---|------------|----------|----------|------------|------------------------|-----------------------|
|   | (1)        | (2)      | (3)      | (4)        | (5)                    | (6)                   |
|   | Ordinary   | Capital  | Ordinary | Capital    | Ordinary<br>(Col. 1-3) | Capital<br>(Col. 2-4) |
| 1. Adjusted gross DTAs amount from Note 9A1(c).....   | \$ 8       | \$ 8,650 | \$ 557   | \$ (549)   | \$ (549)               | \$ 8,650              |
| 2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies.....                  | %          | %        | %        | %          | %                      | %                     |
| 3. Net admitted adjusted gross DTAs amount from Note 9A1(e).....  | \$ (5,420) | \$ 8,650 | \$ 557   | \$ (5,977) | \$ (5,977)             | \$ 8,650              |
| 4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies..... | %          | %        | %        | %          | %                      | %                     |

##### (b) Use of reinsurance-related tax-planning strategies

Does the company's tax-planning strategies include the use of reinsurance?..... No

#### B. Regarding Deferred Tax Liabilities That Are Not Recognized - None

#### C. Major Components of Current Income Taxes Incurred

|  | (1)       | (2)       | (3)          |
|--|-----------|-----------|--------------|
|  | 2024      | 2023      | Change (1-2) |
| Current income taxes incurred consist of the following major components: |           |           |              |
| 1. Current Income Tax  |           |           |              |
| (a) Federal.....   | \$ 19,404 | \$ 18,511 | \$ 893       |
| (b) Foreign.....   |           |           |              |
| (c) Subtotal (1a+1b).....  | \$ 19,404 | \$ 18,511 | \$ 893       |
| (d) Federal income tax on net capital gains.....                         |           |           |              |
| (e) Utilization of capital loss carry-forwards.....                      |           |           |              |
| (f) Other.....   |           |           |              |
| (g) Federal and foreign income taxes incurred (1c+1d+1e+1f).....         | \$ 19,404 | \$ 18,511 | \$ 893       |

**Notes to the Financial Statements****9. Income Taxes (Continued)**

|   | (1)<br>2024           | (2)<br>2023               | (3)<br>Change (1-2)  |
|---|-----------------------|---------------------------|----------------------|
| <b>2. Deferred Tax Assets</b>                                   |                       |                           |                      |
| (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.....   | \$..... 8             | \$..... 557               | \$..... (549)        |
| (99) Subtotal (Sum of 2a1 through 2a13).....                    | \$..... 8             | \$..... 557               | \$..... (549)        |
| (b) Statutory valuation allowance adjustment.....               | \$.....               | \$.....                   | \$.....              |
| (c) Nonadmitted.....  | \$..... 5,428         | \$.....                   | \$..... 5,428        |
| (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)..... | \$..... (5,420)       | \$..... 557               | \$..... (5,977)      |
| (e) Capital   |                       |                           |                      |
| (1) Investments.....  | \$..... 8,650         | \$.....                   | \$..... 8,650        |
| (2) Net capital loss carry-forward.....                         | \$.....               | \$.....                   | \$.....              |
| (3) Real estate.....  | \$.....               | \$.....                   | \$.....              |
| (4) Other.....  | \$.....               | \$.....                   | \$.....              |
| (99) Subtotal (2e1+2e2+2e3+2e4).....                            | \$..... 8,650         | \$.....                   | \$..... 8,650        |
| (f) Statutory valuation allowance adjustment.....               | \$.....               | \$.....                   | \$.....              |
| (g) Nonadmitted.....  | \$.....               | \$.....                   | \$.....              |
| (h) Admitted capital deferred tax assets (2e99 - 2f - 2g).....  | \$..... 8,650         | \$.....                   | \$..... 8,650        |
| (i) Admitted deferred tax assets (2d + 2h).....                 | \$..... 3,230         | \$..... 557               | \$..... 2,673        |
|   | (1)<br>2024           | (2)<br>2023               | (3)<br>Change (1-2)  |
| <b>3. Deferred Tax Liabilities</b>                              |                       |                           |                      |
| (a) Ordinary  |                       |                           |                      |
| (1) Investments.....  | \$.....               | \$.....                   | \$.....              |
| (2) Fixed assets.....   | \$.....               | \$.....                   | \$.....              |
| (3) Deferred and uncollected premium.....                       | \$.....               | \$.....                   | \$.....              |
| (4) Policyholder reserves.....                                  | \$.....               | \$.....                   | \$.....              |
| (5) Other.....  | \$..... 5             | \$..... 11                | \$..... (6)          |
| (99) Subtotal (3a1+3a2+3a3+3a4+3a5).....                        | \$..... 5             | \$..... 11                | \$..... (6)          |
| (b) Capital   |                       |                           |                      |
| (1) Investments.....  | \$..... 3,223         | \$..... 2,365             | \$..... 858          |
| (2) Real estate.....  | \$.....               | \$.....                   | \$.....              |
| (3) Other.....  | \$.....               | \$.....                   | \$.....              |
| (99) Subtotal (3b1+3b2+3b3).....                                | \$..... 3,223         | \$..... 2,365             | \$..... 858          |
| (c) Deferred tax liabilities (3a99 + 3b99).....                 | \$..... 3,228         | \$..... 2,376             | \$..... 852          |
| <b>4. Net deferred tax assets/liabilities (2i - 3c).....</b>    | <b>\$..... 2</b>      | <b>\$..... (1,819)</b>    | <b>\$..... 1,821</b> |
| <b>D. Among the More Significant Book to Tax Adjustments</b>    |                       |                           |                      |
|   | <b>2024</b>           | <b>Effective Tax Rate</b> |                      |
| Standard Federal Income Tax Rate.....                           | \$..... 22,171        | 21.000 %                  |                      |
| Accrued Expenses.....   | (557)                 | -0.528                    |                      |
| Discounting of Unpaid Losses.....                               |                       |                           |                      |
| Dividends Received Deduction.....                               |                       |                           |                      |
| Accrual of Discount.....  | (1,033)               | -0.978                    |                      |
| Other.....  | (1,100)               | -1.042                    |                      |
| Total statutory income taxes.....                               | <b>\$..... 19,481</b> | <b>18.452 %</b>           |                      |

**E. Operating Loss and Tax Credit Carryforwards - None**

## **Notes to the Financial Statements**

### **9. Income Taxes (Continued)**

#### F. Consolidated Federal Income Tax Return

- (1) The Company's Federal Income Tax return is consolidated with Michigan Farm Bureau Financial Corporation (parent), Farm Bureau Life Insurance Company of Michigan, Farm Bureau General Insurance Company of Michigan, Community Service Acceptance Company, FBL Real Estate Holdings LLC, Leaders Life Insurance Company, MFB, Inc., Cincinnati Equitable Companies Inc., Gravity Works Design, LLC and Cincinnati Equitable Life Insurance Company.
- (2) The consolidated federal income tax liability is allocated to each Company based on the Companies' separate return tax liabilities in accordance with Section 1552(a)(2) of the Internal Revenue Code.

#### G. Federal or Foreign Income Tax Loss Contingencies - None

#### H. Repatriation Transition Tax (RTT) - None

#### I. Alternative Minimum Tax (AMT) Credit - None

### **10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

#### A. Effective December 14, 2023, Cincinnati Equitable Insurance Company was acquired by Michigan Farm Bureau Financial Corporation.

#### B. Detail of Related Party Transactions - None

#### C. Transactions With Related Party Who Are Not Reported on Schedule Y - None

#### D. Amounts Due To or From Related Parties - None

#### E. The Management Services Agreement is effective July 18, 2024, including Cincinnati Equitable Insurance Company d/b/a Great Lakes Agribusiness Insurance Company, an Ohio insurance corporation ("GLAIC"), Farm Bureau Mutual Insurance Company of Michigan, a Michigan insurance corporation ("FB Mutual"), and MMG Insurance Company, a Maine insurance corporation ("MMG"). MMG will pay for advertising and payment of agent commissions. FB Mutual is responsible for all other expenses and functions of the business.

#### F. Guarantees or Contingencies - None

#### G. All outstanding stock of Cincinnati Equitable Insurance Company is owned by Michigan Farm Bureau Financial Corporation (see Schedule Y of this statement).

#### H. Amount Deducted for Investment in Upstream Company - None

#### I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets - None

#### J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - None

#### K. Foreign Subsidiary Value Using CARVM - None

#### L. Downstream Holding Company Value Using Look-Through Method - None

#### M. All SCA Investments - None

#### N. Investment in Insurance SCAs - None

#### O. SCA and SSAP No. 48 Entity Loss Tracking - None

### **11. Debt - None**

### **12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**

#### A. Defined Benefit Plan - None

#### B. Investment Policies and Strategies of Plan Assets - None

#### C. Fair Value of Each Class of Plan Assets - None

#### D. Expected Long-Term Rate of Return for the Plan Assets - None

#### E. Defined Contribution Plans - None

#### F. Multiemployer Plans - None

#### G. Consolidated/Holding Company Plans

The Company participates in a qualified, noncontributory defined contribution (401(k)) plan sponsored by Michigan Farm Bureau, our ultimate parent company. The Company provides no other postretirement benefits to retired employees through a plan sponsored by Michigan Farm Bureau. The Company has no legal obligation for benefits under these plans. Michigan Farm Bureau allocates amounts to the Company based on the Company's employee participation in the plan. The Company's share of net expense for the qualified pension plan was \$0 and \$0 for 2024 and 2023 respectively and for other postretirement benefit plans was \$0 and \$0 for 2024 and 2023 respectively.

#### H. Postemployment Benefits and Compensated Absences

The Company does not provide for post-retirement benefits.

#### I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - None

### **13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**

#### A. The Company has 1,000,000 shares authorized, 1,000,000 shares issued and 1,000,000 shares outstanding.

#### B. Dividend Rate of Preferred Stock - None

#### C. Without the approval of the domiciliary commissioner, dividends to the shareholders are limited by the laws of the Company's state of incorporation, Ohio, to \$0, an amount that is based on restrictions related to statutory surplus.

#### D. Ordinary Dividends - None

## Notes to the Financial Statements

### 13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations (Continued)

- E. Within the limits of (C) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
- F. There are no restrictions placed on the Company's surplus, including for whom the surplus is being held, other than the minimum surplus requirements of the state of Ohio.
- G. Surplus Advances - None
- H. Stock Held for Special Purposes - None
- I. Changes in Special Surplus Funds - None
- J. Unassigned Funds (Surplus)
 

The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is (\$48,629).
- K. Company-Issued Surplus Debentures or Similar Obligations - None
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations - None
- M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years - None

### 14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments - None
- B. Assessments
  - (1) The Company has established a liability of \$0 for future Guarantee Fund Assessments.
  - (2) Assets (Liabilities) recognized from paid and accrued premium tax offsets and policy surcharges - None
  - (3) Guaranty fund liabilities and assets related to long-term care insolvencies - None
- C. Gain Contingencies - None
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits - None
- E. Product Warranties - None
- F. Joint and Several Liabilities - None
- G. All Other Contingencies - None

### 15. Leases

- A. Lessee Operating Lease
 

The Company has no material lease obligations.

  - (1) Leasing arrangements
    - (a) Rental expense for 2024, and 2023 were approximately \$0 and \$0.
    - (b) Rental payment contingencies - None
    - (c) Terms of renewal or purchase options and escalation clauses - None
    - (d) Restrictions imposed by lease agreements - None
    - (e) Early termination of lease agreements - None
  - (2) For leases having initial or remaining noncancelable lease terms in excess of one year - None
  - (3) For sale-leaseback transactions - None
- B. Lessor Leases - None

### 16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - None

### 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - None

### 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - None

### 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - None

### 20. Fair Value Measurements

- A. Fair Value Measurement

- (1) Fair value at reporting date

| Description for each class of asset or liability | Level 1    | Level 2    | Level 3 | Net Asset Value (NAV) | Total           |
|--|------------|------------|---------|-----------------------|-----------------|
| a. Assets at fair value                          |            |            |         |                       |                 |
| Bonds - Industrial and Miscellaneous             | \$.....    | \$.....    | 305,718 | \$.....               | \$..... 305,718 |
| Cash Equivalents                                 | 132,048    |            |         |                       | 132,048         |
| Total assets at fair value/NAV                   | \$ 132,048 | \$ 305,718 | \$..... | \$.....               | \$ 437,766      |
| b. Liabilities at fair value                     |            |            |         |                       |                 |
| Total liabilities at fair value                  | \$.....    | \$.....    | \$..... | \$.....               | \$.....         |

## Notes to the Financial Statements

### 20. Fair Value Measurements (Continued)

- (2) Fair value measurements in Level 3 of the fair value hierarchy - None
- (3) Policy on transfers into and out of Level 3 - None
- (4) Inputs and techniques used for Level 2 and Level 3 fair values - None
- (5) Derivatives - None

B. Other Fair Value Disclosures - None

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

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets   | Level 1 | Level 2           | Level 3 | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
|------------------------------|----------------------|-------------------|---------|-------------------|---------|-----------------------|----------------------------------|
| Bonds.....                   | \$..... 2,646,535    | \$..... 2,883,988 | \$..... | \$..... 2,646,535 | \$..... | \$.....               | \$.....                          |
| Cash Equivalents.....        | 132,048              | 132,048           | 132,048 | 132,048           | 132,048 | 132,048               | 132,048                          |

D. Not Practicable to Estimate Fair Value - None

E. Nature and Risk of Investments Reported at NAV - None

### 21. Other Items - None

### 22. Events Subsequent - None

### 23. Reinsurance

Effective July 1st, 2024 Cincinnati Equitable Insurance Company entered in to a Quota Share reinsurance contract with affiliate Farm Bureau Mutual Insurance Company of Michigan (FBI) and Maine Mutual Group (MMG). FBI participation is 90.1% and MMG is 9.9%.

- A. Unsecured Reinsurance Recoverables - None
- B. Reinsurance Recoverable in Dispute - None
- C. Reinsurance Assumed and Ceded

(1) Maximum amount of return commission that would have been due reinsurers if all of the company's reinsurance was canceled or if the company's insurance assumed was canceled

|   | Assumed Reinsurance |                   | Ceded Reinsurance |                   | Net              |                   |
|---|---------------------|-------------------|-------------------|-------------------|------------------|-------------------|
|   | Premium Reserve     | Commission Equity | Premium Reserve   | Commission Equity | Premium Reserve  | Commission Equity |
| a. Affiliates.....                      | \$.....             | \$.....           | \$..... 14,683    | \$..... 15,549    | \$..... (14,683) | \$..... (15,549)  |
| b. All other.....                       |                     |                   | 56                | 142               | (56)             | (142)             |
| c. Total (a+b).....                     | \$.....             | \$.....           | \$..... 14,739    | \$..... 15,691    | \$..... (14,739) | \$..... (15,691)  |
| d. Direct unearned premium reserve..... |                     |                   | \$..... 14,739    |                   |                  |                   |

(2) The additional or return commission, predicated on loss experience or on any other form of profit-sharing arrangements in this statement as a result of existing contractual arrangements is accrued as follows:

| <u>Reinsurance</u>                           | Direct  | Assumed | Ceded   | Net     |
|--|---------|---------|---------|---------|
| a. Contingent commission.....                | \$..... | \$..... | \$..... | \$..... |
| b. Sliding scale adjustments.....            |         |         |         |         |
| c. Other profit commission arrangements..... |         |         |         |         |
| d. Total (a+b+c).....                        | \$..... | \$..... | \$..... | \$..... |

(3) Risks attributed to each of the company's protected cells

| Protected Cell Name | Covered Exposure | Ultimate Exposure Amount | Fair Value of Assets as of December 31, 2024 | Initial Contact Date of Securitization Instrument | Maturity Date of Securitized Instrument |
|---------------------|------------------|--------------------------|--|---|---|
| Total.....          |                  | \$.....                  | \$.....                                      |   |   |

- D. Uncollectible Reinsurance - None
- E. Commutation of Ceded Reinsurance - None
- F. Retroactive Reinsurance - None
- G. Reinsurance Accounted for as a Deposit - None
- H. Disclosures for the Transfer of Property and Casualty Run-Off Agreements - None
- I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - None
- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation - None
- K. Reinsurance Credit - None

### 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

The Company has no retrospectively rated contracts or contracts subject to redetermination.

- A. Method Used to Estimate - None

## **Notes to the Financial Statements**

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)**

- B. Method Used to Record - None
- C. Amount and Percent of Net Retrospective Premiums - None
- D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - None
- E. Calculation of Nonadmitted Retrospective Premium - None
- F. Risk-Sharing Provisions of the Affordable Care Act (ACA)

The Company does not write health insurance.

- (1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions - None
- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year - None
- (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 - None

**25. Changes in Incurred Losses and Loss Adjustment Expenses - None**

**26. Intercompany Pooling Arrangements - None**

**27. Structured Settlements - None**

**28. Health Care Receivables - None**

**29. Participating Policies - None**

**30. Premium Deficiency Reserves**

As of December 31, 2024 the Company had liabilities of \$0 related to premium deficiency reserves. The Company does not consider anticipated investment income when calculating its premium deficiency reserves.

|  |                 |
|--|-----------------|
| 1. Liability carried for premium deficiency reserves:.....             | \$ .....        |
| 2. Date of the most recent evaluation of this liability:.....          | 12/31/2024..... |
| 3. Was anticipated investment income utilized in the calculation?..... | NO.....         |

**31. High Deductibles - None**

**32. Discounting of Liabilities For Unpaid Losses or Unpaid Loss Adjustment Expenses - None**

**33. Asbestos/Environmental Reserves - None**

**34. Subscriber Savings Accounts - None**

**35. Multiple Peril Crop Insurance - None**

**36. Financial Guaranty Insurance - None**

**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 .....  
If yes, complete Schedule Y, Parts 1, 1A, 2, and 3.

1.2. If yes, did the reporting entity register and file with its domiciliary State 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 .....

1.3. State Regulating? ..... Michigan .....

1.4. Is the reporting entity publicly traded or a member of a publicly traded group? ..... NO .....

1.5. If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....

2.1. Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... NO .....

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. .... 12/31/2020 .....

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. .... 12/31/2020 .....

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). .... 04/05/2022 .....

3.4. By what department or departments?  
Ohio Department of Insurance and Michigan Department of Insurance and Financial Services

3.5. Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... N/A .....

3.6. Have all of the recommendations within the latest financial examination report been complied with? ..... YES .....

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 .....

4.12. renewals? ..... NO .....

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? ..... NO .....

4.22. renewals? ..... NO .....

5.1. Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... NO .....

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.

| 1              | 2                 | 3                 |
|----------------|-------------------|-------------------|
| Name of Entity | NAIC Company Code | 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? ..... NO .....

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? ..... NO .....

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, government, manager or attorney-in-fact).

| 1           | 2              |
|-------------|----------------|
| Nationality | Type of Entity |
| .....       | .....          |

8.1. Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? ..... NO .....

8.2. If 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? ..... NO .....

8.4. If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 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.

**GENERAL INTERROGATORIES**

## PART 1 - COMMON INTERROGATORIES

| 1<br>Affiliate Name | 2<br>Location (City, State) | 3<br>FRB | 4<br>OCC | 5<br>FDIC | 6<br>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 depository institution holding company?.....NO.....

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?.....NO.....

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

FORVIS 111 EAST WAYNE STREET, SUITE 600; FORT WAYNE, IN 46802

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?.....NO.....

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.....

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

WAIVER FROM FILING AN ACTUARIAL OPINION

10.5. Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?.....YES.....

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?

WAIVED

12.1. Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?.....NO.....  
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?.....NO.....

13.3. Have there been any changes made to any of the trust indentures during the year?.....NO.....

13.4. If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?.....

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.....

- 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?.....NO.....

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

14.3. Have any provisions of the code of ethics been waived for any of the specified officers?.....NO.....

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

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?.....NO.....

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.

## GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

| 1   | 2                               | 3  | 4      |
|---|---------------------------------|--|--------|
| American<br>Bankers<br>Association<br>(ABA) Routing<br>Number | Issuing or Confirming Bank Name | Circumstances That Can Trigger the Letter of<br>Credit | 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.....

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... YES.....

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 or is likely to conflict with the official duties of such person? ..... YES.....

### FINANCIAL

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

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? ..... NO.....

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? ..... NO.....

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.....

23.2. If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ ..... 1,705 .....

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? ..... NO.....

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.

| 1                   | 2   |
|---------------------|---|
| Name of Third-Party | Is the Third-Party<br>Agent a Related<br>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.....

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? ..... N/A .....

25.07. Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... N/A .....

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? ..... N/A .....

## GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

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 .....

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 ..... \$ ..... 1,486,715 .....

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                     | 2           | 3        |
|-----------------------|-------------|----------|
| Nature of Restriction | Description | Amount   |
| .....                 | .....       | \$ ..... |

27.1. Does the reporting entity have any hedging transactions reported on Schedule DB?..... NO .....

27.2. If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement..... N/A .....

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?..... NO .....

27.4. If the response to 27.3 is YES, does the reporting entity utilize:  
 27.41 Special accounting provision of SSAP No. 108 .....  
 27.42 Permitted accounting practice .....  
 27.43 Other accounting guidance .....

27.5. By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:  
 • The reporting entity has obtained explicit approval from the domiciliary state.  
 • Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.  
 • Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.  
 • Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

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?..... NO .....

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 .....

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

| 1                     | 2  |
|-----------------------|--|
| Name of Custodian(s)  | Custodian's Address                                  |
| COMERICA BANK.....    | 411 W. LAFAYETTE, DETROIT, MI 48226.....             |
| FIFTH THIRD BANK..... | 38 FOUNTAIN SQUARE PLAZA; CINCINNATI, OH 45263 ..... |

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

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

29.03. Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... NO .....

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

**GENERAL INTERROGATORIES**

## PART 1 - COMMON INTERROGATORIES

| 1<br>Old Custodian | 2<br>New Custodian | 3<br>Date of Change | 4<br>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. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. [“...that have access to the investment accounts”; “...handle securities”]

| 1<br>Name of Firm or Individual | 2<br>Affiliation |
|---------------------------------|------------------|
| TRAVIS M. LOWER.....            | I.....           |

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

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)])?..... NO.....

30.2. If yes, complete the following schedule:

| 1<br>CUSIP #  | 2<br>Name of Mutual Fund | 3<br>Book/Adjusted Carrying Value |
|---------------|--------------------------|-----------------------------------|
| 30.2999 TOTAL |                          | \$.....                           |

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

| 1<br>Name of Mutual Fund (from above table) | 2<br>Name of Significant Holding of the Mutual Fund | 3<br>Amount of Mutual Fund’s Book / Adjusted Carrying Value Attributable to the Holding | 4<br>Date of Valuation |
|---|---|---|------------------------|
|---|---|---|------------------------|

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

|                             | 1<br>Statement (Admitted) Value | 2<br>Fair Value   | 3<br>Excess of Statement over Fair Value (-), or Fair Value over Statement (+) |
|-----------------------------|---------------------------------|-------------------|--|
| 31.1. Bonds.....            | \$..... 2,883,988               | \$..... 2,646,535 | \$..... (237,453)  |
| 31.2. Preferred Stocks..... |                                 |                   |  |
| 31.3. Totals.....           | \$..... 2,883,988               | \$..... 2,646,535 | \$..... (237,453)  |

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

FAIR VALUE COMES FROM A SERVICE USED BY CLEARWATER ANALYTICS

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.....

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.....

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.....

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?..... NO.....

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:.....

- a. The security was either:
  - i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or

**GENERAL INTERROGATORIES**

## PART 1 - COMMON INTERROGATORIES

- ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
- b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
- c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
- d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? ..... NO .....

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? ..... NO .....

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? ..... N/A .....

38.1. Does the reporting entity directly hold cryptocurrencies? ..... NO .....

38.2. If the response to 38.1 is yes, on what schedule are they reported? .....

39.1. Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? ..... NO .....

39.2. If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly .....

39.22 Immediately converted to U.S. dollars .....

39.3. If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

| 1                      | 2  | 3                                |
|------------------------|--|----------------------------------|
| Name of Cryptocurrency | Immediately Converted to USD, Directly Held, or Both | Accepted for Payment of Premiums |
|                        |  |                                  |

**OTHER**

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

40.2. 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    | 2           |
|------|-------------|
| Name | Amount Paid |
|      |             |

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

41.2. 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              | 2           |
|----------------|-------------|
| Name           | Amount Paid |
| CT CORPORATION | \$          |

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

42.2. 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    | 2           |
|------|-------------|
| Name | Amount Paid |
|      |             |

**GENERAL INTERROGATORIES**  
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1. Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... NO

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. .... \$

1.6. Individual policies:

Most current three years:

1.61. Total premium earned. .... \$

1.62. Total incurred claims. .... \$

1.63. Number of covered lives. ....

All years prior to most current three years:

1.64. Total premium earned. .... \$

1.65. Total incurred claims. .... \$

1.66. Number of covered lives. ....

1.7. Group policies:

Most current three years:

1.71. Total premium earned. .... \$

1.72. Total incurred claims. .... \$

1.73. Number of covered lives. ....

All years prior to most current three years:

1.74. Total premium earned. .... \$

1.75. Total incurred claims. .... \$

1.76. Number of covered lives. ....

## 2. Health Test:

|                                    | Current Year | Prior Year |
|------------------------------------|--------------|------------|
| 2.1. Premium Numerator.....        | \$.....      | \$.....    |
| 2.2. Premium Denominator.....      | \$.....      | - \$.....  |
| 2.3. Premium Ratio (2.1/2.2) ..... | %.....       | %.....     |
| 2.4. Reserve Numerator.....        | \$.....      | \$.....    |
| 2.5. Reserve Denominator.....      | \$.....      | \$.....    |
| 2.6. Reserve Ratio (2.4/2.5).....  | %.....       | %.....     |

3.1. Did the reporting entity issue participating policies during the calendar year? ..... NO

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? ..... NO

4.2. Does the reporting entity issue non-assessable policies? ..... 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? ..... NO

5.2. If yes, is the commission paid:

5.21. Out of Attorney's-in-fact compensation. .... N/A

5.22. As a direct expense of the exchange. .... 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? ..... NO

5.5. If yes, give full information

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?

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:

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?

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? ..... 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 uninsured catastrophic loss

Company started writing business September 1, 2024 and has a small number of policies. Aggregate catastrophe exposure is limited. Company has underlying reinsurance programs to limit exposure for a single loss.

**GENERAL INTERROGATORIES**

## PART 2 - PROPERTY &amp; CASUALTY INTERROGATORIES

7.1. Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?..... 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)?..... 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?..... 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 noncancellable by the reporting entity during the contract term
- (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
- (c) Aggregate stop loss reinsurance coverage;
- (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
- (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
- (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity..... 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..... 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?..... 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..... NO.....
- (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..... NO.....
- (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..... NO.....

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?..... N/A.....

11.1. Has the reporting entity guaranteed policies issued by any other entity and now in force:..... NO.....

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 that 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?..... N/A.....

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..... %.....

**GENERAL INTERROGATORIES**

## PART 2 - PROPERTY &amp; CASUALTY INTERROGATORIES

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? ..... NO

12.6. If yes, state the amount thereof at December 31 of 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): ..... \$ ..... 1,750,000

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

13.3. State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. ..... 1

14.1. Is the reporting entity a cedant in a multiple cedant reinsurance contract? ..... YES

14.2. If yes, please describe the method of allocating and recording reinsurance among the cedants:  
 EACH CEDANT'S REINSURANCE IS CALCULATED INDEPENDENTLY

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

14.4. If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? ..... NO

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

15.1. Has the reporting entity guaranteed any financed premium accounts? ..... NO

15.2. If yes, give full information

16.1. Does the reporting entity write any warranty business? ..... NO  
 If yes, disclose the following information for each of the following types of warranty coverage:

|                   | 1<br>Direct Losses<br>Incurred | 2<br>Direct Losses<br>Unpaid | 3<br>Direct Written<br>Premium | 4<br>Direct Premium<br>Unearned | 5<br>Direct Premium<br>Earned |
|-------------------|--------------------------------|------------------------------|--------------------------------|---------------------------------|-------------------------------|
| 16.11. Home       | \$ .....                       | \$ .....                     | \$ .....                       | \$ .....                        | \$ .....                      |
| 16.12. Products   | \$ .....                       | \$ .....                     | \$ .....                       | \$ .....                        | \$ .....                      |
| 16.13. Automobile | \$ .....                       | \$ .....                     | \$ .....                       | \$ .....                        | \$ .....                      |
| 16.14. Other*     | \$ .....                       | \$ .....                     | \$ .....                       | \$ .....                        | \$ .....                      |

\* Disclose type of coverage:

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? ..... NO  
 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? ..... NO

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? ..... NO

18.4. If yes, please provide the balance of the 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

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

**FIVE-YEAR HISTORICAL DATA**

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

|  | 1<br>2024 | 2<br>2023 | 3<br>2022 | 4<br>2021 | 5<br>2020 |
|--|-----------|-----------|-----------|-----------|-----------|
| <b>Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 &amp; 3)</b>  |           |           |           |           |           |
| 1. Liability lines (Lines 11, 16, 17, 18 & 19).....  |           |           |           |           |           |
| 2. Property lines (Lines 1, 2, 9, 12, 21 & 26).....  | 34        |           |           |           |           |
| 3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....  | 19,008    |           |           |           |           |
| 4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....   |           |           |           |           |           |
| 5. Nonproportional reinsurance lines (Lines 31, 32 & 33).....  |           |           |           |           |           |
| 6. Total (Line 35).....  | 19,042    |           |           |           |           |
| <b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>  |           |           |           |           |           |
| 7. Liability lines (Lines 11, 16, 17, 18 & 19).....  |           |           |           |           |           |
| 8. Property lines (Lines 1, 2, 9, 12, 21 & 26).....  | —         |           |           |           |           |
| 9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....  | —         |           |           |           |           |
| 10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....  |           |           |           |           |           |
| 11. Nonproportional reinsurance lines (Lines 31, 32 & 33).....   |           |           |           |           |           |
| 12. Total (Line 35).....   | —         |           |           |           |           |
| <b>Statement of Income (Page 4)</b>  |           |           |           |           |           |
| 13. Net underwriting gain (loss) (Line 8).....   | (13,809)  | (29,309)  | (20,802)  | (24,097)  | (28,165)  |
| 14. Net investment gain (loss) (Line 11).....  | 116,793   | 123,717   | 109,532   | 115,003   | 139,736   |
| 15. Total other income (Line 15).....  | 2,592     |           |           |           |           |
| 16. Dividends to policyholders (Line 17).....  |           |           |           |           |           |
| 17. Federal and foreign income taxes incurred (Line 19).....   | 19,404    | 18,511    | 15,483    | 18,971    | 14,363    |
| 18. Net income (Line 20).....  | 86,172    | 75,897    | 73,247    | 71,935    | 97,208    |
| <b>Balance Sheet Lines (Pages 2 and 3)</b>   |           |           |           |           |           |
| 19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....   | 3,124,250 | 3,047,520 | 3,443,803 | 3,395,305 | 3,317,708 |
| 20. Premiums and considerations (Page 2, Col. 3)   |           |           |           |           |           |
| 20.1. In course of collection (Line 15.1).....   | 5,973     |           |           |           |           |
| 20.2. Deferred and not yet due (Line 15.2).....  |           |           |           |           |           |
| 20.3. Accrued retrospective premiums (Line 15.3).....  | 7,011     |           |           |           |           |
| 21. Total liabilities excluding protected cell business (Page 3, Line 26).....   | 54,727    | 24,799    | 19,955    | 33,469    | 29,103    |
| 22. Losses (Page 3, Line 1).....   |           |           |           | 10,000    | 10,000    |
| 23. Loss adjustment expenses (Page 3, Line 3).....   |           |           |           | 3,509     | 3,509     |
| 24. Unearned premiums (Page 3, Line 9).....  |           |           |           |           |           |
| 25. Capital paid up (Page 3, Lines 30 & 31).....   | 1,000,000 | 1,000,000 | 1,000,000 | 1,000,000 | 1,000,000 |
| 26. Surplus as regards policyholders (Page 3, Line 37).....  | 3,069,523 | 3,022,722 | 3,423,848 | 3,361,836 | 3,288,605 |
| <b>Cash Flow (Page 5)</b>  |           |           |           |           |           |
| 27. Net cash from operations (Line 11).....  | 90,387    | 81,390    | 66,665    | 94,925    | 42,447    |
| <b>Risk-Based Capital Analysis</b>   |           |           |           |           |           |
| 28. Total adjusted capital.....  | 3,069,521 | 3,022,722 | 3,423,848 | 3,361,836 | 3,288,605 |
| 29. Authorized control level risk-based capital.....   | 123,768   | 99,856    | 102,883   | 123,750   | 46,060    |
| <b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0</b>                          |           |           |           |           |           |
| 30. Bonds (Line 1).....  | 94.0      | 98.4      | 96.4      | 98.5      | 95.7      |
| 31. Stocks (Lines 2.1 & 2.2).....  |           |           |           |           |           |
| 32. Mortgage loans on real estate (Lines 3.1 and 3.2).....   |           |           |           |           |           |
| 33. Real estate (Lines 4.1, 4.2 & 4.3).....  |           |           |           |           |           |
| 34. Cash, cash equivalents and short-term investments (Line 5).....  | 6.0       | 1.6       | 3.6       | 1.5       | 4.3       |
| 35. Contract loans (Line 6).....   |           |           |           |           |           |
| 36. Derivatives (Line 7).....  |           |           |           |           |           |
| 37. Other invested assets (Line 8).....  |           |           |           |           |           |
| 38. Receivables for securities (Line 9).....   |           |           |           |           |           |
| 39. Securities lending reinvested collateral assets (Line 10).....   |           |           |           |           |           |
| 40. Aggregate write-ins for invested assets (Line 11).....   |           |           |           |           |           |
| 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, (Sch. D, Summary, Line 12, Col. 1).....  |           |           |           |           |           |
| 43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....  |           |           |           |           |           |
| 44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....   |           |           |           |           |           |
| 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.....   |           |           |           |           |           |
| 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)..... |           |           |           |           |           |

**FIVE-YEAR HISTORICAL DATA**

(Continued)

|   | 1<br>2024 | 2<br>2023 | 3<br>2022 | 4<br>2021 | 5<br>2020 |
|---|-----------|-----------|-----------|-----------|-----------|
| <b>Capital and Surplus Accounts (Page 4)</b>  |           |           |           |           |           |
| 51. Net unrealized capital gains (losses) (Line 24).....  | (32,541)  | 3,783     | (9,658)   | 675       | (36,810)  |
| 52. Dividends to stockholders (Line 35).....  |           | (479,403) |           |           |           |
| 53. Change in surplus as regards policyholders for the year (Line 38).....  | 46,802    | (401,126) | 62,012    | 73,232    | 41,629    |
| <b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>  |           |           |           |           |           |
| 54. Liability lines (Lines 11, 16, 17, 18 & 19).....  |           | (75)      | 9,288     | (293)     | (789)     |
| 55. Property lines (Lines 1, 2, 9, 12, 21 & 26).....  |           |           |           |           |           |
| 56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....  |           |           | (158)     | (789)     | (1,274)   |
| 57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....   |           |           |           |           |           |
| 58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....  |           |           |           |           |           |
| 59. Total (Line 35).....  |           | (75)      | 9,130     | (1,082)   | (2,063)   |
| <b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>   |           |           |           |           |           |
| 60. Liability lines (Lines 11, 16, 17, 18 & 19).....  |           | (75)      | 9,288     | (293)     | (789)     |
| 61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....  |           |           |           |           |           |
| 62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....  |           |           | (158)     | (789)     | (1,274)   |
| 63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....   |           |           |           |           |           |
| 64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....  |           |           |           |           |           |
| 65. Total (Line 35).....  |           | (75)      | 9,130     | (1,082)   | (2,063)   |
| <b>Operating Percentages (Page 4)</b>   |           |           |           |           |           |
| <b>(Item divided by Page 4, Line 1) x 100.0</b>   |           |           |           |           |           |
| 66. Premiums earned (Line 1).....   |           |           |           | 100.0     | 100.0     |
| 67. Losses incurred (Line 2).....   |           |           |           |           |           |
| 68. Loss expenses incurred (Line 3).....  |           |           |           |           |           |
| 69. Other underwriting expenses incurred (Line 4).....  |           |           |           |           |           |
| 70. Net underwriting gain (loss) (Line 8).....  |           |           |           |           |           |
| <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).....   |           |           |           |           |           |
| 72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2+3 divided by Page 4, Line 1 x 100.0).....   |           |           |           |           |           |
| 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).....   | —         |           |           |           |           |
| <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).....  | —         | —         | (3)       | (1)       | (2)       |
| 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).....                 | —         | —         | (0.1)     | —         | (0.1)     |
| <b>Two-Year Loss Development (\$000 omitted)</b>  |           |           |           |           |           |
| 76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12).....                           | —         | (3)       | (4)       | (3)       | (9)       |
| 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)..... | —         | (0.1)     | (0.1)     | (0.1)     | (0.3)     |

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*?

If no, please explain:

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

(\$000 OMITTED)

| Years in Which Premiums Were Earned and Losses Were Incurred | Premiums Earned         |            |                      | Loss and Loss Expense Payments |            |                                       |            |                              |            |  |  | 12<br>Number of Claims Reported Direct and Assumed |  |
|--|-------------------------|------------|----------------------|--------------------------------|------------|---------------------------------------|------------|------------------------------|------------|--|--|--|--|
|  | 1<br>Direct and Assumed | 2<br>Ceded | 3<br>Net (Cols. 1-2) | Loss Payments                  |            | Defense and Cost Containment Payments |            | Adjusting and Other Payments |            | 10<br>Salvage and Subrogation Received | 11<br>Total Net Paid (Cols. 4-5+6-7+8-9) |  |  |
|  |                         |            |                      | 4<br>Direct and Assumed        | 5<br>Ceded | 6<br>Direct and Assumed               | 7<br>Ceded | 8<br>Direct and Assumed      | 9<br>Ceded |  |  |  |  |
| 1. Prior   | XXX                     | XXX        | XXX                  |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 2. 2015  |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 3. 2016  |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 4. 2017  |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 5. 2018  |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 6. 2019  |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 7. 2020  |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 8. 2021  |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 9. 2022  |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 10. 2023   |                         |            |                      |                                |            |                                       |            |                              |            |  |  | XXX  |  |
| 11. 2024   | 19,042                  | 19,042     | –                    |                                |            |                                       |            | 618                          | 618        |  |  | –  |  |
| 12. Totals   | XXX                     | XXX        | XXX                  |                                |            |                                       |            | 618                          | 618        |  |  | –  |  |

| Years in Which Premiums Were Earned and Losses Were Incurred | Losses Unpaid            |             |                          |             | Defense and Cost Containment Unpaid |             |                          |             | Adjusting and Other Unpaid |       | 23<br>Salvage and Subrogation Anticipated | 24<br>Total Net Losses and Expenses Unpaid | 25<br>Number of Claims Outstanding Direct and Assumed |
|--|--------------------------|-------------|--------------------------|-------------|-------------------------------------|-------------|--------------------------|-------------|----------------------------|-------|---|--|---|
|  | Case Basis               |             | Bulk + IBNR              |             | Case Basis                          |             | Bulk + IBNR              |             | 21                         | 22    |   |  |   |
|  | 13<br>Direct and Assumed | 14<br>Ceded | 15<br>Direct and Assumed | 16<br>Ceded | 17<br>Direct and Assumed            | 18<br>Ceded | 19<br>Direct and Assumed | 20<br>Ceded | Direct and Assumed         | Ceded |   |  |   |
| 1. Prior   |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 2. 2015  |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 3. 2016  |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 4. 2017  |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 5. 2018  |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 6. 2019  |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 7. 2020  |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 8. 2021  |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 9. 2022  |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 10. 2023   |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 11. 2024   |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |
| 12. Totals   |                          |             |                          |             |                                     |             |                          |             |                            |       |   |  |   |

| Years in Which Premiums Were Earned and Losses Were Incurred | Total Losses and Loss Expenses Incurred |             |           | Loss and Loss Expense Percentage (Incurred/Premiums Earned) |             |           |            | Nontabular Discount |                     | 34<br>Inter-Company Pooling Participation Percentage | Net Balance Sheet Reserves After Discount |  |
|--|---|-------------|-----------|---|-------------|-----------|------------|---------------------|---------------------|--|---|--|
|  | 26<br>Direct and Assumed                | 27<br>Ceded | 28<br>Net | 29<br>Direct and Assumed                                    | 30<br>Ceded | 31<br>Net | 32<br>Loss | 33<br>Loss Expense  | 35<br>Losses Unpaid | 36<br>Loss Expenses Unpaid                           |   |  |
|  | Direct and Assumed                      | Ceded       | Net       | Direct and Assumed  | Ceded       | Net       | Loss       | Loss Expense        | Losses Unpaid       | Loss Expenses Unpaid                                 |   |  |
| 1. Prior   | XXX                                     | XXX         | XXX       | XXX   | XXX         | XXX       |            |                     | XXX                 |  |   |  |
| 2. 2015  |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 3. 2016  |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 4. 2017  |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 5. 2018  |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 6. 2019  |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 7. 2020  |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 8. 2021  |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 9. 2022  |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 10. 2023   |   |             |           | –   | –           | –         |            |                     |                     |  |   |  |
| 11. 2024   | 618                                     | 618         | –         | 3,246   | 3,246       | –         |            |                     | XXX                 |  |   |  |
| 12. Totals   | XXX                                     | XXX         | XXX       | XXX   | XXX         | XXX       |            |                     | XXX                 |  |   |  |

**SCHEDULE P - PART 2 - SUMMARY**

| Years in Which Losses Were Incurred | INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED) |           |           |           |           |           |           |           |           |            | DEVELOPMENT    |                |
|-------------------------------------|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|----------------|----------------|
|                                     | 1<br>2015  | 2<br>2016 | 3<br>2017 | 4<br>2018 | 5<br>2019 | 6<br>2020 | 7<br>2021 | 8<br>2022 | 9<br>2023 | 10<br>2024 | 11<br>One Year | 12<br>Two Year |
| 1. Prior.....                       | 10   | 3         | 4         | -         | (7)       | (9)       | (10)      | (13)      | (13)      | (13)       | -              | -              |
| 2. 2015.....                        |  |           |           |           |           |           |           |           |           |            |                |                |
| 3. 2016.....                        | XXX  |           |           |           |           |           |           |           |           |            |                |                |
| 4. 2017.....                        | XXX  | XXX       |           |           |           |           |           |           |           |            |                |                |
| 5. 2018.....                        | XXX  | XXX       | XXX       |           |           |           |           |           |           |            |                |                |
| 6. 2019.....                        | XXX  | XXX       | XXX       | XXX       |           |           |           |           |           |            |                |                |
| 7. 2020.....                        | XXX  | XXX       | XXX       | XXX       | XXX       |           |           |           |           |            |                |                |
| 8. 2021.....                        | XXX  | XXX       | XXX       | XXX       | XXX       | XXX       |           |           |           |            |                |                |
| 9. 2022.....                        | XXX  | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       |           |           |            |                |                |
| 10. 2023.....                       | XXX  | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       |           |            | XXX            |                |
| 11. 2024.....                       | XXX  | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | -          | XXX            | XXX            |
| 12. Totals.....                     | XXX  | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX        | -              | -              |

**SCHEDULE P - PART 3 - SUMMARY**

| Years in Which Losses Were Incurred | CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED) |           |           |           |           |           |           |           |           |            | 11<br>Number of Claims Closed With Loss Payment | 12<br>Number of Claims Closed Without Loss Payment |
|-------------------------------------|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|---|--|
|                                     | 1<br>2015   | 2<br>2016 | 3<br>2017 | 4<br>2018 | 5<br>2019 | 6<br>2020 | 7<br>2021 | 8<br>2022 | 9<br>2023 | 10<br>2024 |   |  |
| 1. Prior.....                       | XXX   | (7)       | (10)      | (13)      | (20)      | (22)      | (23)      | (13)      | (13)      | (13)       | XXX   | XXX  |
| 2. 2015.....                        |   |           |           |           |           |           |           |           |           |            | XXX   | XXX  |
| 3. 2016.....                        | XXX   |           |           |           |           |           |           |           |           |            | XXX   | XXX  |
| 4. 2017.....                        | XXX   | XXX       |           |           |           |           |           |           |           |            | XXX   | XXX  |
| 5. 2018.....                        | XXX   | XXX       | XXX       |           |           |           |           |           |           |            | XXX   | XXX  |
| 6. 2019.....                        | XXX   | XXX       | XXX       | XXX       |           |           |           |           |           |            | XXX   | XXX  |
| 7. 2020.....                        | XXX   | XXX       | XXX       | XXX       | XXX       |           |           |           |           |            | XXX   | XXX  |
| 8. 2021.....                        | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       |           |           |           |            | XXX   | XXX  |
| 9. 2022.....                        | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       |           |           |            | XXX   | XXX  |
| 10. 2023.....                       | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       |           |            | XXX   | XXX  |
| 11. 2024.....                       | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | -          | XXX   | XXX  |

**SCHEDULE P - PART 4 - SUMMARY**

| Years in Which Losses Were Incurred | BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR-END (\$000 OMITTED) |           |           |           |           |           |           |           |           |            | 11<br>Number of Claims Closed With Loss Payment | 12<br>Number of Claims Closed Without Loss Payment |  |
|-------------------------------------|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|------------|---|--|--|
|                                     | 1<br>2015   | 2<br>2016 | 3<br>2017 | 4<br>2018 | 5<br>2019 | 6<br>2020 | 7<br>2021 | 8<br>2022 | 9<br>2023 | 10<br>2024 |   |  |  |
| 1. Prior.....                       |   |           |           |           |           |           |           |           |           |            |   |  |  |
| 2. 2015.....                        |   |           |           |           |           |           |           |           |           |            |   |  |  |
| 3. 2016.....                        | XXX   |           |           |           |           |           |           |           |           |            |   |  |  |
| 4. 2017.....                        | XXX   | XXX       | XXX       |           |           |           |           |           |           |            |   |  |  |
| 5. 2018.....                        | XXX   | XXX       | XXX       | XXX       |           |           |           |           |           |            |   |  |  |
| 6. 2019.....                        | XXX   | XXX       | XXX       | XXX       | XXX       |           |           |           |           |            |   |  |  |
| 7. 2020.....                        | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       |           |           |           |            |   |  |  |
| 8. 2021.....                        | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       |           |           |            |   |  |  |
| 9. 2022.....                        | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       |           |            |   |  |  |
| 10. 2023.....                       | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       |            |   |  |  |
| 11. 2024.....                       | XXX   | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX       | XXX        |   |  |  |

**NONE**

## SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States And Territories

| States, Etc.                 | 1<br>Active Status<br>(a)   | Gross Premiums, Including<br>Policy and Membership Fees<br>Less Return Premiums and<br>Premiums on Policies Not<br>Taken |                                   | 4<br>Dividends Paid or<br>Credited to<br>Policyholders on<br>Direct Business | 5<br>Direct Losses Paid<br>(Deducting<br>Salvage) | 6<br>Direct Losses<br>Incurred | 7<br>Direct Losses<br>Unpaid | 8<br>Finance and<br>Service Charges<br>Not Included in<br>Premiums | 9<br>Direct Premium<br>Written for Federal<br>Purchasing<br>Groups (Included<br>in Col. 2) |
|------------------------------|---|--|-----------------------------------|--|---|--------------------------------|------------------------------|--|--|
|                              |   | 2<br>Direct<br>Premiums<br>Written   | 3<br>Direct<br>Premiums<br>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  |                                   |  |   |                                |                              |  |  |
| 15. Indiana                  | IN  | L  |                                   |  |   |                                |                              |  |  |
| 16. Iowa                     | IA  | N  |                                   |  |   |                                |                              |  |  |
| 17. Kansas                   | KS  | N  |                                   |  |   |                                |                              |  |  |
| 18. Kentucky                 | KY  | L  |                                   |  |   |                                |                              |  |  |
| 19. Louisiana                | LA  | N  |                                   |  |   |                                |                              |  |  |
| 20. Maine                    | ME  | N  |                                   |  |   |                                |                              |  |  |
| 21. Maryland                 | MD  | N  |                                   |  |   |                                |                              |  |  |
| 22. Massachusetts            | MA  | N  |                                   |  |   |                                |                              |  |  |
| 23. Michigan                 | MI  | N  |                                   |  |   |                                |                              |  |  |
| 24. Minnesota                | MN  | N  |                                   |  |   |                                |                              |  |  |
| 25. Mississippi              | MS  | N  |                                   |  |   |                                |                              |  |  |
| 26. Missouri                 | MO  | N  |                                   |  |   |                                |                              |  |  |
| 27. Montana                  | MT  | N  |                                   |  |   |                                |                              |  |  |
| 28. Nebraska                 | NE  | N  |                                   |  |   |                                |                              |  |  |
| 29. Nevada                   | NV  | N  |                                   |  |   |                                |                              |  |  |
| 30. New Hampshire            | NH  | N  |                                   |  |   |                                |                              |  |  |
| 31. New Jersey               | NJ  | N  |                                   |  |   |                                |                              |  |  |
| 32. New Mexico               | NM  | N  |                                   |  |   |                                |                              |  |  |
| 33. New York                 | NY  | N  |                                   |  |   |                                |                              |  |  |
| 34. North Carolina           | NC  | N  |                                   |  |   |                                |                              |  |  |
| 35. North Dakota             | ND  | N  |                                   |  |   |                                |                              |  |  |
| 36. Ohio                     | OH  | L  |                                   |  |   |                                |                              |  |  |
| 37. Oklahoma                 | OK  | N  |                                   |  |   |                                |                              |  |  |
| 38. Oregon                   | OR  | N  |                                   |  |   |                                |                              |  |  |
| 39. Pennsylvania             | PA  | L  | 19,042                            | 4,303  |   |                                |                              |  |  |
| 40. Rhode Island             | RI  | N  |                                   |  |   |                                |                              |  |  |
| 41. South Carolina           | SC  | N  |                                   |  |   |                                |                              |  |  |
| 42. South Dakota             | SD  | N  |                                   |  |   |                                |                              |  |  |
| 43. Tennessee                | TN  | N  |                                   |  |   |                                |                              |  |  |
| 44. Texas                    | TX  | N  |                                   |  |   |                                |                              |  |  |
| 45. Utah                     | UT  | N  |                                   |  |   |                                |                              |  |  |
| 46. Vermont                  | VT  | N  |                                   |  |   |                                |                              |  |  |
| 47. Virginia                 | VA  | N  |                                   |  |   |                                |                              |  |  |
| 48. Washington               | WA  | N  |                                   |  |   |                                |                              |  |  |
| 49. West Virginia            | WV  | N  |                                   |  |   |                                |                              |  |  |
| 50. Wisconsin                | WI  | N  |                                   |  |   |                                |                              |  |  |
| 51. Wyoming                  | WY  | N  |                                   |  |   |                                |                              |  |  |
| 52. American Samoa           | AS  | N  |                                   |  |   |                                |                              |  |  |
| 53. Guam                     | GU  | N  |                                   |  |   |                                |                              |  |  |
| 54. Puerto Rico              | PR  | N  |                                   |  |   |                                |                              |  |  |
| 55. U.S. Virgin Islands      | VI  | N  |                                   |  |   |                                |                              |  |  |
| 56. Northern Mariana Islands | MP  | N  |                                   |  |   |                                |                              |  |  |
| 57. Canada                   | CAN   | N  |                                   |  |   |                                |                              |  |  |
| 58. Aggregate Other Alien    | OT  | XXX  |                                   |  |   |                                |                              |  |  |
| 59. Totals                   |   | XXX  | 19,042                            | 4,303  |   |                                |                              |  |  |
| <b>Details of Write-Ins</b>  |   |  |                                   |  |   |                                |                              |  |  |
| 58001.                       |   | XXX  |                                   |  |   |                                |                              |  |  |
| 58002.                       |   | XXX  |                                   |  |   |                                |                              |  |  |
| 58003.                       |   | XXX  |                                   |  |   |                                |                              |  |  |
| 58998.                       | Summary of remaining write-ins<br>for Line 58 from overflow page    | XXX  |                                   |  |   |                                |                              |  |  |
| 58999.                       | Totals (Lines 58001 through<br>58003 plus 58998) (Line 58<br>above) | XXX  |                                   |  |   |                                |                              |  |  |

## (a) Active Status Counts

1. L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG ..... 5. Q – Qualified - Qualified or accredited reinsurer ..... –  
 2. R – Registered – Non-domiciled RRGs ..... 5. D – Domestic Surplus Lines Insurer (DSL) – Reporting entities  
 3. E – Eligible - Reporting entities eligible or approved to write surplus lines in the state ..... –  
 4. P – Pending - Reporting entities pending approval to write surplus lines in the state ..... –  
 6. N – None of the above - Not allowed to write business in the state ..... 52

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

NONE

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

## PART 1 - ORGANIZATIONAL CHART

