



QUARTERLY STATEMENT

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

Sidecar Health Insurance Company

NAIC Group Code	00000 (Current Period)	00000 (Prior Period)	NAIC Company Code	17104	Employer's ID Number		86-2011787	
Organized under the Laws of			Ohio	State of Domicile or Port of Entry			Ohio	
Country of Domicile				United States				
Licensed as business type:		Life, Accident & Health [X] Dental Service Corporation [] Other []	Property/Casualty [] Vision Service Corporation []	Hospital, Medical & Dental Service or Indemnity [] Health Maintenance Organization [] Is HMO Federally Qualified? Yes [] No []				
Incorporated/Organized		02/25/2021	Commenced Business		09/30/2021			
Statutory Home Office		One Columbus, Suite 495, 10 West Broad Street (Street and Number)			Columbus, OH, US 43215 (City or Town, State, Country and Zip Code)			
Main Administrative Office		2381 Rosecrans Ave Ste 400 (Street and Number)	El Segundo, CA, US 90245 (City or Town, State, Country and Zip Code)		424-666-2815 (Area Code) (Telephone Number)			
Mail Address		2381 Rosecrans Ave Ste 400 (Street and Number or P.O. Box)			El Segundo, CA, US 90245 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records		2381 Rosecrans Ave Ste 400 (Street and Number)	El Segundo, CA, US 90245 (City or Town, State, Country and Zip Code)		424-666-2815 (Area Code) (Telephone Number)			
Internet Web Site Address		N/A						
Statutory Statement Contact		Andrea Sherry (Name) asherry@SidecarHealth.com (E-Mail Address)	716-517-6457 (Area Code) (Telephone Number) (Extension) 866-429-2596 (FAX Number)					

OFFICERS

Name	Title	Name	Title
Patrick Quigley	President & Chief Executive Officer General Counsel, Chief Compliance & Risk Officer	Andrea Sherry	Treasurer & Vice President of Finance
Natalie Leino #			

OTHER OFFICERS

Doug Lynch	Chief Actuary	Veronica Osetinsky	Chief Operating Officer

DIRECTORS OR TRUSTEES

Peter Andruszkiewicz	Jennifer Kent	Molly Bonakdarpour	Patrick Quigley
James Parker			

State of

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County of

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.

Patrick Quigley President & Chief Executive Officer	Andrea Sherry Treasurer & Vice President of Finance	Natalie Leino General Counsel, Chief Compliance & Risk Officer
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a. Is this an original filing? Yes [X] No []

b. If no:

1. State the amendment number
2. Date filed
3. Number of pages attached

Subscribed and sworn to before me this
day of _____,

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	23,371,717		23,371,717	15,843,500
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$ 10,867,480), cash equivalents (\$ 3,201,268) and short-term investments (\$ 0)	14,148,748		14,148,748	9,781,982
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives	0		0	0
8. Other invested assets	0		0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	37,520,465	0	37,520,465	25,625,482
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	163,712		163,712	121,210
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	1,841,803	155,248	1,686,556	1,536,403
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	163,299		163,299	3,078,058
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	0
18.2 Net deferred tax asset			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	564,833		564,833	160,000
24. Health care (\$ 708,836) and other amounts receivable	4,614,345	427,681	4,186,664	2,323,269
25. Aggregate write-ins for other-than-invested assets	36,305	36,305	0	92,756
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	44,904,763	619,234	44,285,529	32,937,178
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	44,904,763	619,234	44,285,529	32,937,178
DETAILS OF WRITE-INS				
1101.			0	0
1102.			0	0
1103.			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Prepaid Expenses	36,305	36,305	0	0
2502. Other Receivable			0	92,756
2503.			0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	36,305	36,305	0	92,756

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 248,746 reinsurance ceded)	15,445,570		15,445,570	13,724,674
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses	427,196		427,196	513,024
4. Aggregate health policy reserves including the liability of \$ for medical loss ratio rebate per the Public Health Service Act	170,384		170,384	170,384
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	186,814		186,814	1,168,595
9. General expenses due or accrued	474,756		474,756	1,495,877
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable	1,016,524		1,016,524	316,690
12. Amounts withheld or retained for the account of others	3,975,106		3,975,106	2,840,129
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	1,760,027		1,760,027	1,004,603
16. Derivatives			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including \$ current)	186,351	0	186,351	36,246
24. Total liabilities (Lines 1 to 23)	23,642,728	0	23,642,728	21,270,222
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	3,000,000	3,000,000
27. Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	49,000,000	29,500,000
29. Surplus notes	XXX	XXX		0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(31,357,198)	(20,833,044)
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX		0
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	20,642,802	11,666,956
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	44,285,529	32,937,178
DETAILS OF WRITE-INS				
2301. Broker Commission Payable	186,351		186,351	36,246
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	186,351	0	186,351	36,246
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX.....	134,498	47,605	104,872
2. Net premium income (including \$..... non-health premium income)	XXX.....	63,233,080	32,057,454	44,727,753
3. Change in unearned premium reserves and reserve for rate credits	XXX.....		0	0
4. Fee-for-service (net of \$..... medical expenses)	XXX.....		0	0
5. Risk revenue	XXX.....		0	0
6. Aggregate write-ins for other health care related revenues	XXX.....	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX.....	0	0	0
8. Total revenues (Lines 2 to 7).....	XXX.....	63,233,080	32,057,454	44,727,753
Hospital and Medical:				
9. Hospital/medical benefits.....			0	0
10. Other professional services.....			0	0
11. Outside referrals.....		46,053,037	15,464,441	31,340,154
12. Emergency room and out-of-area.....		2,456,034	1,256,491	2,140,173
13. Prescription drugs.....		20,067,534	15,225,556	16,852,711
14. Aggregate write-ins for other hospital and medical.....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....			0	0
16. Subtotal (Lines 9 to 15).....	0	68,576,606	31,946,488	50,333,038
Less:				
17. Net reinsurance recoveries.....		4,214,428	2,753,670	3,451,926
18. Total hospital and medical (Lines 16 minus 17).....	0	64,362,178	29,192,818	46,881,111
19. Non-health claims (net).....			0	0
20. Claims adjustment expenses, including \$..... 185,414 cost containment expenses.....		1,928,659	1,726,244	5,141,536
21. General administrative expenses.....		8,324,668	6,125,179	5,681,581
22. Increase in reserves for life and accident and health contracts (including \$..... increase in reserves for life only).....			0	(1,157,086)
23. Total underwriting deductions (Lines 18 through 22).....	0	74,615,505	37,044,241	56,547,143
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX.....	(11,382,425)	(4,986,787)	(11,819,390)
25. Net investment income earned.....		759,776	300,137	501,330
26. Net realized capital gains (losses) less capital gains tax of \$.....			0	71
27. Net investment gains (losses) (Lines 25 plus 26).....	0	759,776	300,137	501,402
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....) (amount charged off \$.....)].....			0	0
29. Aggregate write-ins for other income or expenses.....	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX.....	(10,622,649)	(4,686,650)	(11,317,989)
31. Federal and foreign income taxes incurred.....	XXX.....		0	0
32. Net income (loss) (Lines 30 minus 31).....	XXX.....	(10,622,649)	(4,686,650)	(11,317,989)
DETAILS OF WRITE-INS				
0601.....	XXX.....		0	0
0602.....	XXX.....		0	0
0603.....	XXX.....		0	0
0698. Summary of remaining write-ins for Line 6 from overflow page.....	XXX.....	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....	XXX.....	0	0	0
0701.....	XXX.....		0	0
0702.....	XXX.....		0	0
0703.....	XXX.....		0	0
0798. Summary of remaining write-ins for Line 7 from overflow page.....	XXX.....	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above).....	XXX.....	0	0	0
1401.....			0	0
1402.....			0	0
1403.....			0	0
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above).....	0	0	0	0
2901.....			0	0
2902.....			0	0
2903.....			0	0
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above).....	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year	11,666,956	6,886,883	6,886,883
34. Net income or (loss) from Line 32	(10,622,649)	(4,686,650)	(11,317,989)
35. Change in valuation basis of aggregate policy and claim reserves	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$	0	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	0	0	0
39. Change in nonadmitted assets	98,494	(399,324)	(401,939)
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles	0	0	0
44. Capital Changes:			
44.1 Paid in	0	0	0
44.2 Transferred from surplus (Stock Dividend)	0	0	0
44.3 Transferred to surplus	0	0	0
45. Surplus adjustments:			
45.1 Paid in	19,500,000	14,500,000	16,500,000
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital and surplus (Lines 34 to 47)	8,975,845	9,414,026	4,780,073
49. Capital and surplus end of reporting period (Line 33 plus 48)	20,642,801	16,300,909	11,666,956
DETAILS OF WRITE-INS			
4701.	0	0	0
4702.	0	0	0
4703.	0	0	0
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	62,832,709	28,880,015	41,693,352
2. Net investment income	676,010	261,939	427,365
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	63,508,720	29,141,954	42,120,718
5. Benefit and loss related payments	60,789,669	31,245,174	44,729,432
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	11,210,172	7,174,741	9,820,137
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	0	0
10. Total (Lines 5 through 9)	71,999,841	38,419,915	54,549,569
11. Net cash from operations (Line 4 minus Line 10)	(8,491,121)	(9,277,960)	(12,428,851)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	1,880,822	1,113,525	1,593,498
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,880,822	1,113,525	1,593,498
13. Cost of investments acquired (long-term only):			
13.1 Bonds	9,367,775	3,830,017	11,263,834
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	0	1,000
13.7 Total investments acquired (Lines 13.1 to 13.6)	9,367,775	3,830,017	11,264,834
14. Net increase/(decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(7,486,953)	(2,716,491)	(9,671,336)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	19,500,000	14,500,000	16,500,000
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	844,839	2,390,414	3,450,300
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	20,344,839	16,890,414	19,950,300
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	4,366,765	4,895,963	(2,149,887)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	9,781,982	11,931,870	11,931,870
19.2 End of period (Line 18 plus Line 19.1)	14,148,748	16,827,832	9,781,982

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non- Health
		2 Individual	3 Group											
Total Members at end of:														
1. Prior Year	9,962	0	9,962	0	0	0	0	0	0	0	0	0	0	0
2. First Quarter	14,532	0	14,532	0	0	0	0	0	0	0	0	0	0	0
3. Second Quarter	15,296	0	15,296	0	0	0	0	0	0	0	0	0	0	0
4. Third Quarter	14,934	0	14,934	0	0	0	0	0	0	0	0	0	0	0
5. Current Year	0													
6. Current Year Member Months	134,498		134,498											
Total Member Ambulatory Encounters for Period:														
7. Physician	77,312		77,312											
8. Non-Physician	3,351		3,351											
9. Total	80,663	0	80,663	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	6,036		6,036											
11. Number of Inpatient Admissions	4,350		4,350											
12. Health Premiums Written (a)	67,792,233		67,792,233											
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned	67,792,233		67,792,233											
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services	70,152,153	0	70,152,153											
18. Amount Incurred for Provision of Health Care Services	68,576,606	(521)	68,577,126											

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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims unpaid (Reported)						
Toledo Hospital.....	335,658					335,658
Imaging Center Woodman.....	111,163				.930	112,093
Northwestern Memorial Hospital.....					.93,185	93,185
James Cancer Hospital And Solove Research.....	70,735					70,735
Lima Memorial Health System.....	37,657					37,657
Promedica.....	35,479				.139	35,617
Kindred Hospital Lima.....	34,101					34,101
Kettering Health Miamisburg.....	23,141					23,141
RIVERSIDE METHODIST HOSPITAL.....	22,573					22,573
St. Francis - Emory Healthcare.....					.21,431	21,431
HUTCHINSON HEALTH.....					.17,668	17,668
Benefits Payable to Enrollees in Large G.....		17,500				17,500
Piedmont Newton Hospital.....	17,384					17,384
Family First Outpatient Services.....	13,500					13,500
Mount Carmel Behavioral Health.....					.13,185	13,185
PROMEDICA CENTRAL PHYSICIANS LLC.....	8,026					8,026
0199999 Individually listed claims unpaid.....	709,416	17,500	.0	.0	.146,537	873,454
0299999 Aggregate accounts not individually listed-uncovered.....						0
0399999 Aggregate accounts not individually listed-covered.....	150,430	233	4,301		.212,900	367,864
0499999 Subtotals.....	859,846	17,733	4,301	0	.359,437	1,241,317
0599999 Unreported claims and other claim reserves.....	XXX	XXX	XXX	XXX	XXX	14,452,999
0699999 Total amounts withheld.....	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid.....	XXX	XXX	XXX	XXX	XXX	15,694,316
0899999 Accrued medical incentive pool and bonus amounts.....	XXX	XXX	XXX	XXX	XXX	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	0	0	0	0	0	521
2. Comprehensive (hospital and medical) group	7,774,228	55,897,481	609,985	14,835,585	8,384,213	13,724,153
3. Medicare Supplement					0	0
4. Vision only					0	0
5. Dental only					0	0
6. Federal Employees Health Benefits Plan					0	0
7. Title XVIII - Medicare					0	0
8. Title XIX - Medicaid					0	0
9. Credit A&H					0	0
10. Disability income					0	0
11. Long-term care					0	0
12. Other health					0	0
13. Health subtotal (Lines 1 to 12)	7,774,228	55,897,481	609,985	14,835,585	8,384,213	13,724,674
14. Health care receivables (a)		1,030,428			0	0
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts					0	0
17. Totals (Lines 13-14+15+16)	7,774,228	54,867,053	609,985	14,835,585	8,384,213	13,724,674

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

NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies

Sidecar Health Insurance Company (“The Company”) is dedicated to providing simple and transparent insurance options based on cash prices. Sidecar Health is a licensed insurer domiciled in Ohio. The Company began writing both a large employer group line and an Affordable Care Act (ACA) individual market line for Plan Year 2022. The Company subsequently exited the individual market effective at the beginning of 2024.

1A. Accounting Practices

The Company prepares its statutory financial statements in conformity with accounting practices prescribed by the State of Ohio. The State of Ohio requires that insurance entities domiciled in Ohio prepare their statutory basis financial statements in accordance with the Statutory Accounting Principles as per the NAIC Accounting Practices and Procedures Manual (NAIC SAP).

	SSAP	F/S Page	F/S Line	2025-Q3	2024
NET INCOME (LOSS)					
(1) Sidecar Hlth Ins. Co state basis (Page 4, Line 32, Columns 2 & 3)				(\$10,622,649)	(\$11,317,989)
(2) State Prescribed Practice that is an increase/(decrease) from NAIC SAP				0	0
(3) State Permitted Practice that is an increase/(decrease) from NAIC SAP				0	0
(4) NAIC SAP (1 – 2 – 3 = 4)				<u>(\$10,622,649)</u>	<u>(\$11,317,989)</u>
SURPLUS					
(5) Sidecar Hlth Ins. Co state basis (Page 3, line 33, Columns 3 & 4)				\$20,642,802	\$11,666,956
(6) State Prescribed Practice that is an increase/(decrease) from NAIC SAP				0	0
(7) State Permitted Practice that is an increase/(decrease) from NAIC SAP				0	0
(8) NAIC SAP (5 – 6 – 7 = 8)				<u>\$20,642,802</u>	<u>\$11,666,956</u>

1B. Use of Estimates in the Preparation of Financial Statements

The preparation of financial statements in conformity with the NAIC SAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

1C. Accounting Policies

Expenses incurred in connection with acquiring new business are charged to operations as incurred. The Company’s health plans use a non-network indemnity model to pay an allowed amount (referred to as the Benefit Amount in policies and plan documents) for each procedure, device, or drug billed by a provider or pharmacy in connection with delivering covered services. For most claims, members pay providers at the point of service using either their own payment method or a Company-issued Visa card. Members submit proof of loss to the Company and, subject to cost sharing, the Company reimburses members the applicable allowed amount for the drug or service, regardless of billed charges. The Company fully funds charges made by members to the Sidecar Health Visa card for services not subject to cost sharing and for any services incurred after the member has met their out-of-pocket maximum. Until the member submits an itemized medical invoice for the Visa charge the Company treats this charge to the Sidecar Health Visa card as an account receivable. The Company had \$3,867,240 such Member Receivables at September 30, 2025 and \$2,937,802 at December 31, 2024. The Company writes off receivables if after 90 days from the date of the charge to the Sidecar Health Visa card a medical expense is not substantiated or the balance is not repaid by the member. If the Sidecar Health Visa data indicates the charge was likely made to pay for a covered service, then the receivable is charged to claims expense when it is written off. Otherwise, the receivable is charged to Other Claims Adjustment Expenses. The Company has written off \$577,324 in Sidecar Health Visa charges to Claims Expense as of September 30, 2025, and \$695,195 as of December 31, 2024. The Company has written off \$1,553,124 to Other Claims adjustment Expense as of September 30, 2025, and \$1,868,577 as of December 31, 2024.

The Company receives some claims directly from providers. The Company pays the allowed amount for such services directly to the member, except for claims subject to surprise billing laws or coordination of benefits, in which case the Company pays the allowed amount to the provider. In addition, the Company has direct billing agreements with certain providers who prefer to submit claims and receive reimbursement through a traditional billing cycle rather than charging members directly. As the Company does not utilize any provider networks, all medical expenses, whether paid to providers or members, are reported as outside referrals, other than expenses for emergency room services or prescription drugs, which are reported on their respective lines. All medical expenses are reported as “fee for service” in Exhibit 7 to the annual statement.

If not paying providers directly, the Company may pay claims by crediting the applicable Benefit Amount for covered services to the member’s Sidecar Health account. The balance in this account can be withdrawn by the member and received in the form of a check payment from the Company’s claims account or the member can elect to apply their balance against claims balances due to Sidecar Health. Sidecar Health account balances are liabilities on the Company’s balance sheet, retained for the benefit of members.

1C.(2) - SVO-Identified securities – there are no investments reported at a different measurement method from what was used in an earlier current-year interim and/or in a prior annual statement.

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

NOTES TO FINANCIAL STATEMENTS

1C.(6) - Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities except for interest only securities or securities where the yield had become negative, that are valued using the prospective method.

1D. Going Concern Based upon its evaluation of relevant conditions and events, management is confident of the Company's ability to continue as a going concern. The Company is more than adequately capitalized for its current large group membership and can exercise control over large groups sales activities to ensure enrollment remains within acceptable limits. In addition, the Company's upstream parent raised \$125 million in Series D equity financing in Q2 2024 and an additional \$32M in Q2 2025, providing the capacity and can to contribute additional capital necessary to support the Company's operations.

Note 2 - Accounting Changes and Corrections of Errors - The Company has reclassified claims expenses in the prior year's Statement of Income to more accurately reflect the service and nature of claims incurred. This reclassification had no impact on total claims expense, net income, or surplus, and aligns the prior period presentation with the current year's classification. The effect of this reclassification is summarized below:

Financial Statement Line	2024 As Previously Reported	2024 Restated
11. Outside referrals	15,529,983	31,340,155
12. Emergency room and out-of-area	17,944,871	2,140,173
13. Prescription drugs	16,858,183	16,852,708
Total	50,333,036	50,333,036

Note 3 - Business Combinations and Goodwill - None.

Note 4A-D - Discontinued Operations - None.

Note 5 - Investments – No significant change.

5A-C. The Company has no investments in mortgage loans, restructured debt, reverse mortgages, repurchase agreements or real estate. There are no significant changes in investments.

The unrealized losses on the Company's fixed maturity investments are primarily caused by changes in interest rates. The contractual terms of these investments do not permit the issuer to settle the securities at a price less than the amortized cost of the investment. The Company intends and believes it can hold these investments until an expected recovery of fair value.

5D. Investments in Loan Backed Securities –

1) Prepayment assumptions for mortgage-backed securities are based on estimates provided by the dealer markets.

2 & 3) there are no OTTI adjustments on the company's mortgage backed securities.

4) There are no OTTI impaired mortgage backed securities.

5E. Dollar Repurchase Agreements and/or Securities Lending Transactions – None.

5F. Repurchase Agreements Transactions Accounted for as Secured Borrowing – None.

5G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing – None.

5H. Repurchase Agreements Transactions Accounted for as a Sale – None.

5I. Reverse Repurchase Agreements Transactions Accounted for as a Sale – None.

5J. Real Estate – None.

5K. Low-Income Housing Tax Credits (LIHTC) – None.

5L. Restricted Assets - Investments and cash in the amount of \$117,705 are held on deposit by the Ohio Department of Insurance, representing less than 1% of total invested assets of \$37,520,465.

5M. Working Capital Finance Investments – None.

5N. Offsetting and Netting of Assets and Liabilities – None.

5O. 5* Securities – None.

5P. Short Sales – None.

5Q. Prepayment Penalty and Acceleration Fees – None.

5R. Cash Pool – None.

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

Note 7 - Investment Income - The Company has no investments with income in arrears or over 90 days past due.

Note 8A-B - Derivative Instruments - None.

Note 9 - Income Taxes

A. The components of the net deferred tax asset/liability at June 30 are as follows:

	9/30/2025			12/31/2024			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
1.									
(a)	Gross Deferred Tax Assets	529	6,297,857	4,066,571	529	4,067,100	2,230,757	0	2,230,757
(b)	Statutory Valuation Allowance Adjustments	529	6,297,647	4,066,361	529	4,066,890	2,230,757	0	2,230,757
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)								
(d)	Deferred Tax Assets Nonadmitted	210	-	210	-	210	(0)	-	(0)
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	210	-	210	-	210	(0)	-	(0)
(f)	Deferred Tax Liabilities	210	-	210	-	210	(0)	-	(0)
(g)	Net Admitted Deferred Tax Asset / (Net Deferred Tax Liability) (1e - 1f)						(0)	-	(0)
2.	Admission Calculation Components per SSAP No. 101								
(a)	Federal Income Taxes Paid in Prior Years	-	-	-	-	-	-	-	-
	Recoverable Through Loss Carrybacks	-	-	-	-	-	-	-	-
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount of Deferred Tax Assets from 2(a) above) after application of the Threshold Limitation (The lesser of 2(b)1 and 2(b)2 below)								
(1)	Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	(0)	-	(0)	-	-	(0)	-	(0)
(2)	Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	(0)	(0)	-	-	-	(0)	-	(0)
(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	XXX	XXX	3,096,420	XXX	XXX	1,750,043	XXX	XXX
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	210	-	210	210	-	210	(0)	(0)

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

NOTES TO FINANCIAL STATEMENTS

Note 9 - Income Taxes (Continued)

		9/30/2025	12/31/2024		
		<u>229051.94%</u>	<u>129456.21%</u>		
3.	(a) Ratio percentage used to determine recovery period and threshold limitation amount	<u>229051.94%</u>	<u>129456.21%</u>		
	(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limit in 2.(b)(2) above	<u>20,642,802</u>	<u>\$ 11,666,956</u>		
4.		September 30, 2025	December 31, 2024	Change	
		(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital
		(5) (Col 1 - 3) Ordinary	(6) (Col 2 - 4) Capital		
	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,				
1.	Adjusted Gross DTAs Amount From Note 9A1(c)	210	-	210	-
2.	Percentage of Adjusted Gross DTAs by Tax Character Attributable to the Impact of Tax Planning Strategies	0%	0%	0%	0%
3.	Net Admitted Adjusted Gross DTAs Amount from Note 9A1(e)	210	-	210	-
4.	Percentage of Net Admitted Adjusted Gross DTAs by Tax Character Admitted Because of the Impact of Tax Planning Strategies	0%	0%	0%	0%
(b)	Does the Company's tax-planning strategies include the use of reinsurance?	Yes		No	<input checked="" type="checkbox"/> X
B.	Unrecognized DTLs				
	Not applicable.				
C.	The components of incurred income tax expense and the change in DTA's and DTL's are as follows:				
1.	Current Income Tax	9/30/2025	12/31/2024	Change	
(a)	Federal	<u>-</u>	<u>-</u>	<u>-</u>	
(b)	Foreign	<u>-</u>	<u>-</u>	<u>-</u>	
(c)	Subtotal (1a+1b)	<u>-</u>	<u>-</u>	<u>-</u>	
(d)	Federal income tax on net capital gains	<u>-</u>	<u>-</u>	<u>-</u>	
(e)	Utilization of capital loss carryforwards	<u>-</u>	<u>-</u>	<u>-</u>	
(f)	Other	<u>-</u>	<u>-</u>	<u>-</u>	
(g)	Federal and foreign taxes incurred (1c+1d+1e+1f)	<u>-</u>	<u>-</u>	<u>-</u>	
2.	Deferred Tax Assets	9/30/2025	12/31/2024	Change	
(a)	Ordinary				
(1)	Discounting of unpaid losses	67,381	58,684	8,697	
(2)	Unearned premium reserve	7,846	49,081	(41,235)	
(3)	Policyholder reserves	<u>-</u>	<u>-</u>	<u>-</u>	
(4)	Investments	<u>-</u>	<u>-</u>	<u>-</u>	
(5)	Deferred acquisition costs	<u>-</u>	<u>-</u>	<u>-</u>	
(6)	Policyholder dividends accrual	<u>-</u>	<u>-</u>	<u>-</u>	
(7)	Fixed assets	<u>-</u>	<u>-</u>	<u>-</u>	
(8)	Accrued expenses	<u>-</u>	<u>-</u>	<u>-</u>	
(9)	Pension accrual	<u>-</u>	<u>-</u>	<u>-</u>	
(10)	Receivables - nonadmitted	<u>-</u>	<u>-</u>	<u>-</u>	
(11)	Net operating loss carry-forward	6,021,642	3,758,348	2,263,294	
(12)	Tax credit carry-forward	<u>-</u>	<u>-</u>	<u>-</u>	
(13)	Other	200,458	200,458	(0)	
(99)	Subtotal (sum of 2a1 through 2a13)	6,297,328	4,066,570	2,230,758	
(b)	Statutory valuation allowance adjustment	6,297,118	4,066,360	2,230,758	
(c)	Nonadmitted	<u>-</u>	<u>-</u>	<u>-</u>	
(d)	Admitted ordinary deferred tax assets	210	210	(0)	
(e)	Capital:				
(1)	Investments - Unrealized gains on AFS Securities	<u>-</u>	<u>-</u>	<u>-</u>	
(2)	Net capital loss carryforward	529	529	<u>-</u>	
(3)	Real Estate	<u>-</u>	<u>-</u>	<u>-</u>	
(4)	Other	<u>-</u>	<u>-</u>	<u>-</u>	
(99)	Subtotal (2e1+2e2+2e3+2e4)	529	529	<u>-</u>	
(f)	Statutory valuation allowance adjustment	529	529	0	
(g)	Nonadmitted	<u>-</u>	<u>-</u>	<u>-</u>	
(h)	Admitted capital deferred tax assets (2e99 - 2f - 2g)	<u>-</u>	<u>-</u>	<u>(0)</u>	
(i)	Admitted deferred tax assets (2d + 2h)	210	210	(0)	
3.	Deferred Tax Liabilities	9/30/2025	12/31/2024	Change	
(a)	Ordinary				
(1)	Investments	<u>-</u>	<u>-</u>	<u>-</u>	
(2)	Fixed assets	<u>-</u>	<u>-</u>	<u>-</u>	
(3)	Deferred and uncollected premium	<u>-</u>	<u>-</u>	<u>-</u>	
(4)	Policyholder Reserves	<u>-</u>	<u>-</u>	<u>-</u>	
(5)	Other	210	210	<u>-</u>	
(99)	Subtotal (3a1+3a2+3a3+3a4+3a5)	210	210	<u>-</u>	
(b)	Capital				
(1)	Investments	(0)	<u>-</u>	<u>-</u>	
(2)	Real Estate	<u>-</u>	<u>-</u>	<u>-</u>	
(3)	Other	<u>-</u>	<u>-</u>	<u>-</u>	
(99)	Subtotal (3b1+3b2+3b3)	(0)	<u>-</u>	<u>-</u>	
(c)	Deferred tax liabilities (3a99 + 3b99)	210	210	<u>-</u>	
4.	Net deferred tax assets/(liabilities) (2i-3c)	<u>(0)</u>	<u>-</u>	<u>(0)</u>	

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

NOTES TO FINANCIAL STATEMENTS

Note 9 - Income Taxes (Continued)

D. Reconciliation of Federal income Tax Rate to Actual Effective Rate

The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

Description	Amount	Tax Effect @ 21%	Effective Rate
Income before taxes	(10,622,649)		
Tax at statutory rates		(2,230,756)	21.00%
Increase/(Decrease) in valuation allowance		2,230,756	-21.00%
Other		-	0.00%
Unrealized loss		-	0.00%
Total income tax expense		0	0.00%

E. Operating Loss and Tax Credit Carryforwards

(1) The company has a federal operating loss carryforwards available of \$28,674,487

(2) The company has \$0 of income taxes incurred in current or prior years that are available for recoupment in the event of future net losses.

(3) The aggregate amount of deposits reported as admitted assets under Section 6603 of the Internal Revenue Service (IRS) Code was \$0.

F. Consolidated Federal Income Tax Return

Sidecar Health Insurance Company's federal income tax return will be consolidated with its parent, Sidecar Health, Inc.

(1) The method of allocation among companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis with current credit given for any net operating losses or other items utilized in the consolidated tax return.

G. Federal or Foreign Income Tax Loss Contingencies

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

H. Repatriation Transition Tax (RTT)

The Company does not have foreign operations and is not subject to RTT.

I. Alternative Minimum Tax (AMT) Credits

The Company had no AMT credits.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties -

The Company has an administrative services agreement with its TPA affiliate Sidecar Health Insurance Solutions, LLC (SHIS) to administer policies of insurance on behalf of the Company and provide various services including, but not limited to, managing the promotion, marketing, sale, enrollment, administration, renewal, claims processing and claims adjustment of such policies via a proprietary digital platform, as well as operation of the Company's public facing website. In exchange for these services, the Company will pay an administrative services fee of \$39.70 per enrollee per month, and 100% of the expenses incurred by SHIS for quality improvement activities. As of September 30, 2025, the company has expensed \$5,349,673 under the administrative service agreement.

The Company has a management services agreement with its ultimate parent Sidecar Health, Inc. (SHI) to provide management services related to the operation of the Company including, but not limited to, accounting, human resources, actuarial services, compliance, and marketing. In exchange for these services, the Company will pay an administrative services fee of \$2.20 per month for each enrollee. As of September 30, 2025, the company has expensed \$296,455 under the management service agreement.

The Company recorded intercompany payables of \$1,760,027 at September 30, 2025 and \$1,004,603 at December 31, 2024, representing net expenses paid by the parent or affiliate for the benefit of the Company.

Note 11A-B – Debt - None.

11B. FHLB Agreements - None.

Note 12A-C - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans- None.

12A1-21. Defined Benefit Plan - not applicable.

Note 13 - Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations - The Company has issued and authorized 30,000 shares of common stock at a par value \$100 per share. All shares of Common Stock are held by Sidecar Health Holding Company, LLC representing 100% ownership of the Company. In addition to Common Stock, during the period ended September 30, 2025 Sidecar Health Holding Company, LLC has provided an additional \$19,500,000 of contributed surplus in the form of cash, for a total contributed surplus amount of \$49,000,000 as of September 30, 2025.

Note 14 - Contingencies

- A. The Company has no contingent commitments to any venture and has no guarantees outstanding.
- B. The Company is not aware of any assessments that could have a material impact on its financial statements.
- C. The Company has no gain contingencies.
- D. The Company has no extra contractual obligation or bad faith losses or amounts recorded for such. The Company is subject to potential litigation in the normal course of business. The Company is not aware of any potential material contingent liabilities not otherwise recorded in the financial statements or discussed in these footnotes.
- E. The Company has no Joint and Several Liabilities.
- F. The Company has no other contingencies.

NOTES TO FINANCIAL STATEMENTS

Note 15A-B - Leases - Rental Expense – The Company leases office space from One Columbus Property, LLC with a twelve-month term at a fixed monthly rate of \$1,000 through February 28, 2025. The lease was renewed at the same fixed monthly rate of \$1,000 per month effective March 1, 2025 for a period of two years ending on February 28, 2027. Rental expense was \$9,000 as of September 30, 2025 and was \$12,000 as of December 31, 2024. There are no contingent rental payments, early terminations, sale-leaseback transactions nor leases with noncancelable terms in excess of one year. Annual minimum lease payments are \$12,000 per year.

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

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

17B. Transfer and Servicing of Financial Assets - None.

17C. Wash Sales - None.

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

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

Note 20 - Fair Value

The Company has categorized its assets and liabilities that are measured at fair value on a recurring basis into the three-level fair value hierarchy as reflected in the following table. See item three below for a discussion of the fair value levels.

A. Inputs Used for Assets and Liabilities Measured at Fair value on Recurring Basis:

Levels 1, 2, and 3

1. Assets Measured at Fair value on Recurring Basis: none

2. Rollforward of Level 3 Items - None.

3. Inputs and Techniques Used for Fair Value

Level 1 - Quoted Prices in Active Markets for Identical Assets and Liabilities: The estimated fair value was determined by an independent pricing service using observable inputs.

Level 2 - Significant Other Observable Inputs: Quoted Prices in Active Markets for Identical Assets and Liabilities: The estimated fair value was determined by an independent pricing service using observable inputs.

Level 3 - Significant Unobservable Inputs: None.

B. Inputs Used for Assets and Liabilities Measured at Fair value on Non-Recurring Basis - None.

C. Other Fair value Disclosures - not applicable.

D. Reasons Not Practical to Estimate Fair Value - not applicable.

Note 21 - Other Items

21A. Unusual or Infrequent Items – None.

21B. Troubled Debt Restructuring - not applicable.

21C. Other Disclosures - The Company has elected to use rounding in reporting amounts in the statements and schedules.

21D-H. The company has no Business Interruption Recoveries, State Transferable and Non-Transferable Tax Credits, Subprime-Mortgage-Related Risk Exposure, Retained Asset Accounts or ILS Contracts.

Note 22 - Events Subsequent

Subsequent events have been considered through November 14, 2025 for the statutory statement issued on November 14, 2025.

Note 23 - Reinsurance

23A. Ceded Reinsurance Report – No reinsurers are controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company.

23B. Uncollectible Reinsurance - None.

23C. Commutation of Ceded Reinsurance - None.

23D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

23E. Reinsurance Credit - None.

Reinsurance and ceded balances as of September 30, 2025:

Paid Loss Recoverable	\$163,299
Reinsurance Premiums Payable	\$1,016,524
Ceded Unearned Premium Reserve	\$0
Ceded Loss Reserves	\$248,746

The Company maintains three active reinsurance agreements as of the reporting date. One policy became effective May 1, 2023 for groups with start dates between May 1, 2023 and April 30, 2024. Coverage is effective through the end of the groups' contract term, not to exceed one year. This reinsurance agreement provides unlimited coverage for losses in excess of \$200,000 per covered member. A second policy became effective May 1, 2024 for groups with start dates between May 1, 2024 and April 30, 2025. Coverage is effective through the end of the groups' contract term, not to exceed one year. This reinsurance agreement provides unlimited coverage for losses in excess of \$250,000 per covered member, with the exception of one covered member. The Company has an attachment point of \$600,000 for the individual member carve-out. The third policy has an effective date of May 1, 2025. This policy covers groups with start dates between May 1, 2025 and April 30, 2026. Coverage is effective through the end of the groups' contract term. This agreement provides unlimited coverage for losses in excess of \$400,000 per covered member, subject to coinsurance for individual claims in excess of \$700,000. For each policy, the Company is required to pay a deposit reinsurance premium based on a specific rate times the number of covered lives each month. Related reinsurance premiums payable have been accrued in the amount of \$1,016,524 at September 30, 2025.

NOTES TO FINANCIAL STATEMENTS

Note 23 – Reinsurance (Continued)

All contracts of reinsurance are with unaffiliated US reinsurers. There are no reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit. There are no commuted or uncollectible losses. No reinsurers have been downgraded or whose status has been revoked.

Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination – No significant change.

A-D. There are no Retrospectively Rated Contracts or medical loss rebate receivables.

E. Risk-Sharing Provisions of the Affordable Care Act (ACA) – Starting January 1, 2022, the Company wrote premiums subject to the Affordable Care Act risk-sharing provisions. The Company exited the ACA market as of January 1, 2024 and, as such, is no longer subject to risk adjustment provisions beginning with the 2024 benefit year.

Note 25 - Change in Incurred Claims and Claim Adjustment Expenses – As of September 30, 2025 the Company reported reserves for incurred but not reported (“IBNR”) claims totaling \$11,713,429 and loss adjustment expense (“LAE”) reserves of \$427,196 compared to December 31, 2024 reserves for incurred but not reported (“IBNR”) claims totaling \$13,288,976 and loss adjustment expense (“LAE”) reserves of \$513,024. During 2025, the IBNR reserve decreased by \$1,575,547 and LAE reserve decreased by \$85,828. The change in INBR included a reduction of \$13,169,474 related to prior-year incurred claims, resulting from both favorable development in comprehensive major medical, as well as the materialization of reserved claims into actual paid claims in the current period. The favorable prior period development was offset by an increase of \$11,508,392 in reserves for claims incurred in the current calendar year, in line with expected claim volume and updated cost trend assumptions. There were no significant changes in reserving methodologies or actuarial assumptions used during the year. No additional or return premiums were accrued in connection with these reserve adjustments.

Note 26 - Intercompany Pooling Arrangements - None.

Note 27A-B - Structured Settlements - None.

Note 28A-B - Health Care Receivables – The Company receives pharmaceutical rebates from a third-party benefit manager. Pharmacy rebates receivable are recorded when reasonably estimated or billed by the affiliated pharmaceutical benefit manager in accordance with pharmaceutical rebate contract provisions. Information used to support rebates billed to the manufacturer is based on utilization information gathered by the pharmaceutical benefit manager and adjusted for significant changes in pharmaceutical contract provisions. The Company evaluates admissibility of all pharmacy rebates receivable based on the administration of each underlying pharmaceutical benefit management agreement. The Company has non-admitted and excluded all pharmacy rebates receivable that do not meet the admissibility criteria of SSAP No. 84, Health Care and Government Insured Plan Receivables ("SSAP No. 84") from the financial statements. As of September 30, 2025, the Company had \$708,836 in admitted healthcare receivables related to pharmacy rebates.

Quarter	Estimated Pharmacy Rebates as Reported on the Financial Statements	Pharmacy Rebates as Confirmed	Actual Rebates Collected Within 90 Days of Confirmation	Actual Rebates Collected Within 91 to 180 Days of Confirmation	Actual Rebates Collected More Than 180 Days After Confirmation
9/30/2025	137,981	570,855	-	-	-
6/30/2025	-	431,272	-	-	-
3/31/2025	-	-	-	-	431,272

The Company has “other healthcare receivables” resulting from Members’ use of the Company-issued Visa card. As noted above, the Company fully funds charges made by members to the Sidecar Health Visa card for services not subject to cost sharing and for any services incurred after the member has met their out-of-pocket maximum. Until the member submits an itemized medical invoice for the Visa charge the Company treats such charges to the Sidecar Health Visa card as an account receivable. The Company adjudicates the claim when the member submits an itemized invoice. If the Company determines the charge was paid towards a covered service, the Company debits claims expense for the Benefit Amount of the covered services and credits the Benefit Amount towards the account receivable accrued when the member used their Sidecar Health Visa card. If the Benefit Amount exceeds this account receivable the excess benefit is credited to a liability account and retained by the Company on behalf of the member (see note 1C, above). If the Benefit Amount is less than the account receivable the Company invoices the member for the balance and treats the balance as a healthcare receivable. In accordance with SSAP No. 84—Health Care and Government Insured Plan Receivables, the Company books these healthcare receivables as “other healthcare receivables” and treats them as a nonadmitted asset. The Company considers these non-admitted healthcare receivables impaired if they are not collected within 90 days of the member’s use of their Company-issued Visa card. Such impaired receivables are written off and charged to claims expense. The Company has a balance of \$321,592 of healthcare receivables outstanding as of September 30, 2025 compared to \$214,513 as of December 31, 2024.

Note 29 - Participating Policies - None.

Note 30 - Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves \$170,384
2. Date of the most recent evaluation of this liability 09/30/25
3. Was anticipated investment income utilized in the calculation? Yes [] No [X]

Note 31 - Anticipated Salvage and Subrogation - none, not applicable.

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]

1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change:

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []

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

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No []

3.3 If the response to 3.2 is yes, provide a brief description of those changes.
Sidecar Health Captive, LLC added to the system.....

3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

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

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]

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

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] NA []

If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2024

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

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

6.4 By what department or departments?
Ohio Department of Insurance.....

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] NA [X]

6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] NA [X]

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

7.2 If yes, give full information:

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

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

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

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

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

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

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

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

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

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

(e) Accountability for adherence to the code.

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

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

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

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

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

FINANCIAL

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

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

GENERAL INTERROGATORIES

INVESTMENT

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

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

.....

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ 0

13. Amount of real estate and mortgages held in short-term investments: \$ 0

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

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$ 0	\$ 0
14.22 Preferred Stock	\$ 0	\$ 0
14.23 Common Stock	\$ 0	\$ 0
14.24 Short-Term Investments	\$ 0	\$ 0
14.25 Mortgage Loans on Real Estate	\$ 0	\$ 0
14.26 All Other	\$ 0	\$ 0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$ 0	\$ 0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$ 0	\$ 0

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

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

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

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

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes [X] No []

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

1 Name of Custodian(s)	2 Custodian Address
.....

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes [] No [X]

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

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

17.5 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 Name of Firm or Individual	2 Affiliation
AAM Insurance Investment Management.....	U.....

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity's invested assets?

Yes [X] No []

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?

Yes [X] No []

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
109875.....	Asset Allocation & Management Company, L.L.C.....	549300DSCHE1V5W3U963.....	Securities Exchange Commission.....	NO.....

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes [X] No []

18.2 If no, list exceptions:

.....

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

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

Has the reporting entity self-designated 5GI securities?

Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying 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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

GENERAL 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?....

Yes No

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

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

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

Yes No

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

1.1 A&H loss percent.....	102.1 %
1.2 A&H cost containment percent.....	0.3 %
1.3 A&H expense percent excluding cost containment expenses.....	101.7 %

2.1 Do you act as a custodian for health savings accounts?..... Yes No

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

2.3 Do you act as an administrator for health savings accounts?..... Yes No

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

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

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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

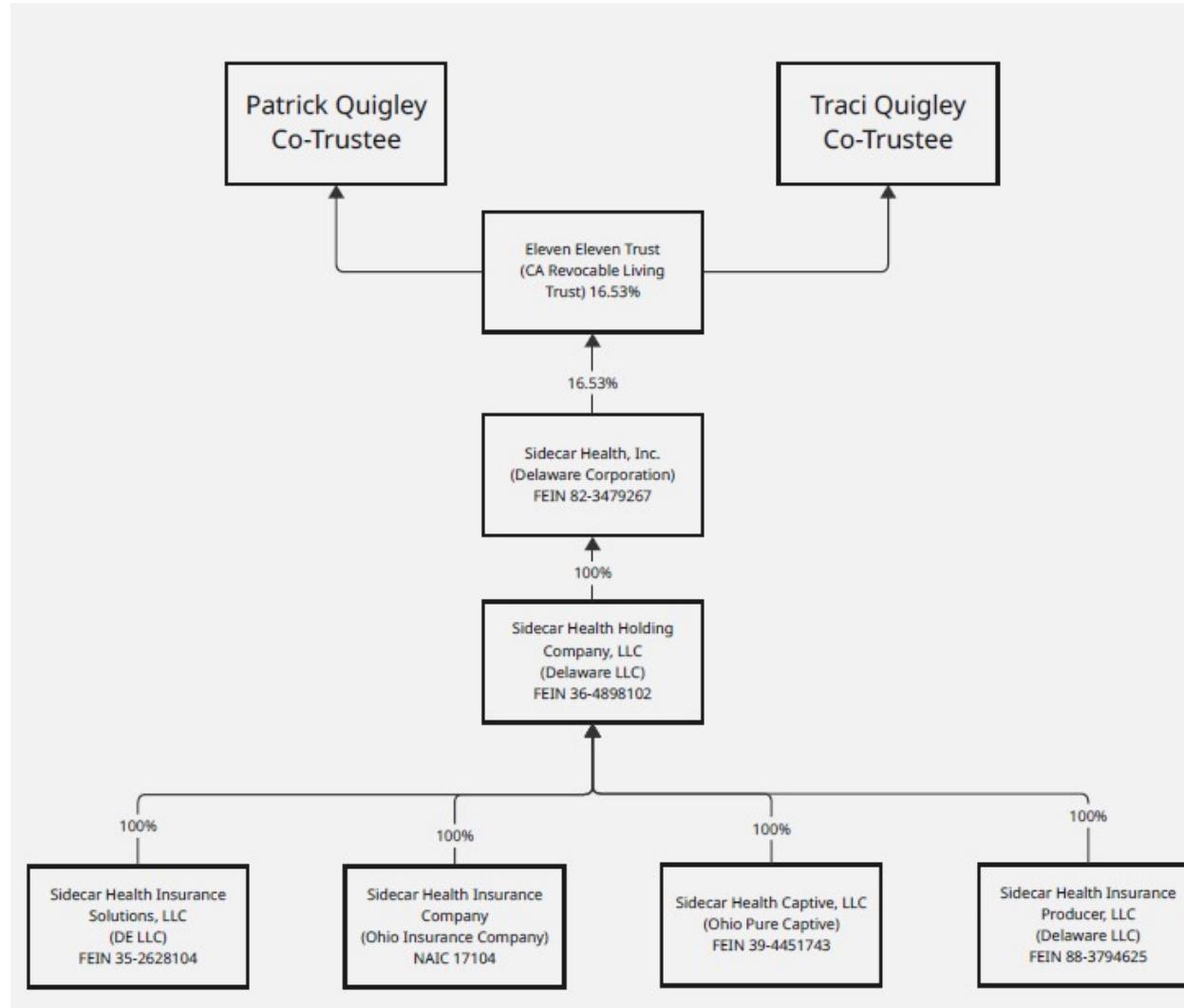
Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only									10 Deposit-Type Contracts
		2 Accident & Health Premiums	3 Medicare Title XVII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Plan Premiums	7 Life & Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 8		
1. Alabama	AL	L								0	
2. Alaska	AK	N								0	
3. Arizona	AZ	N								0	
4. Arkansas	AR	N								0	
5. California	CA	N								0	
6. Colorado	CO	N								0	
7. Connecticut	CT	N								0	
8. Delaware	DE	N								0	
9. Dist. Columbia	DC	N								0	
10. Florida	FL	L	2,244,687						2,244,687		
11. Georgia	GA	L	16,097,877						16,097,877		
12. Hawaii	HI	N								0	
13. Idaho	ID	N								0	
14. Illinois	IL	N								0	
15. Indiana	IN	N								0	
16. Iowa	IA	N								0	
17. Kansas	KS	N								0	
18. Kentucky	KY	N								0	
19. Louisiana	LA	N								0	
20. Maine	ME	N								0	
21. Maryland	MD	N								0	
22. Massachusetts	MA	N								0	
23. Michigan	MI	N								0	
24. Minnesota	MN	N								0	
25. Mississippi	MS	N								0	
26. Missouri	MO	N								0	
27. Montana	MT	N								0	
28. Nebraska	NE	N								0	
29. Nevada	NV	N								0	
30. New Hampshire	NH	N								0	
31. New Jersey	NJ	N								0	
32. New Mexico	NM	N								0	
33. New York	NY	N								0	
34. North Carolina	NC	N								0	
35. North Dakota	ND	N								0	
36. Ohio	OH	L	49,449,668						49,449,668		
37. Oklahoma	OK	N								0	
38. Oregon	OR	N								0	
39. Pennsylvania	PA	N								0	
40. Rhode Island	RI	N								0	
41. South Carolina	SC	N								0	
42. South Dakota	SD	N								0	
43. Tennessee	TN	N								0	
44. Texas	TX	L								0	
45. Utah	UT	N								0	
46. Vermont	VT	N								0	
47. Virginia	VA	N								0	
48. Washington	WA	N								0	
49. West Virginia	WV	N								0	
50. Wisconsin	WI	N								0	
51. Wyoming	WY	N								0	
52. American Samoa	AS	N								0	
53. Guam	GU	N								0	
54. Puerto Rico	PR	N								0	
55. U.S. Virgin Islands	VI	N								0	
56. Northern Mariana Islands	MP	N								0	
57. Canada	CAN	N								0	
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0	0	
59. Subtotal		XXX	67,792,233	0	0	0	0	0	67,792,233	0	
60. Reporting entity contributions for Employee Benefit Plans		XXX								0	
61. Total (Direct Business)		XXX	67,792,233	0	0	0	0	0	67,792,233	0	
DETAILS OF WRITE-INS											
58001		XXX									
58002		XXX									
58003		XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0	0	0	0	
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		XXX	0	0	0	0	0	0	0	0	

(a) Active Status Counts

1. L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG 5 4. Q – Qualified – Qualified or accredited reinsurer 0
 2. R – Registered – Non-domiciled RRGs 0 5. N – None of the above – Not allowed to write business in the state 52
 3. E – Eligible – Reporting entities eligible or approved to write surplus lines in the state 0

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



STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE Y
PART 1A – DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

Asterisk 1	Explanation Patrick Griffin Quigley and Traci Dreher Quigley are Co-Trustees of the Eleven Eleven Trust. The Trust owns 16.53% of Sidecar Health, Inc. Each of the other shareholders of SHI holding an interest of 10% or greater filed disclaimers of affiliation with the Ohio Department of Insurance pursuant to RC 3901.33(J) and OAC 3901-3-02(H).
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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

Explanation:

Bar Code:



OVERFLOW PAGE FOR WRITE-INS

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE A – VERIFICATION

Real Estate

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Current year change in encumbrances.....	0	0
4. Total gain (loss) on disposals.....	0	0
5. Deduct amounts received on disposals.....	0	0
6. Total foreign exchange change in book/adjusted carrying value.....	0	0
7. Deduct current year's other-than-temporary impairment recognized.....	0	0
8. Deduct current year's depreciation.....	0	0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....	0	0
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

NONE

SCHEDULE B – VERIFICATION

Mortgage Loans

	1 Year To Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase/(decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium and mortgage interest points and commitment fees.....	0	0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....	0	0
10. Deduct current year's other-than-temporary impairment recognized.....	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....	0	0
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....	0	0
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

NONE

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase/(decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium, depreciation and proportional amortization.....	0	0
9. Total foreign exchange change in book/adjusted carrying value.....	0	0
10. Deduct current year's other-than-temporary impairment recognized.....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Deduct total nonadmitted amounts.....	0	0
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

NONE

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	15,843,500	6,181,254
2. Cost of bonds and stocks acquired.....	9,367,775	11,263,834
3. Accrual of discount.....	73,602	29,142
4. Unrealized valuation increase/(decrease).....	0	71
5. Total gain (loss) on disposals.....	1,880,822	1,593,498
6. Deduct consideration for bonds and stocks disposed of.....	32,337	38,303
7. Deduct amortization of premium.....	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other-than-temporary impairment recognized.....	0	0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....	0	1,000
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	23,371,717	15,843,500
12. Deduct total nonadmitted amounts.....	0	0
13. Statement value at end of current period (Line 11 minus Line 12).....	23,371,717	15,843,500

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SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a).....	7,562,645	399,804	2,967	103,231	8,959,995	7,562,645	8,062,714	6,950,047
2. NAIC 2 (a).....	2,036,444	103,506		(99,010)	1,932,469	2,036,444	2,040,940	1,766,146
3. NAIC 3 (a).....	0				0	0	0	0
4. NAIC 4 (a).....	0				0	0	0	0
5. NAIC 5 (a).....	0				0	0	0	0
6. NAIC 6 (a).....	0				0	0	0	0
7. Total ICO	9,599,090	503,310	2,967	4,221	10,892,464	9,599,090	10,103,654	8,716,193
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	11,031,992	1,181,415	947,235	12,897	10,123,808	11,031,992	11,279,069	7,798,262
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total ABS.....	11,031,992	1,181,415	947,235	12,897	10,123,808	11,031,992	11,279,069	7,798,262
PREFERRED STOCK								
15. NAIC 1	0				0	0	0	0
16. NAIC 2	0				0	0	0	0
17. NAIC 3	0				0	0	0	0
18. NAIC 4	0				0	0	0	0
19. NAIC 5	0				0	0	0	0
20. NAIC 6	0				0	0	0	0
21. Total Preferred Stock.....	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	20,631,082	1,684,725	950,202	17,118	21,016,272	20,631,082	21,382,723	16,514,454

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$; NAIC 2 \$;

NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
7709999999 Totals	0	XXX			

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	670,955	0
2. Cost of short-term investments acquired		866,660
3. Accrual of discount		4,463
4. Unrealized valuation increase/(decrease).....		0
5. Total gain (loss) on disposals		0
6. Deduct consideration received on disposals	670,955	200,000
7. Deduct amortization of premium.....		169
8. Total foreign exchange change in book/adjusted carrying value.....		0
9. Deduct current year's other-than-temporary impairment recognized.....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	0	670,955
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	0	670,955

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE E – PART 2 – VERIFICATION
(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	5,872,506	2,220,585
2. Cost of cash equivalents acquired	9,701,163	15,617,175
3. Accrual of discount	11,006	2,115
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals.....	0	0
6. Deduct consideration received on disposals	12,303,407	11,967,369
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other-than-temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	3,281,268	5,872,506
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	3,281,268	5,872,506

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
Issuer Credit Obligations - Corporate Bonds (Unaffiliated)								
.09659D-AC-0...	BOARD OF TRUSTEES OF LELAND STANFORD JUN...	.08/06/2025...	GOLDMAN SACHS & CO. INC...	XXX...	225,000	225,000		.1.A FE...
.446413-BA-3...	HUNTINGTON INGALLS INDUSTRIES INC...	.09/19/2025...	BARCLAYS CAPITAL...	XXX...	103,506	100,000	.996	.2.C FE...
.63743H-FZ-0...	NATIONAL RURAL UTILITIES COOPERATIVE FIN...	.08/19/2025...	MITSUBISHI UFJ SECURITIES...	XXX...	174,804	175,000		.1.F FE...
0089999999 - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)					503,310	500,000	.996	XXX
0489999999 - Subtotal - Issuer Credit Obligations (Unaffiliated)					503,310	500,000	.996	XXX
0509999997 - Subtotals - Issuer Credit Obligations - Part 3					503,310	500,000	.996	XXX
0509999999 - Subtotals - Issuer Credit Obligations					503,310	500,000	.996	XXX
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Commercial Mortgage-Backed Securities - Guaranteed (Exempt from RBC)								
.38381M-ZA-1...	GNR 2025-128 AD - CMBS...	.07/31/2025...	R W BAIRD & CO...	XXX...	248,650	249,762	139	.1.A ...
1029999999 - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Commercial Mortgage-Backed Securities - Guaranteed (Exempt from RBC)					248,650	249,762	139	XXX
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Commercial Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)								
.3132KK-XN-2...	FH WN5184 - CMBS/RMBS...	.07/29/2025...	STONEX FINANCIAL INC...	XXX...	199,992	200,000		.1.A ...
.3140LB-60-1...	FN BS1778 - CMBS/RMBS...	.07/11/2025...	National Alliance Securities Corporation...	XXX...	218,828	250,000	208	.1.A ...
1049999999 - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Commercial Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)					418,820	450,000	208	XXX
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)								
.02582J-KT-6...	AMXCA 2025-5 A - ABS...	.07/15/2025...	BARCLAYS CAPITAL...	XXX...	149,971	150,000		.1.A FE...
.58769F-AC-9...	MBART 2023-2 A3 - ABS...	.08/06/2025...	JP MORGAN SECURITIES INC...	XXX...	238,976	236,062	.858	.1.A FE...
1119999999 - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)					388,947	386,062	.858	XXX
Asset-Backed Securities - Non-Financial Asset-Backed Securities - Practical Expedient - Other Non-Financial Asset-Backed Securities - Practical Expedient (Unaffiliated)								
.26443U-AA-1...	DUK II A1 - ABS...	.09/23/2025...	RBC CAPITAL MARKETS...	XXX...	124,998	125,000		.1.A FE...
1539999999 - Asset-Backed Securities - Non-Financial Asset-Backed Securities - Practical Expedient - Other Non-Financial Asset-Backed Securities - Practical Expedient (Unaffiliated)					124,998	125,000	0	XXX
1889999999 - Subtotal - Asset-Backed Securities (Unaffiliated)					1,181,415	1,210,824	1,205	XXX
1909999997 - Subtotals - Asset-Backed Securities - Part 3					1,181,415	1,210,824	1,205	XXX
1909999999 - Subtotals - Asset-Backed Securities					1,181,415	1,210,824	1,205	XXX
2009999999 - Subtotals - Issuer Credit Obligations and Asset-Backed Securities					1,684,725	1,710,824	2,202	XXX
6009999999 Totals					1,684,725	XXX	2,202	XXX

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE D - PART 4

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

1 CUSIP Identifi- cation	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					15 Book/ Adjusted Carrying Value at Disposal Date	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Bond Interest/Stock Dividends Received During Year	20 Stated Contractual Maturity Date	21 NAIC Designation, NAIC Desig. Modifier and SVO Administrative Symbol
									10 Unrealized Valuation Increase/ (Decrease)	11 Current Year's (Amortization)/ Accretion	12 Current Year's Other-Than- Temporary Impairment Recognized	13 Total Change in B.A.C.V. (10+11-12)	14 Total Foreign Exchange Change in B.A.C.V.							
Issuer Credit Obligations - Single Entity Backed Obligations (Unaffiliated)																				
02376U-AA-3	AMERICAN AIRLINES 2016-1 PASS THROUGH TR...	07/15/2025.	Paydown.	XXX.	2,967	2,967	2,827	2,840	..127	..127	..127	..127	..2,967	..0	..0	..0	..106	.07/15/2029.	1.F FE	
0129999999 - Issuer Credit Obligations - Single Entity Backed Obligations (Unaffiliated)																				
0489999999 - Subtotal - Issuer Credit Obligations (Unaffiliated)					2,967	2,967	2,827	2,840	0	127	0	127	0	2,967	0	0	0	106	XXX	XXX
0509999997 - Subtotals - Issuer Credit Obligations - Part 4					2,967	2,967	2,827	2,840	0	127	0	127	0	2,967	0	0	0	106	XXX	XXX
0509999999 - Subtotals - Issuer Credit Obligations					2,967	2,967	2,827	2,840	0	127	0	127	0	2,967	0	0	0	106	XXX	XXX
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Guarantee (Exempt from RBC)																				
3622AD-RH-3	G2 787788 - RMBS	09/01/2025.	Paydown.	XXX.	10,278	10,278	9,875	..403	..403	..403	..403	..10,278	..0	..0	..0	..79	.07/20/2034.	..1.A		
36381A-QN-9	CMO/RMBS	09/01/2025.	Paydown.	XXX.	32,658	32,658	32,184	..32,188	..470	..470	..470	..32,658	..0	..0	..0	..766	.10/20/2038.	..1.A		
36383V-GV-4	CMO/RMBS	09/01/2025.	Paydown.	XXX.	21,543	21,542	21,583	..21,582	..(40)	..(40)	..(40)	..21,543	..0	..0	..0	..790	.01/20/2053.	..1.A		
36384U-SB-6	CMO/RMBS	09/01/2025.	Paydown.	XXX.	1,745	1,745	1,780	..1,780	..(35)	..(35)	..(35)	..1,745	..0	..0	..0	..44	.06/20/2035.	..1.A		
36385D-ZK-5	CMO/RMBS	09/01/2025.	Paydown.	XXX.	4,381	4,381	4,401	..4,401	..(20)	..(20)	..(20)	..4,381	..0	..0	..0	..73	.02/20/2036.	..1.A		
1019999999 - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Guaranteed (Exempt from RBC)					70,605	70,605	69,822	53,770	0	779	0	779	0	70,605	0	0	0	1,751	XXX	XXX
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Commercial Mortgage-Backed Securities - Guaranteed (Exempt from RBC)																				
383788-7F-0	GNR 2013-033 B - CMBS	09/01/2025.	Paydown.	XXX.	1,856	1,856	1,868	..1,859	..(2)	..(2)	..(2)	..1,856	..0	..0	..0	..28	.12/16/2042.	..1.A		
383788-E2-1	GNR 2012-114 A - CMBS	09/01/2025.	Paydown.	XXX.	12,235	12,235	10,654	..10,739	..1,496	..1,496	..1,496	..12,235	..0	..0	..0	..173	.01/16/2053.	..1.A		
38379R-19-8	GNR 2017-128 AC - CMBS	09/01/2025.	Paydown.	XXX.	33,297	33,297	29,780	..30,418	..2,879	..2,879	..2,879	..33,297	..0	..0	..0	..508	.05/16/2051.	..1.A		
38381D-8U-7	GNR 2021-183 AL - CMBS	09/01/2025.	Paydown.	XXX.	584	584	584	..584	..0	..0	..0	..584	..0	..0	..0	..5	.07/16/2056.	..1.A		
38381M-ZA-1	GNR 2025-128 AD - CMBS	09/01/2025.	Paydown.	XXX.	239	239	238	..238	..1	..1	..1	..239	..0	..0	..0	..1	.10/16/2056.	..1.A		
1029999999 - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Commercial Mortgage-Backed Securities - Guaranteed (Exempt from RBC)					48,211	48,211	43,124	43,599	0	4,374	0	4,374	0	48,211	0	0	0	715	XXX	XXX
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)																				
3136AV-ZW-2	FNR 2017-16 PM - CMO/RMBS	09/01/2025.	Paydown.	XXX.	6,882	6,882	7,052	..6,929	..(46)	..(46)	..(46)	..6,882	..0	..0	..0	..140	.05/25/2044.	..1.A		
3136BR-U2-1	FNR 2024-20 MV - CMO/RMBS	09/01/2025.	Paydown.	XXX.	1,833	1,833	1,801	..1,803	..31	..31	..31	..1,833	..0	..0	..0	..61	.05/25/2035.	..1.A		
3136BU-SD-3	FNR 2025-3 JV - CMO/RMBS	09/01/2025.	Paydown.	XXX.	4,266	4,266	4,337	..4,266	..(71)	..(71)	..(71)	..4,266	..0	..0	..0	..149	.12/25/2035.	..1.A		
3136BV-028 BV	CMO/RMBS	09/01/2025.	Paydown.	XXX.	3,627	3,627	3,656	..3,656	..(29)	..(29)	..(29)	..3,627	..0	..0	..0	..76	.12/25/2037.	..1.A		
3136BV-LG-1	CMO/RMBS	09/01/2025.	Paydown.	XXX.	3,627	3,627	3,656	..3,656	..(29)	..(29)	..(29)	..3,627	..0	..0	..0	..76	.12/25/2037.	..1.A		
3137BP-P2-9	FHR 4579 BA - CMO/RMBS	07/15/2025.	Paydown.	XXX.	766	766	780	..766	..0	..0	..0	..766	..0	..0	..0	..13	.01/15/2043.	..1.A		
3137HJ-AM-9	FHR 5500 EV - CMO/RMBS	09/01/2025.	Paydown.	XXX.	3,469	3,469	3,516	..3,516	..(47)	..(47)	..(47)	..3,469	..0	..0	..0	..95	.12/25/2035.	..1.A		
31418D-4J-8	FN MA4424 - RMBS	09/01/2025.	Paydown.	XXX.	7,440	7,440	6,959	..6,959	..468	..468	..468	..7,440	..0	..0	..0	..74	.09/01/2031.	..1.A		
31418F-H5-9	FN MA5651 - RMBS	09/01/2025.	Paydown.	XXX.	13,278	13,278	13,295	..13,295	..(18)	..(18)	..(18)	..13,278	..0	..0	..0	..343	.03/01/2040.	..1.A		
35564C-HX-8	CMO/RMBS	09/01/2025.	Paydown.	XXX.	2,148	2,148	2,203	..2,203	..2,188	..(40)	..(40)	..2,148	..0	..0	..0	..28	.04/26/2060.	..1.A		
35564C-JU-2	CMO/RMBS	09/01/2025.	Paydown.	XXX.	1,904	1,904	1,913	..1,910	..(6)	..(6)	..(6)	..1,904	..0	..0	..0	..25	.04/25/2061.	..1.A		
1039999999 - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)					45,613	45,613	45,510	20,567	0	242	0	242	0	45,613	0	0	0	1,007	XXX	XXX
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Commercial Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)																				
3136AS-4R-4	FNA 2016-M7 A2 - CMBS	09/01/2025.	Paydown.	XXX.	1,272	1,272	1,310	..1,284	..(12)	..(12)	..(12)	..1,272	..0	..0	..0	..23	.09/25/2026.	..1.A		
3136B4-KB-3	FNA 2019-M5 A2 - CMBS	09/01/2025.	Paydown.	XXX.	534	534	512	..513	..21	..21	..21	..534	..0	..0	..0	..12	.02/25/2029.	..1.A		
3136BQ-DE-6	FNA 2023-M6 A2 - CMBS	09/01/2025.	Paydown.	XXX.	56	56	54	..54	..2	..2	..2	..56	..0	..0	..0	..2	.07/25/2028.	..1.A		
3137BS-F6-5	FHMS K-S07 A2 - CMBS	09/25/2025.	Paydown.	XXX.	250,000	250,000	245,723	..245,723	..3,825	..3,825	..3,825	..250,000	..0	..0	..0	..5,128	.09/25/2025.	..1.A		
1049999999 - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Commercial Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)					251,862	251,862	247,599	1,852	0	3,836	0	3,836	0	251,862	0	0	0	5,165	XXX	XXX
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency Commercial Mortgage-Backed Securities (Unaffiliated)																				
06540L-AW-7	BANK 2021-BNK37 A1 - CMBS	09/01/2025.	Paydown.	XXX.	6,434	6,434	6,434	..6,434	..6,432	..6,432	..6,432	..6,432	..0	..0	..0	..51	.11/18/2064.	..1.A FE		
12636L-AY-6	CSAIL 2016-C5 A5 - CMBS	09/01/2025.	Paydown.	XXX.	65,526	65,526	70,369	..66,494	..(968)	..(968)	..(968)	..65,526	..0	..0	..0	..1,661	.11/18/2048.	..1.A FE		
46590M-AQ-3	JPMC 2016-JP2 A3 - CMBS	09/01/2025.	Paydown.	XXX.	11,057	11,057	10,497	..10,717	..340	..340	..340	..11,057	..0	..0	..0	..204	.08/17/2049.	..1.A FE		
46590R-AD-1	JPMC 2016-JP3 A4 - CMBS	09/01/2025																		

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE D - PART 4

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

1 CUSIP Identification	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					15 Book/ Adjusted Carrying Value at Disposal Date	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Bond Interest/Stock Dividends Received During Year	20 Stated Contractual Maturity Date	21 NAIC Designation, NAIC Desig. Modifier and SVO Administrative Symbol				
									10 Unrealized Valuation Increase/ (Decrease)	11 Current Year's (Amortization)/ Accretion	12 Current Year's Other-Than- Temporary Impairment Recognized	13 Total Change in B.A.C.V. (10+11-12)	14 Total Foreign Exchange Change in B.A.C.V.											
Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)																								
126600-AC-1	CNH 2022-A A3 - ABS	09/15/2025	Paydown	XXX	5,352	5,352	5,351	5,352	0	0	0	0	0	0	0	0	0	0	106	.07/15/2027	1.A FE			
14318M-AD-1	CARMX 2022-3 A3 - ABS	09/15/2025	Paydown	XXX	12,860	12,860	12,583	12,743	.118	.118	.118	.118	12,860	0	0	0	0	0	340	.04/15/2027	1.A FE			
14318U-AD-3	CARMX 2022-4 A3 - ABS	09/15/2025	Paydown	XXX	21,013	21,013	21,118	21,116	(103)	(103)	(103)	(103)	21,013	0	0	0	0	0	749	.08/16/2027	1.A FE			
26444B-AA-2	DUK A A1 - ABS	07/01/2025	Paydown	XXX	7,862	7,862	7,862	7,862	0	0	0	0	7,862	0	0	0	0	0	102	.07/01/2028	1.A FE			
34528Q-HQ-0	FORDF 2020-2 A - ABS	09/15/2025	Various	XXX	100,000	100,000	98,516	99,717	.283	.283	.283	.283	100,000	0	0	0	0	0	795	.09/15/2027	1.A FE			
58769F-AC-9	MBART 2023-2 A3 - ABS	09/15/2025	Paydown	XXX	27,982	27,982	28,327	28,327	(345)	(345)	(345)	(345)	27,982	0	0	0	0	0	204	.11/15/2028	1.A FE			
71710T-AA-6	PCG 2021-A A1 - ABS	07/15/2025	Paydown	XXX	5,290	5,290	5,290	5,290	0	0	0	0	5,290	0	0	0	0	0	.77	.07/15/2033	1.A FE			
80287D-AC-1	SDART 2023-6 A3 - ABS	09/15/2025	Paydown	XXX	58,746	58,746	59,443	59,420	(674)	(674)	(674)	(674)	58,746	0	0	0	0	0	2,320	.07/17/2028	1.A FE			
87166P-AH-4	SYNIT 2022-2 A - ABS	07/15/2025	Various	XXX	200,000	200,000	198,688	198,688	.992	.992	.992	.992	200,000	0	0	0	0	0	4,503	.07/17/2028	1.A FE			
1119999999 - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)									439,105	439,105	437,178	211,500	0	270	0	270	0	439,105	0	0	0	9,197	XXX	XXX
1889999999 - Subtotal - Asset-Backed Securities (Unaffiliated)									947,235	947,235	938,813	423,381	0	9,247	0	9,247	0	947,235	0	0	0	19,905	XXX	XXX
1909999997 - Subtotals - Asset-Backed Securities - Part 4									947,235	947,235	938,813	423,381	0	9,247	0	9,247	0	947,235	0	0	0	19,905	XXX	XXX
1909999999 - Subtotals - Asset-Backed Securities									947,235	947,235	938,813	423,381	0	9,247	0	9,247	0	947,235	0	0	0	19,905	XXX	XXX
2009999999 - Subtotals - Issuer Credit Obligations and Asset-Backed Securities									950,202	950,202	941,640	426,221	0	9,374	0	9,374	0	950,202	0	0	0	20,011	XXX	XXX
6009999999 Totals									950,202	XXX	941,640	426,221	0	9,374	0	9,374	0	950,202	0	0	0	20,011	XXX	XXX

E05.1

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DB - Part E

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Restricted Asset Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Open Depositories								
Marjeta Claims Fund.....Columbus, OH.....					589,488	1,330,651	1,018,757	XXX
Fifth Third Bank - Operating.....Columbus, OH.....					1,307,367	1,387,848	8,387,878	XXX
Fifth Third Bank - Premium.....Columbus, OH.....					354,913	533,613	1,480,332	XXX
Fifth Third Bank - Claims.....Columbus, OH.....					883,253	618,611	(19,487)	XXX
0199998 Deposits in depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories	XXX	XXX						XXX
0199999 Total Open Depositories	XXX	XXX	0	0	3,135,022	3,870,723	10,867,480	XXX
0399999 Total Cash on Deposit	XXX	XXX	0	0	3,135,022	3,870,723	10,867,480	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999 Total	XXX	XXX	0	0	3,135,022	3,870,723	10,867,480	XXX

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Sidecar Health Insurance Company

SCHEDULE E - PART 2 - CASH EQUIVALENTS

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