ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company **PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION**

ANNUAL STATEMENT

For the Year Ended December 31, 2020 of the Condition and Affairs of the

Falls Lake National Insurance Company

NAIC Group Code 3494, 34 (Current Period) (Prior Pe		any Code 31925	Employer's ID Number 42-1019055
Organized under the Laws of OH	State of Don	nicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized February 6,	1974	Commenced Business February	21, 1974
Statutory Home Office	52 East Gay Street Columb (Street and Number) (City or T	ous OH US 43215 ïown, State, Country and Zip Code)	
Main Administrative Office		te 306 Raleigh NC US 27609 [;] own, State, Country and Zip Code)	919-882-3500 (Area Code) (Telephone Number)
Mail Address	6131 Falls of Neuse Rd., Sui (Street and Number or P. O. Box)	te 306 Raleigh NC US 27609 (City or Town, State, Country and Zip Code)	
Primary Location of Books and Record		te 306 Raleigh NC US 27609 [;] own, State, Country and Zip Code)	919-882-3500 (Area Code) (Telephone Number)
Internet Web Site Address	www.fallslakeins.com		
Statutory Statement Contact	Timothy Sean MacAleese (Name)		(804) 281-2683 (Area Code) (Telephone Number) (Extension)
	accounting@fallslakeins.com (E-Mail Address)	1	888-698-7290 (Fax Number)
	OF	FICERS	
Name	Title	Name	Title
	President/CEO SVP/Chief Financial Officer	 Eric Forest Liland Daniel Arthur Shultis 	Secretary/Chief Actuary Treasurer/Controller
3. Timothy Sean MacAleese			Treasurer/Controller
Crark Crark Draw			O) (D/Objet Object Officer
5	Chairperson of the Board Assistant Secretary	Courtney Gray Warren	SVP/Chief Claims Officer

DIRECTORS OR TRUSTEES

Michael Edward Crow

Courtenay Gray Warren

Sarah Casey Doran Timothy Sean MacAleese Terence Michael McCafferty Thomas Edward Peach

rty Michael

State of..... North Carolina County of.... Wake

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

	(Signature) Terence Michael McCafferty	(Signature) Eric Forest Liland			nature) an MacAleese	
	1. (Printed Name)	2. (Printed Name)		3. (Prin	ted Name)	
	President/CEO	Secretary/Chief Actuary		SVP/Chief F	inancial Officer	
	(Title)		(Title)		Τ)	Title)
Subscribed ar	nd sworn to before me		a. Is this a	n original filing?		Yes [X] No []
This	day of	2021	b. If no	1. State the amend	Iment number	
				2. Date filed		
				3. Number of page:	s attached	

	AS	SETS			
		1	Current Year	3	Prior Year 4
		1	2	3 Net Admitted Assets	4 Net Admitted
		Assets	Nonadmitted Assets		Assets
1.	Bonds (Schedule D)	4,357,015	0	4,357,015	5, 140, 171
2.	Stocks (Schedule D):				
	2.1 Preferred stocks				
	2.2 Common stocks		0	94,354,687	
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens				0
	3.2 Other than first liens	0	0	0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0				
	encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less				
	\$	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5.	Cash (\$21, 159,711 , Schedule E - Part 1), cash equivalents				
	(\$3,967,665 , Schedule E - Part 2) and short-term				
	investments (\$				
6.	Contract loans (including \$				0
7.	Derivatives (Schedule DB)				0
8.	Other invested assets (Schedule BA)				0
9.	Receivable for securities				0
10.	Securities lending reinvested collateral assets (Schedule DL)				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)		0	124,304,471 .	
	Title plants less \$0 charged off (for Title insurers				
	only)				
14.	Investment income due and accrued		0		
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection.		2,727,795		
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$0	5 050 507	0.040	5 0 45 700	44,000,050
	earned but unbilled premiums)	5,952,587		5,945,738	
	15.3 Accrued retrospective premiums (\$0) and				
	contracts subject to redetermination (\$0)	0	0	0 .	0
16.	Reinsurance:	04 040 500		01 010 500	00 500 050
	16.1 Amounts recoverable from reinsurers			21,010,509 	
	16.2 Funds held by or deposited with reinsured companies				
47	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
	Guaranty funds receivable or on deposit				
19. 20	Electronic data processing equipment and software				0
20.	Furniture and equipment, including health care delivery assets	0	0		0
21.	(\$0)	0	0	0	0
22.	(*				0
22.	Receivables from parent, subsidiaries and affiliates				
	Health care (\$0) and other amounts receivable				
24. 25.	Aggregate write-ins for other than invested assets				
	Total assets excluding Separate Accounts, Segregated Accounts and	20,000			
20.	Protected Cell Accounts (Lines 12 to 25)		3,069,748		
27.	From Separate Accounts, Segregated Accounts and Protected Cell	_			_
	Accounts				
28.	Total (Lines 26 and 27)	569,081,008	3,069,748	566,011,260	500,096,240
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page			0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	-	0	0
	Other assets	,	,	,	
	Miscellaneous receivable	0		0 .	
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	20,603	10,000	10,603	13,051

ASSETS

LIABILITIES, SURPLUS AND OTHER FUNDS

	LIADILITIES, SURPLUS AND UTTER FU		2
		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)		
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)		
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		1,672,094
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$		
7.2	Net deferred tax liability		0
8.	Borrowed money \$		0
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of		
	\$144,772,309 and including warranty reserves of \$		
	health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health		
	Service Act)	7, 190,675	
10.	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		0
	11.2 Policyholders		0
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
	Amounts withheld or retained by company for account of others		
	Remittances and items not allocated		0
	Provision for reinsurance (including \$		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		0
	Drafts outstanding		0
	Payable to parent, subsidiaries and affiliates		
	Derivatives		.0
	Payable for securities		0
	Payable for securities lending		0
	Liability for amounts held under uninsured plans		0
	Capital notes \$0 and interest thereon \$0		0
	Aggregate write-ins for liabilities		1,898,003
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		400.872.014
27.	Protected cell liabilities	0	0
	Total liabilities (Lines 26 and 27)	451,979,468	400.872.014
	Aggregate write-ins for special surplus funds		0
	Common capital stock		
	Preferred capital stock		0
	Aggregate write-ins for other than special surplus funds		
	Surplus notes		.0
	Gross paid in and contributed surplus		
	Unassigned funds (surplus)		
	Less treasury stock, at cost:	51,270,211	10, 100, 010
	36.1	0	0
	36.2		
	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)		99,224,226
		566,011,260	500,096,240
38.	TOTALS (Page 2, Line 28, Col. 3) DETAILS OF WRITE-INS	000,011,200	000,000,240
2504		105 000	170 740
	Deferred service fees		
	Funds held deposit		
	Policyholder deposits		0
	Summary of remaining write-ins for Line 25 from overflow page		
	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	6,368,796	1,898,003
2901.			
		_	
	Summary of remaining write-ins for Line 29 from overflow page		0
	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0
3201.			
	Summary of remaining write-ins for Line 32 from overflow page		0
3299.	Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)	0	0

STATEMENT OF INCOME

		1 Current Year	2 Prior Year
1.	UNDERWRITING INCOME Premiums earned (Part 1, Line 35, Column 4)		
2.	DEDUCTIONS: Losses incurred (Part 2, Line 35, Column 7)	5 070 168	4,756,656
2. 3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		1,876,475
5.	Aggregate write-ins for underwriting deductions	,	0
6.	Total underwriting deductions (Lines 2 through 5)	9,009,444	10,308,870
7.	Net income of protected cells		0
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7)	4,620,641	
	INVESTMENT INCOME		
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)		
10.	Net realized capital gains or (losses) less capital gains tax of \$		
	Gains (Losses))		104,724
11.	Net investment gain (loss) (Lines 9 + 10)		
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered	(00.704)	(7.004)
40	\$		
13. 14.	Finance and service charges not included in premiums	2,057,183 328,770	
14. 15.	Total other income (Lines 12 through 14)	2,362,169	(1,560,450) 395.015
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes	2,302,109	393,013
10.	(Lines 8 + 11 + 15)		
17.	Dividends to policyholders	0	0
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes	7 000 700	4 000 000
40	(Line 16 minus Line 17)		
19. 00	Federal and foreign income taxes incurred	1,580,054	337,427
20.	Net income (Line 18 minus Line 19)(to Line 22)	5,453,652	1,042,876
21	CAPITAL AND SURPLUS ACCOUNT Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	00 004 006	04 021 494
21. 22.	Net income (from Line 20)		
23.	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$2,915		4,332,542
25.	Change in net unrealized foreign exchange capital gain (loss)		
26.	Change in net deferred income tax		
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29.	Change in surplus notes	0	0
30.	Surplus (contributed to) withdrawn from protected cells	0	0
31.	Cumulative effect of changes in accounting principles	0	0
32.	Capital changes:		
	32.1 Paid in	0	0
	32.2 Transferred from surplus (Stock Dividend)		0
	32.3 Transferred to surplus	0	0
33.	Surplus adjustments:		0
	33.1 Paid in		0
	33.2 Transferred to capital (Stock Dividend)		0 0
34.	33.3 Transferred from capital		0
35.	Dividends to stockholders		0
36.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		0
37.	Aggregate write-ins for gains and losses in surplus	0	0
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	14,807,566	5,192,742
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	114,031,792	99,224,226
	DETAILS OF WRITE-INS		
0501.			
0502.			
0503.			
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0
0599.	Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above)	0	0
1401.	Miscellaneous fees		
1402.	Fronting fee income		
1403.	Summary of remaining write-ins for Line 14 from overflow page		0
1498.			(1,560,450)
1498. 1499.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	328,770	(1,000,400)
1498. 1499. 3701.		328,770	(1,000,400)
1498. 1499. 3701. 3702.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	,	(1,000,400)
1498. 1499. 3701.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)		

CASH FLOW

		1	2
		Current Year	Prior Year
	Cash from Operations	Current real	FIIOI Teal
1	Premiums collected net of reinsurance	8 505 070	
2.	Net investment income		
2. 3.			395,013
3. 4.	Miscellaneous income		(836,231)
	Total (Lines 1 through 3)	, , ,	
5.	Benefit and loss related payments		
6. -	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0
7.	Commissions, expenses paid and aggregate write-ins for deductions		
8.	Dividends paid to policyholders		0
9.	Federal and foreign income taxes paid (recovered) net of \$		113,723
10.	Total (Lines 5 through 9)		49,264,252
11.	Net cash from operations (Line 4 minus Line 10)	(26,695,554)	(50,100,484)
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:	0.000.001	0,000,050
	12.1 Bonds		
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	3,591,381	9,523,272
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds		
	13.2 Stocks		
	13.3 Mortgage loans	0	0
	13.4 Real estate		0
	13.5 Other invested assets		0
	13.6 Miscellaneous applications		0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	2,645,385	3,331,566
14.	Net increase (decrease) in contract loans and premium notes		0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)		6,191,706
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)		47,208,030
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	39,362,869	47,208,030
	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)	13,613,311	3,299,253
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year		
	19.2 End of period (Line 18 plus Line 19.1)	25,377,369	11,764,058
Viat- C			
vote: S	upplemental disclosures of cash flow information for non-cash transactions:		

UNDERWRITING AND INVESTMENT EXHIBIT

		1	2 Unearned Premiums	3 Unearned Premiums	4
	Line of Business	Net Premiums Written per Column 6, Part 1B	Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	Dec. 31 Current Year - per Col. 5 Part 1A	Premiums Earned During Year (Cols. 1 + 2 - 3)
1.	Fire				
	Allied lines				
	Farmowners multiple peril				
	Homeowners multiple peril				
	Commercial multiple peril				
	Mortgage guaranty				
8.	Ocean marine		0	0	
9.	Inland marine		3,786	8,634	
10.	Financial guaranty	0	0	0	C
11.1	Medical professional liability - occurrence		4,586		
11.2	Medical professional liability - claims-made		151,965		
12.	Earthquake			11,368	
13.	Group accident and health		0	0	
14.	Credit accident and health (group and individual)	0	0	0	
	Other accident and health				
	Workers' compensation				
	Other liability - occurrence				
	Other liability - claims-made				
17.3	Excess workers' compensation				
	Products liability - occurrence				
	Products liability - claims-made				
19.1, 19.2	Private passenger auto liability		63,680	41,846	
19.3, 19.4	Commercial auto liability		105,260	147,706	
21.	Auto physical damage		13,316		
22.	Aircraft (all perils)		0		
23.	Fidelity	0	0	0	
24.	Surety	0	0	0	
26.	Burglary and theft		(647)		
27.	Boiler and machinery		21	24	
28.	Credit	0	0	0	
29.	International	0	0	0	
	Warranty			0	
31.	Reinsurance - nonproportional assumed property			0	(
32.	Reinsurance - nonproportional assumed liability				
	Reinsurance - nonproportional assumed financial lines				ſ
			0	0	
	Aggregate write-ins for other lines of business				40,000,000
35.		14,851,437	5,969,323	7,190,675	13,630,085
0464	DETAILS OF WRITE-INS				
3401.					
3402.					
3403.					
3498.	Summary of remaining write-ins for Line 34 from overflow page		0	0	

UNDERWRITING AND INVESTMENT EXHIBIT

			Amount Unearned		Reserve for Rate Credits and	
	Line of Business	Amount Unearned (Running One Year or Less from Date of Policy) (a)	(Running More Than One Year from Date of Policy) (a)	Earned But Unbilled Premium	Retrospective Adjustments Based on Experience	Total Reserve for Unearned Premium Cols. 1 + 2 + 3 + 4
1.	Fire		215	0	0	
2.	Allied lines			0	0	
3.	Farmowners multiple peril	0	0	0	0	
4.	Homeowners multiple peril	0	0	0	0	
5.	Commercial multiple peril	1,157	0	0	0	1 , 15
6.	Mortgage guaranty	0	0	0	0	
8.	Ocean marine	0	0	0	0	
9.	Inland marine				0	
10.	Financial guaranty	0	0	0	0	
11.1	Medical professional liability - occurrence		0	0	0	
11.2	Medical professional liability - claims-made		140	0	0	
12.	Earthquake				0	
	Group accident and health				0	
14.	Credit accident and health (group and individual)			0	0	
15.	Other accident and health	0	0	0	0	
16.	Workers' compensation		0		0	
17.1	Other liability - occurrence				0	
17.2	Other liability - claims-made				0	
	Excess workers' compensation				0	
	Products liability - occurrence			0		
	Products liability - claims-made			0	0	
	Private passenger auto liability			0	0	
	Commercial auto liability				0	
21.	Auto physical damage					
22.	Aircraft (all perils)					
	Fidelity				0	
	Surety		0	0	0	
	Burglary and theft				.0	
	Boiler and machinery		0		0	
27.	Credit	24	0	0	0	
20. 29.	International	0	0	0	0	
		0	0	0	0	
30. 31.	Warranty Reinsurance - nonproportional assumed property		0	0	0	
32.	Reinsurance - nonproportional assumed liability	0	0	0	0	
33.	Reinsurance - nonproportional assumed financial lines					
34.	Aggregate write-ins for other lines of business	0	0	0	0	
35.	TOTALS	6,559,159	631,516	0	0	7,190,6
36.	Accrued retrospective premiums based on expe	1	,			
37.	Earned but unbilled premiums					
38.	Balance (Sum of Line 35 through 37)					7,190,6
00.	DETAILS OF WRITE-INS					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
3401.						
3401. 3402.						
3403. 3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	Λ	 0	
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line	0				

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company UNDERWRITING AND INVESTMENT EXHIBIT

ERWRITIN	IG AND	INVESI	WENI	E
F	PART 1B - PRF	MIUMS WRITTE	=N	

			RT 1B - PREMIUN		D		
		1	Reinsurance AssumedReinsur234			ice Ceded 5	6 Net Premiums
	Line of Business	Direct Business (a)	From Affiliates	From Non-Affiliates	To Affiliates	To Non-Affiliates	Written Cols. 1+2+3-4-5
1.	Fire						
2.	Allied lines				, , , ,		
3.	Farmowners multiple peril						
	Homeowners multiple peril						0
4.							
5.	Commercial multiple peril						
6.	Mortgage guaranty						
8.	Ocean marine						
9.	Inland marine						
10.	Financial guaranty	0	0	0	0	0	0
11.1	Medical professional liability - occurrence	0	14,878	0		0	1,488
11.2	Medical professional liability - claims-made						
12.	Earthquake						
13.	Group accident and health	0	0	0	0	0	0
14.	Credit accident and health (group and individual)					0	0
15.	Other accident and health	0	0	0	0	0	0
16.	Workers' compensation	12,756,618					1,262,558
17.1	Other liability - occurrence			0			9,075,914
17.2	Other liability - claims-made		8,524,950	0	7,673,419		
17.3	Excess workers' compensation	0	0	0	0	0	C
18.1	Products liability - occurrence	0		0		0	2,133,800
18.2	Products liability - claims-made			0	5, 109, 173		
19.1, 19.2	Private passenger auto liability		0	0	5,470,898		
19.3, 19.4	Commercial auto liability						
21.	Auto physical damage			0			
22.	Aircraft (all perils)						
23.	Fidelity		0		0	0	
24.	Surety				0	0	(
26.	Burglary and theft						3.556
27.	Boiler and machinery		5,896			1,783,820	
28.	Credit		0,000		.0		
29.	International		0				
30.	Warranty		0				
30. 31.	Reinsurance - nonproportional assumed property					0	
32.	Reinsurance - nonproportional assumed liability						
33.	Reinsurance - nonproportional assumed financial lines						
34.	Aggregate write-ins for other lines of business		0	0	0	0	(
35.	TOTALS	183,964,023	141,640,952	939,203	149,514,518	162,178,223	14,851,43
	DETAILS OF WRITE-INS		, 510,002		,,		,
3401.							
3402.							
3403.							
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	(
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	(

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

If yes: 1. The amount of such installment premiums \$2,935,099

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

			Losses Paid Losses Paid Le			5	6	7	8
		1	2	3	4		0	1	Percentage of
			-	°					Losses Incurred
						Net Losses Unpaid		Losses Incurred	(Col. 7, Part 2) to
			Reinsurance	Reinsurance	Net Payments	Current Year	Net Losses Unpaid	Current Year	Premiums Earned
	Line of Business	Direct Business	Assumed	Recovered	(Cols. 1 + 2 -3)	(Part 2A , Col. 8)	Prior Year	(Cols. 4 + 5 - 6)	(Col. 4, Part 1)
1.	Fire			1,384,931					
2.	Allied lines	1,414,661							
3.	Farmowners multiple peril	0	0	0	0	0	0	0	0.0
4.	Homeowners multiple peril	0	0	0	0	0	0	0	0.0
5.	Commercial multiple peril						(16,681)		
6.	Mortgage guaranty	0	0	0	0	0	0	0	0.0
8.	Ocean marine	0	0	0	0	0	0	0	0.0
9.	Inland marine		0						
10.	Financial guaranty	0	0	0	0	0	0	0	0.0
11.1	Medical professional liability - occurrence	0							
11.2	Medical professional liability - claims-made	0		1,929,922					
12.	Earthquake	0	0	0	0	0		(3,410)	
13.	Group accident and health		0	0	0	0	0	0	
14.	Credit accident and health (group and individual)	0	0	0	0	0	0	0	0.0
15.	Other accident and health			.0	0	0	0	.0	0.0
16.	Workers' compensation				.620,463	1,766,532	1,840,281	.546,714	
17.1	Other liability - occurrence	1,347,490		14,949,403	1,515,168				
17.2	Other liability - claims-made			1,029,345			.558,329		
17.3	Excess workers' compensation	0	0	0	0	0	0	0	0.0
18.1	Products liability - occurrence	0	4,827,008	4,344,307		3,058,509	2,996,687	.544,523	
18.2	Products liability - claims-made	0				129,685	153,229	(11, 182)	
19.1, 19.2	Private passenger auto liability	.9,528,496	0			130,214			
	Commercial auto liability			19,427,589	176,422	453, 152	461,736	167,838	83.9
21.	Auto physical damage		3.036				(1.246)	.48,141	
22.	Aircraft (all perils)		0			6.144	0	6.429	42.0
23.	Fidelity	0	0	0	0	0	0	0	0.0
24.	Surety	0	0	0	0	0	0	0	0.0
26.	Burglary and theft		0	.52,869	269	116	(137)	522	
20.	Boiler and machinery	6,579		6,579				81	
28.	Credit	222.070			۰ ۱	2.301	0	.2.301	
29.	International		0	0 0	0		0	,001	0.0
30.	Warranty	0	0	0		0	0	0	0.0
31.	Reinsurance - nonproportional assumed property	XXX		0	0 N	0	0	0	
32.	Reinsurance - nonproportional assumed property	XXX		0	0 N	0	0	0	
33.	Reinsurance - nonproportional assumed financial lines	XXX		0	0 N	0	0	0 N	0.0
33. 34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0.0
34. 35.	TOTALS	53.527.993	29.929.804	80,267,295	3,190,502	16,193,303	14,313,637	5.070.168	37.2
	DETAILS OF WRITE-INS	55,527,995	23,323,004	00,207,290	5, 150, 302	10, 190, 303	14,010,007	5,070,100	37.2
2401	DETAILS OF WRITE-INS								
3401.									
3402.									
3403.		~	^	^	0	^	^	^	^ ^
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0.0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

			Reported	Losses		Incurred But Not Reported		8	9	
		1	2	3	4	5	6	7		
	Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire									
2.	Allied lines							1,313,345		
3.	Farmowners multiple peril		0	0	0		0	0	0	C
4.	Homeowners multiple peril		0	0	0		0	0	0	C
5.	Commercial multiple peril			9,211,328						
6.	Mortgage guaranty		0	0	0	0	0	0	0	C
8.	Ocean marine		0	0	0		0	0	0	C
9.	Inland marine		0						1,510	
10.	Financial guaranty		0	0	0		0	0	0	C
11.1	Medical professional liability - occurrence									
11.2	Medical professional liability - claims-made		5, 105, 252	4,594,727			1,873,278			
12.	Earthquake		0	0	0		0	0		C
13.	Group accident and health		0	0	0		0		(a)0	C
14.	Credit accident and health (group and individual)		0	0	0	0	0	0	······	C
15.	Other accident and health		0	0	0	0	0		(a)0	C
16.	Workers' compensation		8,081,706			9, 161,937			1,766,532	
17.1	Other liability - occurrence				2,898,761				9,250,288	4,939,001
17.2	Other liability - claims-made		1,855,687	1,680,118				3, 105, 788		
17.3	Excess workers' compensation		0	0	0	0	0	0	0	C
18.1	Products liability - occurrence		7,649,425	6,909,483					3,058,509	
18.2	Products liability - claims-made						1,103,085			
19.1, 19.2	Private passenger auto liability		0	7,920,227			0			
19.3, 19.4	Commercial auto liability		1,645,601				1,410,885			
21.	Auto physical damage			1, 141,838						
22.	Aircraft (all perils)		0		0	1,649,085	0	1,642,941	6,144	
23.	Fidelity		0	0	0	0	0	0	0	C
24.	Surety		0	0	0		0	0	0	C
26.	Burglary and theft						71			5
27.	Boiler and machinery		0							C
28.	Credit		0						2,301	
29.	International		0	0	0		0	0	0	C
30.	Warranty		0	0	0	0	0	0	0	C
31.	Reinsurance - nonproportional assumed property	XXX	0	0	0	XXX	0	0	0	C
32.	Reinsurance - nonproportional assumed liability	XXX	0	0	0	XXX	0	0	0	C
33.	Reinsurance - nonproportional assumed financial lines	XXX	0	0	0	XXX	0	0	0	C
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	0
35.	TOTALS	61,270,986	53,882,478	109,605,165	5,548,299	110,539,048	104,168,471	204,062,515	16,193,303	9,180,233
	DETAILS OF WRITE-INS									
3401.										
3402.										
3403.										
3498.	Summary of remaining write-ins for Line 34 from overflow page		0	0	0	0	0	0	0	C
	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	•	0	0	0	C

UNDERWRITING AND INVESTMENT EXHIBIT

		- EXPENSES 1	2	3	4
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1.	Claim adjustment services:	2.0000	Liponoco		
	1.1 Direct		0	0	
	1.2 Reinsurance assumed		0	0	
	1.3 Reinsurance ceded	10,805,843	0	0	10,805,843
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	1,439,829	0	0	
2.	Commission and brokerage:				
	2.1 Direct excluding contingent	0		0	
	2.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent			0	
	2.4 Contingent - direct			0	
	2.5 Contingent - reinsurance assumed			0	(
	2.6 Contingent - reinsurance ceded			0	
	2.7 Policy and membership fees		0	0	C
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)		(6,791,803)	0	
3.	Allowances to managers and agents			0	
4.	Advertising			0	
5.	Boards, bureaus and associations			0	1,348,344
6.	Surveys and underwriting reports				
7.	Audit of assureds' records			0	. ,
8.	Salary and related items:		,,		,
0.	8.1 Salaries	1,202,280		0	
	8.2 Payroll taxes			0	
9.	Employee relations and welfare				
10.	Insurance				
11.	Directors' fees		, ,	0	
12.	Travel and travel items			0	
13.	Rent and rent items		, ,	0	
14.	Equipment		,	0	
15.	Cost or depreciation of EDP equipment and software				
16.	Printing and stationery				
17.	Postage, telephone and telegraph, exchange and express			0	
18.	Legal and auditing	33,989	109,119	0	143,108
10.	Totals (Lines 3 to 18)			÷	
20.	Taxes, licenses and fees:	1,000,170			
20.	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$	0	1 160 615	0	1 160 615
	20.2 Insurance department licenses and fees				
	20.3 Gross guaranty association assessments			0	
	20.4 All other (excluding federal and foreign income and real estate)		76,140	0	80,080
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
04	Real estate expenses			0	
21.	Real estate taxes				
22.				0	
23.	Reimbursements by uninsured plans Aggregate write-ins for miscellaneous expenses			0	
24.					
25.	Total expenses incurred			,	(a)4,043,635
26.	Less unpaid expenses - current year				
27.	Add unpaid expenses - prior year				
28.	Amounts receivable relating to uninsured plans, prior year			0	
29.	Amounts receivable relating to uninsured plans, current year	0	0	0	(
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	3,063,635	(2,033,793)	104,495	1,134,337
	DETAILS OF WRITE-INS				
2401.	Claims Search fees				
2402.	Shared Reimbursements			0	(19,829
2403.	Other	,			
2498.	Summary of remaining write-ins for Line 24 from overflow page	(97,604)			
2499.	Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)	(95,959)	311,172	104,359	319,572

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company EXHIBIT OF NET INVESTMENT INCOME

		1		2
		Collected Du	ring Year	Earned During Yea
1.	U.S. Government bonds			
1.1	Bonds exempt from U.S. tax	(a)	69,510	
1.2	Other bonds (unaffiliated)	(a)		
1.3	Bonds of affiliates	(a)	0	
2.1	Preferred stocks (unaffiliated)	(b)	14,939	
2.11	Preferred stocks of affiliates	(b)		
2.2	Common stocks (unaffiliated)		0	
2.21	Common stocks of affiliates			
3.	Mortgage loans	(c)		
4.	Real estate	(d)	0	
5	Contract loans		0	
6	Cash, cash equivalents and short-term investments	(e)	15,743	
7	Derivative instruments	(f)	0	
8.	Other invested assets		0	
9.	Aggregate write-ins for investment income		4,717	4,71
10.	Total gross investment income		159,841	158,38
11.	Investment expenses			(g)104,35
12.	Investment taxes, licenses and fees, excluding federal income taxes			(g)
13.	Interest expense			(h)
14.	Depreciation on real estate and other invested assets			(i)
15.	Aggregate write-ins for deductions from investment income			
16.	Total deductions (Lines 11 through 15)			
17.	Net investment income (Line 10 minus Line 16)			54,02
1	DETAILS OF WRITE-INS			
0901.	MIsc Income		4,717	
0902.			, 	· · · · · · · · · · · · · · · · · · ·
0903.				
0998.	Summary of remaining write-ins for Line 9 from overflow page			
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)		4,717	4,71
1501.			,	,
1502.				
1503.				
1598.	Summary of remaining write-ins for Line 15 from overflow page			
1599.	Totals (Lines 1501 htru 1503 plus 1598) (Line 15, above)			
				1

(a) Includes \$.5,954 paid for accrued interest on purchases.
(b) Includes \$0 accrual of discount less \$0 amortization of premium and less \$	0 paid for accrued dividends on purchases.
(c) Includes \$0 accrual of discount less \$0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(d) Includes \$0 for company's occupancy of its own buildings; and excludes \$0 interest or	n encumbrances.
(e) Includes \$.3,687 paid for accrued interest on purchases.
(f) Includes \$	
(g) Includes \$0 investment expenses and \$0 investment taxes, licenses and fees, excludir segregated and Separate Accounts.	ng federal income taxes, attributable to
(h) Includes \$	
(i) Includes \$	

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1				
		1	2	3	4	5
				Total Realized Capital		Change in Unrealized
		Realized Gain (Loss)	Other Realized	Gain (Loss)	Unrealized Capital	Foreign Exchange
		On Sales or Maturity	Adjustments	(Columns 1 + 2)	Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds	(1,233)	0	(1,233)	0	0
1.1	Bonds exempt from U.S. tax	0	0	0	0	0
1.2	Other bonds (unaffiliated)	0	0	0	0	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	(2,730)	0	(2,730)		0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated) Common stocks of affiliates	0	0	0	0	0
2.21			0	0		0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0	0	0
5.	Contract loans	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments	0	0	0	0	0
7.	Derivative instruments	0	0	0	0	0
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	(3,963)	0	(3,963)	10,799,898	0
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company EXHIBIT OF NON-ADMITTED ASSETS

		1	2	3
		Current Year Total	Prior Year Total	Change in Total Nonadmitted Assets
		Nonadmitted Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks		0	0
	2.2 Common stocks	0	0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	0	0	0
	3.2 Other than first liens	0	0	0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company	0	0	0
	4.2 Properties held for the production of income	0	0	0
	4.3 Properties held for sale		0	0
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)	0	0	0
6.	Contract loans	0	0	0
7.	Derivatives (Schedule DB)	0	0	0
8.	Other invested assets (Schedule BA)	0	0	0
9.	Receivables for securities		0	0
10.	Securities lending reinvested collateral assets (Schedule DL)			0
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			0
13.	Title plants (for Title insurers only)			0
14.	Investment income due and accrued		0	0
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	2.727.795	607.224	(2,120,571)
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .			
	15.3 Accrued retrospective premiums and contracts subject to redetermination		0	0
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers	0	0	0
	16.2 Funds held by or deposited with reinsured companies			
	16.3 Other amounts receivable under reinsurance contracts			
17	Amounts receivable relating to uninsured plans			
	Current federal and foreign income tax recoverable and interest thereon		0	
	Net deferred tax asset			
	Guaranty funds receivable or on deposit			
19. 00				0
20.	Electronic data processing equipment and software		0	0
21.	Furniture and equipment, including health care delivery assets		0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates		0	0
23.	Receivables from parent, subsidiaries and affiliates		0	0
24.	Health care and other amounts receivable		0	0
25.	Aggregate write-ins for other than invested assets			0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28.	Total (Lines 26 and 27)	3,069,748	981,358	(2,088,390)
	DETAILS OF WRITE-INS			
1101.				
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501.	Other assets			0
2502.				
2503.				
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	10,000	10,000	0

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Falls Lake National Insurance Company ("the Company") are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for purposes of determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners ("NAIC") *Accounting Practices and Procedures Manual* has been adopted as a component of prescribed or permitted practices by the state of Ohio.

The accompanying financial statements contain no differences as a result of practices prescribed or permitted by Ohio that differ from the NAIC's Accounting Practices and Procedures Manual as noted in the table below:

	SSAP #	F/S Page	F/S Line #	2020	2019
Net Income					
(1) State basis (Page 4, Line 20, Columns 1 & 2)	ХХХ	XXX	XXX	\$ 5,453,652	\$ 1,042,876
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 5,453,652	\$ 1,042,876
Surplus					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 114,031,792	\$ 99,224,226
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 114,031,792	\$ 99,224,226
Lice of Estimates in the Preparation of the Einancial Statements					

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

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

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance. Expenses incurred in connection with acquiring new business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

- (1) Short-term investments are stated at amortized cost.
- (2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method

Investment grade non-loan backed bonds are stated at amortized cost using the interest method. Non-investment grade non-loan backed bonds are stated at the lower of amortized cost or fair value. The Company does not have any investments in mandatory convertible securities or SVO-Identified investments.

- (3) The Company has no investments in unaffiliated common stock.
- (4) Perpetual preferred stocks are stated at fair value, except non-investment grade perpetual preferred stocks, which are stated at the lower of cost or fair value. Mandatory redeemable preferred stocks are stated at amortized cost, except non-investment grade redeemable preferred stocks, which are stated at the lower of cost or fair value.
- (5) The Company has no investments in mortgage loans.
- (6) Basis for Loan-Backed Securities and Adjustment Methodology

Loan-backed securities are stated at either amortized cost using the interest method, 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 has become negative, which are valued using the prospective method.

- (7) Affiliated common stock is stated at the statutory value of the insurance subsidiary.
- (8) The Company has no investments in joint ventures, partnerships or limited liability companies.
- (9) The Company has no investments in derivatives.
- (10) The Company does not consider investment income as a factor in determining premium deficiency reserves.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on industry experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) The Company does not write major medical insurance with prescription drug coverage.

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern (Continued)

D. Going Concern

Based upon its evaluation of relevant conditions and events, management does not have substantial doubt about the Company's ability to continue as a going concern.

Accounting Changes and Corrections of Errors - Not Applicable 2.

- Business Combinations and Goodwill Not Applicable 3.
- **Discontinued Operations** Not Applicable 4.

Investments 5.

- A. Mortgage Loans, including Mezzanine Real Estate Loans Not Applicable
- B. Debt Restructuring Not Applicable
- C. Reverse Mortgages Not Applicable
- D. Loan-Backed Securities

(1) Description of Sources Used to Determined Prepayment Assumptions

For fixed rate agency mortgage-backed securities, prepayment speeds are calculated utilizing Mortgage Industry Advisory Corporation (MIAC) Mortgage Industry Medians (MIMs). MIMs are derived from a semi-monthly dealer consensus survey of long-term prepayment projections.

For other mortgage-backed, loan-backed and structured securities, prepayment assumptions are obtained from Moody's Analytics. Moody's applies a flat economic credit model and utilizes a vector of multiple monthly speeds as opposed to a single speed for more robust projections. If Moody's projections are not available, data is obtained from Reuters, which utilizes the median prepayment speed from contributors' models. Prepayment assumptions for fixed rate agency mortgage-backed securities were generated using the prepayment speeds.

- (2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) Not Applicable
- (3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities Not Applicable
- (4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss None
- (5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

The Company's management regularly reviews the value of investments. If the value of an investment falls below its cost basis, the decline is analyzed to determine whether it is an other-than-temporary decline in value. To make this determination, the following are considered:

(a) How long and by how much the fair value has been below its cost;

(b) The financial condition and near-term prospects of the issuer of the security, including any specific events that may affect its operations; (c) Management's intent to hold the security long enough for it to recover its value;

(d) Any downgrades of the security by a rating agency; and (e) Any nonpayment of scheduled interest payments.

Based on that analysis, management makes a judgment as to whether the loss is other-than-temporary. If the loss is other-than-temporary, the impairment is recognized as a realized capital loss in the Statement of Income in the period the determination is made.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions Not Applicable
- E. Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing Not Applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale Not Applicable
- Reverse Repurchase Agreements Transactions Accounted for as a Sale Not Applicable I.
- Real Estate Not Applicable J.
- Low-Income Housing Tax Credits (LIHTC) Not Applicable K.

5. Investments (Continued)

L. Restricted Assets

(1) Restricted assets (including pledged)

				Gross (Adm	nitted & Nonadm	nitted)	Restricted								
				Current Year								Cur	rent Y	'ear	
		(1)	(2)	(3)	(4)		(5)	(6)		(7)	(8)	(9)		(10)	(11)
	Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity		Total 1 + 3)	otal From rior Year	(De	rease / crease) 5 - 6)	Total Nonadmitted Restricted	Total Adm Restricte (5-8)		Gross (Admitted & Nonadmitted) Restricted to Total Assets, %	Admitted) Restricted to Total Admitted Assets, %
a.	Subject to contractual obligation for which liability is not shown	\$	\$	\$	\$	\$		\$ – .	\$		\$	\$		%	%
b.	Collateral held under security lending agreements							–							
C.	Subject to repurchase agreements														
d.	Subject to reverse repurchase agreements							– .							
e.	Subject to dollar repurchase agreements							– .							
f.	Subject to dollar reverse repurchase agreements														
g.	Placed under option contracts														
h.	Letter stock or securities restricted as to sale - excluding FHLB capital stock														
i.	FHLB capital stock							_		_					
j.	On deposit with states	8,276,406					8,276,406	7,769,721		506,685			5,406	1.454	1.462
k.	On deposit with other regulatory bodies														
I.	Pledged as collateral to FHLB (including assets backing funding agreements)														
m.	Pledged as collateral not captured in other categories														
n.	Other restricted assets														
0.	Total restricted assets	\$ 8,276,406	\$	\$	\$	\$	8,276,406	\$ 7,769,721	\$	506,685	\$	\$ 8,276	5,406	1.454 %	1.462 %

(2) Detail of assets pledged as collateral not captured in other categories (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - Not Applicable

(3) Detail of other restricted assets (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - Not Applicable

(4) Collateral received and reflected as assets within the reporting entity's financial statements - Not Applicable

- M. Working Capital Finance Investments Not Applicable
- N. Offsetting and Netting of Assets and Liabilities Not Applicable
- 0. 5GI Securities Not Applicable
- P. Short Sales Not Applicable
- Q. Prepayment Penalty and Acceleration Fees Not Applicable
- 6. Joint Ventures, Partnerships and Limited Liability Companies Not Applicable

7. Investment Income

- A. Due and Accrued Income Excluded from Surplus
 The Company non-admits investment income due and accrued if amounts are over 90 days past due.
- B. Total Amount Excluded Not Applicable

8. Derivative Instruments - Not Applicable

9. Income Taxes

- A. Components of the Net Deferred Tax Asset/(Liability)
 - (1) Change between years by tax character

		2020			2019			Change	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Gross deferred tax assets	\$ 1,865,041	\$	\$ 1,865,041	\$ 1,316,239	\$	\$ 1,316,239	\$ 548,802 .	\$	\$ 548,802
(b) Statutory valuation allowance adjustments									
(c) Adjusted gross deferred tax assets (1a - 1b)	1,865,041		1,865,041	1,316,239		1,316,239	548,802		548,802
(d) Deferred tax assets nonadmitted						357,285			(32,181)
(e) Subtotal net admitted deferred tax asset (1c - 1d)	\$ 1,539,937	\$	\$ 1,539,937	\$ 958,954	\$	\$ 958,954	\$ 580,983	\$	\$ 580,983
(f) Deferred tax liabilities	110,074	3,292	113,366	119,593		119,970	(9,519)	2,915	(6,604)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$ 1,429,863	\$ (3,292)	\$ 1,426,571	\$ 839,361	\$ (377)	\$ 838,984	\$ 590,502	\$ (2,915)	\$ 587,587
					• (011)		+ 000,000	+ (4,1,1,0)	• •••,•••
(2) Admission calcu	lation compo	nents SSAP N	lo. 101						
		2020			2019			Change	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Oudinana	0.11	Total			Total	Ordinary	Capital	Total
	Ordinary	Capital	(Col 1+2)	Ordinary	Capital	(Col 4+5)	(Col 1-4)	(Col 2-5)	(Col 7+8)
 (a) Federal income taxes paid in prior years recoverable through loss carrybacks. (b) Adjusted gross deferred tax assotic avported to be realized 	\$ 1,355,242					(Col 4+5) \$ 507,322			
 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 (lesser of 	\$ 1,355,242		\$ 1,355,242 .	\$ 507,322			\$		
 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 (lesser of 2(b)1 and 2(b)2 below). 1. Adjusted gross deferred tax assets expected to be realized following the 	\$ 1,355,242 . 	S	\$ 1,355,242 . 	\$ 507,322	S	\$ 507,322 	\$	S	\$ 847,920
 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 (lesser of 2(b)1 and 2(b)2 below). 1. Adjusted gross deferred tax assets expected to be realized following the 	\$ 1,355,242 . 	\$	\$ 1,355,242 . 	\$ 507,322 . 	\$	\$ 507,322 	\$	S	\$
 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 (lesser of 2(b)1 and 2(b)2 below). 1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date. 2. Adjusted gross deferred tax assets allowed per limitation threshold. (c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by 	\$ 1,355,242 	\$ \$ 	\$ 1,355,242 . 	\$ 507,322 . 	\$	\$ 507,322 	\$	\$ 	\$

	2020	2019
(a) Ratio percentage used to determine recovery period and threshold limitation amount	499.300 %	438.300 %

(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above \$... 112,605,221 \$.... 98,385,242

(4) Impact of tax-planning strategies

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

			2020 2019		19	Cha	inge	
			(1)	(2)	(3)	(4)	(5)	(6)
			Ordinary	Capital	Ordinary	Capital	Ordinary (Col. 1-3)	Capital (Col. 2-4)
	1.	Adjusted gross DTAs amount from Note 9A1(c)	\$ 1,865,041	\$	\$ 1,316,239	\$	\$ 548,802	\$
	2.	Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
	3.	Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 1,539,937	\$	\$ 958,954	\$	\$ 580,983	\$
	4.	Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%	%	%	%
(b)	Use	of reinsurance-related tax-planning strat	egies					
	Doe	s the company's tax-planning strategies	include the use	of reinsurance	?			NO

B. Regarding Deferred Tax Liabilities That Are Not Recognized - Not Applicable

9. Income Taxes (Continued)

C. Major Components of Current Income Taxes Incurred

rent income taxes incurred consist of the following major components:	(1) 2020	(2) 2019	(3) Change (1-2)
Current Income Tax			
(a) Federal	\$ 1 528 963	\$ 347 891	\$ 1 181 072
(b) Foreign			
(c) Subtotal			
(d) Federal income tax on net capital gains			
(e) Utilization of capital loss carry-forwards			,
(f) Other			
(g) Federal and foreign income taxes incurred			
	(1)	(2)	(3)
	2020	2019	Change (1-2)
Deferred Tax Assets			
(a) Ordinary			
(1) Discounting of unpaid losses	\$ \$41,908	\$ 496,205	\$ 45,703
(2) Unearned premium reserve		250,712	55,664
(3) Policyholder reserves			
(4) Investments			
(5) Deferred acquisition costs		8,538	(8,538)
(6) Policyholder dividends accrual			
(7) Fixed assets			
(8) Compensation and benefits accrual			
(9) Pension accrual			
(10) Receivables - nonadmitted		131,055	445,320
(11) Net operating loss carry-forward	· · · · · · · · · · · · · · · · · · ·		
(12) Tax credit carry-forward			
(13) Other (including items less than 5% of total ordinary tax assets)*			
(99) Subtotal			
(b) Statutory valuation allowance adjustment			
(c) Nonadmitted			,
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)(e) Capital			
(1) Investments			
(2) Net capital loss carry-forward			
(3) Real estate			
(4) Other (including items <5% of total capital tax assets)			
(99) Subtotal	\$	\$	\$
(f) Statutory valuation allowance adjustment			
(g) Nonadmitted			
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)			
(i) Admitted deferred tax assets (2d + 2h)	\$ 1,539,937	\$ 958,954	\$ 580,983
	(1)	(2)	(3)
	2020	2019	Change (1-2)
Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	\$	\$	\$
(2) Fixed assets			
(3) Deferred and uncollected premium			
(4) Policyholder reserves			
 (5) Other (including items <5% of total ordinary tax liabilities)[†] 			
(99) Subtotal			
	γ I IU,U/4 .	QQ.	y(9,519
(b) Capital	٨	¢	¢
(1) Investments			
(2) Real estate			
(3) Other (including items <5% of total capital tax liabilities)			
(99) Subtotal	. ,		\$ 2,915
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 113,366	\$ 119,970	\$ (6,604)

Notes to the Financial Statements

9. Income Taxes (Continued)

	(1) 2020	(2) 2019	(3) Change (1-2)
* Items >5% of total ordinary tax assets included in Other			
Deferred Fees	\$ 41,019	\$	41,019
Amortization			(52,705)
Other		60,795	
[†] Items >5% of total ordinary tax liabilities included in Other			
LRD transitional adjustment (TCJA)	\$ 71,381	\$ 85,657	(14,276)
Injury Fund Accrual			4,728

D. Among the More Significant Book to Tax Adjustments

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

	 2020	Effective Tax Rate
Provision computed at statutory rate	\$ 1,476,904	
Proration of tax exempt investment income	 	0.057
Tax exempt income deduction	 (14,597)	-0.208
Dividends received deduction	 (1,569)	-0.022
Disallowed travel and entertainment	 	
Other Permanent differences	 	0.027
Total ordinary DTAs	 	
Total ordinary DTLs	 	
Total capital DTAs	 	
Total capital DTLs	 	
Change in nonadmitted assets	 	-6.332
Accrual adjustment - prior year		-0.006
Other	 	
Total	\$ 1,020,901	14.516 %
	 2020	Effective Tax Rate
Federal and foreign income taxes incurred	\$ 1,579,222	
Realized capital gains (losses) tax	 	
Change in deferred income taxes	 (558,321)	-7.939
Total statutory income taxes	\$ 1,020,901	14.516 %

E. Operating Loss and Tax Credit Carryforwards

- (1) Unused loss carryforwards available Not Applicable
- (2) Income tax expense available for recoupment

	Total
2018	\$
2019	
2020	

- (3) Deposits admitted under IRC Section 6603 Not Applicable
- F. Consolidated Federal Income Tax Return
 - (1) The Company's federal income tax return is consolidated with the following entities:
 - Carolina Re Ltd.
 - Falls Lake Fire & Casualty Company
 - Falls Lake Insurance Management Company, Inc.
 - James River Casualty Company
 - James River Insurance Company
 - James River Group, Inc.
 - James River Management Company, Inc
 - James River TPA Services, Inc
 - Stonewood Insurance Company
 - (2) A written agreement provides that federal income taxes will be allocated to the Company on approximately the same basis as though the Company were filing a separate return. Estimated tax payments are settled with the Company's parent at the time such estimates are payable to the Internal Revenue Service. Final settlement between the Company and its parent is made within ninety days of filing the tax return.
- G. Federal or Foreign Income Tax Loss Contingencies

9. Income Taxes (Continued)

- H. Repatriation Transition Tax (RTT) Not Applicable
- I. Alternative Minimum Tax (AMT) Credit Not Applicable

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

A. Nature of the Relationship Involved

The Company is an indirect subsidiary of James River Group Holdings (Bermuda), Ltd.; 100% of the outstanding stock of the Company is directly owned by James River Group, Inc. See Schedule Y, Part 1, Organizational Chart. The Company was purchased by James River Group, Inc. from Infinity Insurance Company ("Infinity") on December 31, 2011.

- B. Detail of Transactions Greater Than 0.5% of Admitted Assets
 - See Note 26 for additional details about the intercompany reinsurance pooling agreement.
 - Dollar Amounts of Transactions
 - See Notes 9F, 10E, 12G and 26.
- C. Transactions With Related Party Who Are Not Reported on Schedule Y None
- D. Amounts Due From or To Related Parties

On January 1, 2020, the Company borrowed \$5,000,000 from its affiliate James River Insurance Company in the form of a promissory note maturing on January 1, 2023. As of December 31, 2020 the Company has paid \$89,100 in interest. The Company will make quarterly interest payments to James River Insurance Company and will repay in entire unpaid principal balance on January 1, 2023.

See Note 10E.

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

Falls Lake National Insurance Company and Falls Lake Insurance Management Company, Inc. are parties to a Management Services Agreement. Pursuant to this agreement, Falls Lake Insurance Management Company, Inc. provides various services to Falls Lake National Insurance Company, including but not limited to management, administration, underwriting, premium collection, claims, operations, accounting, actuarial, information technology and human resources.

During 2020, Falls Lake Insurance Management Company, Inc. incurred \$8,012,169 of expenses on behalf of Falls Lake National Insurance Company, pursuant to the terms of the intercompany Management Services Agreement. As of December 31, 2020, \$8,149,364 of this amount had been settled, and the resulting \$137,195 receivable was settled by January 31, 2021.

All intercompany reinsurance balances are settled quarterly.

- F. Guarantees or Contingencies Not Applicable
- G. Nature of the Control Relationship

See Schedule Y, Part 1, Organizational Chart.

- H. Amount Deducted for Investment in Upstream Company Not Applicable
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets Not Applicable
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies Not Applicable
- K. Foreign Subsidiary Value Using CARVM Not Applicable
- L. Downstream Holding Company Value Using Look-Through Method Not Applicable
- M. All SCA Investments Not Applicable
- N. Investment in Insurance SCAs Not Applicable
- 0. SCA and SSAP No. 48 Entity Loss Tracking Not Applicable
- 11. Debt
 - A. See note 10D for additional detail.
 - B. FHLB (Federal Home Loan Bank) Agreements Not Applicable
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans
 - A. Defined Benefit Plan Not Applicable
 - B. Investment Policies and Strategies of Plan Assets Not Applicable
 - C. Fair Value of Each Class of Plan Assets Not Applicable
 - D. Expected Long-Term Rate of Return for the Plan Assets Not Applicable
 - E. Defined Contribution Plans Not Applicable
 - F. Multiemployer Plans Not Applicable

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans (Continued)

G. Consolidated/Holding Company Plans

The Company has no employees. However, Falls Lake Insurance Management Company, Inc. sponsors a 401(k) plan for its employees. The terms of the 401(k) plan allow employees to contribute the maximum allowed by the U.S. Government. One hundred percent (100%) of this contribution, up to a maximum of 6% of salary, is matched by Falls Lake Insurance Management Company, Inc. All expenses associated with the plan are allocated to the Company, in accordance with the terms of the Management Services Agreement. The Company's share of this 401(k) plan expense was \$25,854 for 2020. The Company has no legal obligation for benefits under this plan.

- H. Postemployment Benefits and Compensated Absences Not Applicable
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) Not Applicable

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

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

The Company has 300,000 shares of common stock authorized, of which 300,000 shares are issued and outstanding with a par value of \$14 per share.

- B. Dividend Rate of Preferred Stock Not Applicable
- C. Dividend Restrictions

The maximum amount of dividends or distributions which may be paid to stockholders by property/casualty insurance companies domiciled in the state of Ohio without (i) prior approval or (ii) expiration of a 30 day waiting period without disapproval of the Director of Insurance, is the greater of net income or 10% of capital and surplus as of the preceding December 31, but only to the extent of earned surplus as of the preceding December 31. The maximum amount of ordinary dividends or distributions which may be paid in 2021 based on capital and surplus is \$11,403,179.

- D. Ordinary Dividends Not Applicable
- E. Within the limitations of (C) above, there are no specific restrictions placed on the portion of the Company's profits that may be paid as ordinary dividends to stockholders.
- F. Restrictions Plans on Unassigned Funds (Surplus)

There are no restrictions placed on unassigned surplus other than those described above in paragraphs (3) and (5). These unassigned funds are held for the benefit of the owner and policyholders.

- G. Surplus Advances Not Applicable
- H. Stock Held for Special Purposes Not Applicable
- I. Changes in Special Surplus Funds Not Applicable
- J. Unassigned Funds (Surplus)
 - The Portion of Unassigned Funds (Surplus) Represented or Reduced by Unrealized Gains and Losses is: \$19,638,888.
- K. Company-Issued Surplus Debentures or Similar Obligations Not Applicable
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations Not Applicable
- M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years Not Applicable

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments Not Applicable
- B. Assessments
 - (1) Nature of Any Assets That Could Have a Material Financial Effect

The Company is subject to guaranty fund and other assessments by the states in which it writes business. Guaranty fund assessments are accrued at the time of insolvencies. Other assessments are accrued either at the time of assessments or in the case of premium based assessments, at the time the premiums were written, or, in the case of loss based assessments, at the time the losses are incurred.

The Company had an accrual of \$40,664 for guaranty fund assessments as of December 31, 2020. The liability is included in the taxes, licenses and fees liability and is expected to be paid in 2021. The amounts represent management's best estimates based on information received from the states in which the Company writes business and may change due to many factors, including the Company's share of the ultimate cost of current insolvencies.

- (2) Assets (Liabilities) recognized from paid and accrued premium tax offsets and policy surcharges Not Applicable
- (3) Guaranty fund liabilities and assets related to long-term care insolvencies Not Applicable
- C. Gain Contingencies Not Applicable
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits Not Applicable
- E. Product Warranties Not Applicable
- F. Joint and Several Liabilities Not Applicable
- G. All Other Contingencies

Various lawsuits against the Company arise during the normal course of business. The Company's management believes that the contingent liabilities arising from such litigation and other matters will not have material effect on the financial position or the results of operations of the Company.

15. Leases - Not Applicable

- 16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk Not Applicable
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities Not Applicable
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans Not Applicable

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

Name and Address of Managing General Agent or Third Party Administration	FEIN Number	Exclusive Contract	Types of Business Writter	Type of Authority Granted	Total Direct Premium Written / Produced By
Atlas General Insurance Services, LLC, 4365 Executive Drive, Ste. 400, San Diego, CA 92121		YES	Workers' Compensation	U, B, P	\$ 8,293,667
AE Underwriters Agency Inc., 444 Madison Ave., Suite 501, New York, NY 10022.		NO	Commercial Package, WC	U,B,P,CA,C	22,666,433
Arrowhead General Insurance Agency, Inc. 701 B Street, Suite 2100, San Diego, CA 92101		NO	Private Passenger Auto	U,C	
Total					\$ 70,217,652

20. Fair Value Measurements

A. Fair Value Measurement

For statutory accounting, certain investments are carried at fair value, while others may periodically be carried at fair value based on certain factors such as the NAIC's lower of cost or market rule or an impairment. Assets recorded at fair value are categorized based on an evaluation of the various inputs used to measure the fair value.

Three levels of inputs are used to measure fair value:

- · Level 1: Quoted prices in active markets for identical assets,
- · Level 2: Indirect observable inputs, including prices for similar assets and market corroborated inputs, and
- Level 3: Unobservable inputs reflecting assumptions that market participants would use, including assumptions about risk.

Supporting documentation received from pricing vendors detailing the inputs, models and processes used in the vendor's evaluation process is used to determine the appropriate fair value hierarchy. Documentation from each pricing vendor is reviewed and monitored periodically to ensure they are consistent with pricing policy procedures. Market information obtained from brokers with respect to security valuations is also considered in the pricing hierarchy.

(1) Fair value measurements at reporting date

	Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a.	Assets at fair value					
	Preferred Stock	\$	\$ 215,400	\$	\$	\$ 215,400
	Money market mutual funds				3,967,665	
	Total assets at fair value/NAV	\$ -	\$ 215,400	\$ –	\$ 3,967,665	\$ 4,183,065
b.	Liabilities at fair value					
	Not applicable	\$	\$	\$	\$	\$
	Total liabilities at fair value	\$	\$	\$	\$	\$

(2) Fair value measurements in Level 3 of the fair value hierarchy - Not Applicable

(3) Policies when Transfers Between Levels are Recognized

Transfers in and out of Level 3 are recognized based on the beginning of the reporting period.

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

Fair value measurements for fixed income and equity securities are based on values published by independent pricing services such as Refinitiv and IHS Markit. These sources have been evaluated and approved by the investment manager's pricing policy committee. Under certain circumstances, if a vendor price is not available, a price may be obtained from a broker. Short-term securities are valued at amortized cost. Cash Equivalents, excluding money market mutual funds, are valued at amortized cost. Money market mutual funds are valued using a stable Net Asset Value (NAV) of one dollar per share.

Generally, independent pricing service vendors use a pricing methodology involving the market approach, including pricing models, which use prices and relevant market information regarding a particular security or securities with similar characteristics to establish a valuation.

Investments for which external sources are not available or are determined by the investment manager not to be representative of fair value are recorded at fair value as determined by the investment manager. In determining the fair value of such investments, the investment manager considers one or more of the following factors: type of security held, convertibility or exchangeability of the security, redeemability of the security (including timing of such redemptions), application of industry accepted valuation models, recent trading activity, liquidity, estimates of liquidation value, purchase cost, and prices received for securities with similar terms of the same issuer or similar issuers. As of December 31, 2020, there were no investments for which external sources were unavailable to determine fair value.

The Company does not have any Level 3 assets.

- (5) Derivatives Not Applicable
- B. Other Fair Value Disclosures Not Applicable

20. Fair Value Measurements (Continued)

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

The table below reflects the fair values and admitted values of all admitted assets and liabilities that are financial instruments, excluding those accounted for under the equity method (subsidiaries). The fair values are also categorized into the three-level fair value hierarchy as described above in Note 20A.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 4,635,619	\$ 4,357,015	\$ 1,680,416	\$ 2,955,203	\$	\$	\$
Preferred stock		215,400		215,400			
Cash equivalents & short-term investments	4,217,663	4,217,658		249,998			

D. Not Practicable to Estimate Fair Value - Not Applicable

E. Nature and Risk of Investments Reported at NAV - Not Applicable

21. Other Items

A. Unusual or Infrequent Items

In response to the outbreak of the coronavirus pandemic in the first quarter of 2020, many state and local governments in the United States and around the world have instituted emergency restrictions that have substantially limited the operation of non-essential businesses and the activities of individuals. Many states have extended the expiration date of restrictions and some states that eased restrictions subsequently reimposed them as the spread of COVID-19 worsened. These restrictions could result in significant adverse effects on our policyholders and many different types of small and mid-sized businesses within the Company's client base, particularly those in the retail, hospitality and food and beverage industries, among many others. The ultimate effect and severity of COVID-19 on the economy is not known nor is the ultimate length of the restrictions and any accompanying effects caused by it. Moreover, the Federal Reserve has taken action to lower the Federal Funds rate and the U.S. equity markets have experienced substantial volatility in reaction to COVID-19 since February 2020, both of which have, along with other factors, placed pressure on net investment income and resulted in material realized and unrealized losses in our investment portfolio in the first quarter of 2020. Investment markets recovered substantially in the second, third and fourth quarters, leading to unrealized gains in our investment portfolio for those quarters.

The effect of COVID-19 and related events could have a negative effect on the Company, including as a result of quarantines, market volatility, market downturns, actions of lawmakers and regulators, changes in consumer behavior, business closures, deterioration in the credit quality of policyholders or the inability of policyholders to pay their premium and deductible obligations to the Company, and deterioration in the credit quality of reinsurers or insurance entities with which we have a fronting arrangement or the inability of insurers or the insurance entities for which we are fronting to pay their obligations to the Company. At the federal and state level, there have been proposals by lawmakers to retroactively amend business interruption insurance policies to cover claims related to COVID-19 when such insurance policies otherwise would exclude such risks. In addition, a number of states have instituted, and other states are considering instituting, changes designed to effectively expand workers' compensation coverage by creating presumptions of compensability of claims for certain types of workers.

The Company has received both business interruption and workers' compensation claims related to COVID-19 and we expect that we will continue to receive claims related to COVID-19. If the efforts of lawmakers to effectively expand coverage under business interruption, workers' compensation or other policies on a retroactive basis are successful and enforceable, the Company may be forced to pay claims under policies for which it received inadequate premiums to cover such risks, and therefore the Company's reserves may be inadequate to pay such claims. At the state level, insurance departments throughout the country have issued bulletins and regulations urging or requiring insurers to extend grace periods for the payment of policy premiums and to refrain from canceling or non-renewing policies for the non-payment of policy premiums for policyholders adversely affected by COVID-19. While many of these requirements and recommendations have expired or are scheduled to expire in the near future, insurance departments could reinstate or extend them as conditions deteriorate and/or the negative impact of the pandemic on policyholders persists. It is uncertain what impact these government mandates may have on our ability to recover unpaid premiums on the affected policies or what our obligations may be for the payment of claims made under policies for which we have not received premium payments. Further, demand for the insurance policies that the Company offers is highly dependent upon the business environment in the markets in which the Company operates. Given the ongoing and dynamic nature of the circumstances, it is not possible to predict the ultimate impact of the company offers is highly dependent upon the business environment in the operations of the Company.

Due to Covid-19, certain customers have been allowed to modify their exposure base of auto policies. On August 1, 2020, the Michigan Department of Insurance approved the Company's plan to issue premium refunds within 30 days of approval. These refunds totaling \$1,331,319 were issued during August 2020 and were accounted for as premium refunds. Ceded written premiums under our various reinsurance contracts were adjusted for this refund.

- B. Troubled Debt Restructuring Not Applicable
- C. Other Disclosures Not Applicable
- D. Business Interruption Insurance Recoveries Not Applicable
- E. State Transferable and Non-Transferable Tax Credits Not Applicable
- F. Subprime-Mortgage-Related Risk Exposure Not Applicable
- G. Insurance-Linked Securities (ILS) Contracts Not Applicable
- H. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy Not Applicable

22. Events Subsequent

The Company has considered subsequent events through February 26, 2021, the date that the statutory-basis financial statements were available to be issued. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

23. Reinsurance

A. Unsecured Reinsurance Recoverables

At December 31, 2020, the Company had the following unsecured aggregate reinsurance recoverables for losses and loss adjustment expenses, paid and unpaid, including IBNR, and unearned premium that exceeded 3% of the Company's policyholders' surplus:

23. Reinsurance (Continued)

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

Individual Reinsurers Who Are Not Members of a Group

FEIN	Reinsurer Name	Unsecured Amount	
AA-1340125	Hannover Ruckversicherungs AG	\$	00
AA-1128001	Lloyd's Syndicate Number 2001		00

Individual Reinsurers Who Are Members of a Group

NAIC Group

Code	FEIN	Reinsurer Name	Unsecured Amount
00383		American European Insurance Company	\$ 37,785,000
00181		Swiss Reinsurance America Corporation	
00626		Chubb Tempest Re US	
01279	06-1430254	Arch Reins Co	
00250		Donegal Mut Ins Co	
00361		Munch Reins Amer Inc	
03416		Axis Reins Co	6,754,000
00031		National Indemnity Company	6,442,000
00158	47-0698507	Odyssey Reins Co	

B. Reinsurance Recoverable in Dispute - Not Applicable

C. Reinsurance Assumed and Ceded

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

		Assumed R	Reinsurance	Ceded Re	insurance	N	et
		Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a.	Affiliates	\$ 68,540,342	\$ 2,189,915	\$ 72,561,668	\$ 5,143,425	\$(4,021,326)	\$(2,953,510)
b.	All other	296,573		72,210,641	20,774,426	(71,914,068)	(20,675,706)
c.	Total	\$ 68,836,915	\$ 2,288,635	\$ 144,772,309	\$ 25,917,851	\$ (75,935,394)	\$ (23,629,216)
Ь	Direct unearned premium reserve			\$ 83 126 069			

(2) The additional or return commission, predicated on loss experience or on any other form of profit sharing arrangements in this statement as a result of existing contractual arrangements is accrued as follows: - Not Applicable

(3) Risks attributed to each of the company's protected cells - Not Applicable

- D. Uncollectible Reinsurance Not Applicable
- E. Commutation of Ceded Reinsurance Not Applicable
- F. Retroactive Reinsurance Not Applicable
- G. Reinsurance Accounted for as a Deposit Not Applicable
- H. Disclosures for the Transfer of Property and Casualty Run-Off Agreements Not Applicable
- I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation Not Applicable
- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation Not Applicable
- K. Reinsurance Credit Not Applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

The Company does not write any contracts with retroactive rated contract terms.

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

NONE

(1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions? <u>NO</u>

(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year - Not Applicable

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

- (3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance Not Applicable
- (4) Roll-forward of risk corridors asset and liability balances by program benefit year Not Applicable
- (5) ACA risk corridors receivable as of reporting date Not Applicable

25. Changes in Incurred Losses and Loss Adjustment Expenses

. Reasons for Changes in the Provision for Incurred Loss and Loss Adjustment Expenses Attributable to Insured Events of Prior Years

The following table provides an analysis of the change in loss and loss adjustment expense reserves net of reinsurance recoverables for the indicated periods:

	Dece	mber 31, 2020	D	ec. 31, 2019
Reserves, Net of Reinsurance Recoverables at Beginning of Period	\$	23,344,465	\$	20,361,913
Loss and loss adjustment expense incurred:				
Current accident year		10,284,011		9,430,106
Prior accident years		(2,000,805)		(997,704)
		8,283,206		8,432,402
Loss and loss adjustment expense payments made for:				
Current accident year		1,155,802		998,868
Prior accident years		5,098,333		4,450,982
		6,254,135		5,449,850
Reserves, Net of Reinsurance Recoverables at End of Period	\$	25,373,536	\$	23,344,465

Reserves for incurred losses and LAE attributable to insured events of prior years, decreased by \$ 2,000,805 in 2020, resulting primarily from the other liability line of business. This change is the result of an ongoing analysis of recent development trends and additional information regarding individual claims. These results are attributable to the business retained from the intercompany reinsurance pooling agreement.

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Losses and Loss Adjustment Expenses -Not Applicable

26. Intercompany Pooling Arrangements

A. - D. The insurance entities within the James River Group are participants in an intercompany reinsurance pooling agreement (the pooling) which was effective January 1, 2013 and included business in-force and subsequent to that date. The pooling is net of all other reinsurance coverage carried by the participants. The pooling provides proportionate sharing of premiums earned, losses and loss adjustment expenses incurred and underwriting expenses incurred.

On August 1, 2016 Falls Lake Fire and Casualty Company received approval from the California Department of Insurance to be a party to the pooling agreement, effective January 1, 2016 on an in-force, new and renewal basis. The current participating companies have received approval of the revised agreement with their States of domicile (OH, NC and VA).

Current and prior participants and their percentages of the pool are as follows:

Company	NAIC #	Current Participation
Falls Lake National Insurance Company (Lead Company)	31925	10%
James River Insurance Company	12203	61%
Stonewood Insurance Company	11828	14%
James River Casualty Company	13685	9%
Falls Lake Fire and Casualty Company	15884	6%

Effective January 1, 2017, the intercompany reinsurance pooling agreement was revised to exclude the James River Insurance Company's commercial auto line of business. The current participating companies have received approval of the revised agreement with their States of domicile (NC, OH, VA, and CA). This agreement supersedes the previous pooling agreement effective January 1, 2016. Falls Lake General Insurance Company (General) merged into the Lead Company effective November 15, 2018. The Lead Company assumed General's 3% share of the pool increasing the Lead Company's percentage from 7% to 10%. There were no changes made to the pooling agreement, and all participation percentages remain as reported as of December 31, 2019.

- E. Explanation of Discrepancies Between Entries of Pooled Business Not Applicable
- F. Description of Intercompany Sharing Not Applicable

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

As a result of the pooling the net amount due from the other participants is \$3,052,479 as of December 31, 2020.

- 27. Structured Settlements Not Applicable
- 28. Health Care Receivables Not Applicable
- 29. Participating Policies Not Applicable
- 30. Premium Deficiency Reserves
 - 1. Liability carried for premium deficiency reserves: \$-
 - 2. Date of the most recent evaluation of this liability: 01/15/2021
 - 3. Was anticipated investment income utilized in the calculation? NO

Notes to the Financial Statements

31. High Deductibles

- A. Reserve Credit Recorded on Unpaid Claims and Amount Billed and Recoverable on Paid Claims for High Deductibles
 - (1) Counter party exposure recorded on unpaid claims and billed recoverables on paid claims

Annual Sta	atement Line of Business (ASL)	(3)	(4)	(5)	(6)
(1)	(2)	Gross (of High Deductible) Loss	Reserve Credit for	Billed Recoverables	Total High Deductibles and Billed Recoverables
ASL #	ASL Description	Reserves	High Deductibles	on Paid Claims	(Col 4 + Col 5)
171	Other Liability Occurrence	\$	\$	\$	\$
Total		\$ 33,743	\$ -	\$ -	\$ -

- (2) Unsecured amounts of high deductibles
 - a. Total high deductibles and billed recoverables on paid claims (should equal total line for Column 6 for A(1) above)......

 - c. Collateral off balance sheet (must be equal to or greater than zero).....d. Total unsecured deductibles and billed recoverables on paid claims d=a-(b+c)
 - (must be equal to or greater than zero) e. Percentage unsecured %
- (3) High Deductible Recoverables Amounts on Paid Claims Not Applicable
- (4) The deductible amounts for the highest ten unsecured high deductible policies Not Applicable
- B. Unsecured High Deductible Recoverables for Individual Obligors Part of a Group Under the Same Management or Control Which Are Greater Than 1% of Capital and Surplus Not Applicable

32. Discounting of Liabilities For Unpaid Losses or Unpaid Loss Adjustment Expenses - Not Applicable

33. Asbestos/Environmental Reserves

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

Yes (X) No () The Company has exposure to asbestos claims through the assumption of workers compensation insurance from the intercompany pooling arrangement.

- (1) Direct basis Not Applicable
- (2) Assumed reinsurance basis

		2016	2017	2018	2019	2020
a.	Beginning reserves	\$ 226,517	\$ 61,326	\$ 170,296	\$ 132,610	\$
b.	Incurred losses and loss adjustment expense		134,040			
С.	Calendar year payments for losses and loss adjustment expenses		25,070	(10,108)	6,631	(46,472).
d.	Ending reserves (d=a+b-c)	\$ 61,326	\$ 170,296	\$ 132,610	\$ 78,148	\$ 117,814
(3) Net	of ceded reinsurance basis					
(3) Net	of ceded reinsurance basis					
(3) Net	of ceded reinsurance basis	2016	2017	2018	2019	2020
(3) Net a.	Beginning reserves	\$	\$ 4,293	\$ 11,921	\$ 9,283	\$
(3) Net a. b.	Beginning reserves Incurred losses and loss adjustment expenses	\$	\$ 4,293	\$ 11,921	\$ 9,283	\$ 4,690
(3) Net a. b. c.	Beginning reserves	\$	\$ 4,293 9,383	\$ 11,921 (3,346)	\$9,283 (2,869)	\$ 4,690 3,838

B. Amount of the Ending Reserves for Bulk + IBNR Included in A (Loss & LAE) - Not Applicable

C. Amount of the Ending Reserves for Loss Adjustment Expenses Included in A (Case, Bulk + IBNR) - Not Applicable

D. Does the company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to environmental losses? - Not Applicable

- E. Amount of the Ending Reserves for Bulk + IBNR Included in D (Loss & LAE) Not Applicable
- F. Amount of the Ending Reserves for Loss Adjustment Expenses Included in D (Case, Bulk + IBNR) Not Applicable
- 34. Subscriber Savings Accounts Not Applicable
- 35. Multiple Peril Crop Insurance Not Applicable
- 36. Financial Guaranty Insurance Not Applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System is an insurer?			Yes [X] No []
	If yes, complete Schedule Y, Parts 1, 1A and 2			
1.2	If yes, did the reporting entity register and file with its domiciliary State such regulatory official of the state of domicile of the principal insurer in providing disclosure substantially similar to the standards adopted by the its Model Insurance Holding Company System Regulatory Act and more subject to standards and disclosure requirements substantially similar	n the Holding Company System, a registration statement he National Association of Insurance Commissioners (NAIC) in del regulations pertaining thereto, or is the reporting entity	. Yes [X] No [] N/A []
1.3	State Regulating?		-	Ohio
1.4	Is the reporting entity publicly traded or a member of a publicly traded of	group?		Yes [X] No []
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code	issued by the SEC for the entity/group.	·	1620459
2.1	Has any change been made during the year of this statement in the ch reporting entity?			Yes [] No [X]
2.2	If yes, date of change:			
3.1	State as of what date the latest financial examination of the reporting e	entity was made or is being made.		12/31/2019
3.2	State the as of date that the latest financial examination report became entity. This date should be the date of the examined balance sheet and			12/31/2014
3.3	State as of what date the latest financial examination report became a domicile or the reporting entity. This is the release date or completion of examination (balance sheet date).	date of the examination report and not the date of the		11/09/2015
3.4	By what department or departments? Ohio Department of Insurance			
3.5	Have all financial statement adjustments within the latest financial example statement filed with Departments?		Yes [] No [] N/A [X]
3.6	Have all of the recommendations within the latest financial examination	n report been complied with?	Yes [] No [] N/A [X]
4.1 4.2	4.12 rene During the period covered by this statement, did any sales/service orga receive credit or commissions for or control a substantial part (more the	yees of the reporting entity), receive credit or commissions for or measured on direct premiums) of: s of new business? ewals? anization owned in whole or in part by the reporting entity or an a	control	Yes [X] No [] Yes [X] No []
		es of new business?		Yes [] No [X] Yes [] No [X]
5.1	Has the reporting entity been a party to a merger or consolidation durin If yes, complete and file the merger history data file with the NAIC.	ig the period covered by this statement?		Yes [] No [X]
5.2	If yes, provide the name of the entity, NAIC Company Code, and state ceased to exist as a result of the merger or consolidation.	of domicile (use two letter state abbreviation) for any entity that h	าลร	
	1 Name of Entity	2 3 NAIC Company Code State of Domicile		
6.1	Has the reporting entity had any Certificates of Authority, licenses or re revoked by any governmental entity during the reporting period?	gistrations (including corporate registration, if applicable) susper		Yes [] No [X]
6.2	If yes, give full information: Not applicable			
7.1	Does any foreign (non-United States) person or entity directly or indirect	ctly control 10% or more of the reporting entity?		Yes [X] No []
7.2	If yes, 7.21 State the percentage of foreign control;			100.0 %
	7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the attorney-in-fact; and identify the type of entity(s) (e.g., individual, etc.)			
	1 Nationality	2 Type of Entity		
	Bermuda	Corporation		

GENERAL INTERROGATORIES

8.1 8.2	Is the company a subsidiary of a bank holding company regulated by If response to 8.1 is yes, please identify the name of the bank holding Not applicable	company.				Yes []	No [[X]
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities f If response to 8.3 is yes, please provide below the names and locatio regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commiss	firms? n (city and state of the main office) of any affiliates re e Office of the Comptroller of the Currency (OCC), the	gulated b e Federal	y a fed	eral	Yes []	No [[X]
		2	3	4	5	6			
	Affiliate Name	Location (City, State)			FDIC		-		
	Not applicable								
9.	What is the name and address of the independent certified public acc Ernst & Young LLP, 100 North Tryon Street, Charlotte, NC 28202	countant or accounting firm retained to conduct the ar	nnual aud	it?					
10.1		ting Model Regulation (Model Audit Rule), or substan	ntially simi	lar stat		Yes [1	No I	r y 1
10.2	If the response to 10.1 is yes, provide information related to this exern Not applicable	nption:				163 [1		, ^]
10.3 10.4	Has the insurer been granted any exemptions related to the other req allowed for in Section 18A of the Model Regulation, or substantially si If the response to 10.3 is yes, provide information related to this exem	uirements of the Annual Financial Reporting Model R milar state law or regulation?	Regulation	as		Yes []	No [[X]
	Not applicable	•					_		
10.5 10.6	Has the reporting entity established an Audit Committee in compliance If the response to 10.5 is no or n/a, please explain Not applicable				-] No []	N//	A []
11.	What is the name, address and affiliation (officer/employee of the rep firm) of the individual providing the statement of actuarial opinion/cert	orting entity or actuary/consultant associated with an ification?	actuarial	consul	ing				
	Jennifer Kish Chief Actuary James River Group, Inc 1414 Raleigh Ro								
12.1	Does the reporting entity own any securities of a real estate holding co					Yes []	No [X]
	12.11 Name of real	estate holding company Not applicable							
		arcels involved							
	12.13 Total book/ac	ljusted carrying value				\$			0
12.2	If, yes provide explanation: Not applicable								
12	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTIT								
13. 13.1	What changes have been made during the year in the United States r		g entity?						
10.0	Not applicable					V r	,	N. 1	r 1
13.2	Does this statement contain all business transacted for the reporting of Have there been any changes made to any of the trust indentures dur					Yes [-		
13.3						-	-		
13.4 14.1	If answer to (13.3) is yes, has the domiciliary or entry state approved the senior officers (principal executive officer, principal financial of the senior officers (principal executive officer, principal financial of the senior officer) and the senior officer of the senior of the senior of the senior officer of the senior officer of the senior of the senior officer of the senior o] No [1	IN/ /	Α[X]
14.1	similar functions) of the reporting entity subject to a code of ethics, wh a. Honest and ethical conduct, including the ethical handling of actual relationships; b. Full, fair, accurate, timely and understandable disclosure in the per	nich includes the following standards?	nd profess			Yes [X]	No [i 1
	c. Compliance with applicable governmental laws, rules and regulatio		-						
	d. The prompt internal reporting of violations to an appropriate person e. Accountability for adherence to the code.								
14 11	If the response to 14.1 is No, please explain:								
	Not applicable								
14.2	Has the code of ethics for senior managers been amended?					Yes [1	No I	[X]
	If the response to 14.2 is yes, provide information related to amendme	ent(s).							
14.3	Not applicable Have any provisions of the code of ethics been waived for any of the s					Voc I	1	No	r v 1
	If the response to 14.3 is yes, provide the nature of any waiver(s).	apecilieu onicela:				Yes [1	INO [[X]
	Not applicable								

GENERAL INTERROGATORIES

15.1 15.2	SVO Bank List? Yes If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.] No	5 [X]
	1	2	3		4		1
	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	A	mount		
	0	Not applicable					
16. 17. 18.	thereof? Does the report thereof?	BOARI or sale of all investments of the reporting entity passed u ing entity keep a complete permanent record of the proce	D OF DIRECTORS upon either by the board of directors or a subordinate committee eedings of its board of directors and all subordinate committees ard of directors or trustees of any material interest or affiliation on	Yes [Yes [the] No X] No	o [X o []
	part of any of its	officers, directors, trustees or responsible employees that	at is in conflict with the official duties of such person?	Yes [X] No	D []
	Accounting Prin	ent been prepared using a basis of accounting other than ciples)?	FINANCIAL a Statutory Accounting Principles (e.g., Generally Accepted	Yes [] No	5 [X]
20.1	Total amount lo	aned during the year (inclusive of Separate Accounts, ex	clusive of policy loans): 20.11 To directors or other officers 20.12 To stockholders not officers 20.13 Trustees, supreme or grand	\$			0
20.2	Total amount of	loans outstanding at the end of year (inclusive of Separa	(Fraternal Only)				
	policy loans):	5 <i>5</i>	20.21 To directors or other officers				
			20.22 To stockholders not officers 20.23 Trustees, supreme or grand				
21.1	Were any asset	s reported in this statement subject to a contractual oblig	(Fraternal Only)				
21.2		reported in the statement? amount thereof at December 31 of the current year:	21.21 Rented from others				
			21.22 Borrowed from others				
			21.23 Leased from others	\$			0
22.1	Doop this state	nont include nouments for appearaments as described in t	21.24 Other the Annual Statement Instructions other than guaranty fund or	\$			0
	guaranty associ	ation assessments?					
22.2	If answer is yes		22.21 Amount paid as losses or risk adjust 22.22 Amount paid as expenses				
			22.23 Other amounts paid				
23.1			es or affiliates on Page 2 of this statement?				
23.2	If yes, indicate a	any amounts receivable from parent included in the Page	2 amount:	\$			0
24.01		cks, bonds and other securities owned December 31 of c	IVESTMENT current year, over which the reporting entity has exclusive control, curities lending programs addressed in 24.03).		X]No	0 [1
24.02	If no, give full a	nd complete information relating thereto		-			1
24.03	For securities le whether collater	ending programs, provide a description of the program inc ral is carried on or off-balance sheet. (an alternative is to	cluding value for collateral and amount of loaned securities, and reference Note 17 where this information is also provided)				
24.04	For the reporting	g entity's securities lending program, report amount of co	Ilateral for conforming programs as outlined in the Risk-Based Ca	pital \$			0
24.05	For the reporting	g entity's securities lending program, report amount of co	llateral for other programs.	\$			0
24.06	Does your secu outset of the co	rities lending program require 102% (domestic securities ntract?) and 105% (foreign securities) from the counterparty at the	es [] No	[]	N/A [X]
24.07	Does the report	ing entity non-admit when the collateral received from the	e counterparty falls below 100%?	es [] No	[]]	N/A [X]
24.08	Does the report conduct securiti	ing entity or the reporting entity 's securities lending agen ies lending?	nt utilize the Master Securities lending Agreement (MSLA) to	es [] No	[]	N/A [X]

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

	24.001 Total fair value of reinvested colleteral second range	rtad on Schodule DL. Darte 1 and 2	¢ 0
	•	rted on Schedule DL, Parts 1 and 2.	_
		ollateral assets reported on Schedule DL, Parts 1 and 2	
	24.093 Total payable for securities lending reported on the	liability page.	.\$0
25.1	Were any of the stocks, bonds or other assets of the reporting entity owned control of the reporting entity, or has the reporting entity sold or transferred force? (Exclude securities subject to Interrogatory 21.1 and 24.03).	any assets subject to a put option contract that is currently in	Yes [X] No []
25.2	If yes, state the amount thereof at December 31 of the current year:	25.21 Subject to repurchase agreements	\$0
		25.21 Subject to repurchase agreements	\$0
		25.23 Subject to dollar repurchase agreements	\$0
		25.24 Subject to reverse dollar repurchase agreements	\$0
		25.25 Placed under option agreements	\$0
		25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	
		25.27 FHLB Capital Stock	
		25.28 On deposit with states	\$
		25.29 On deposit with other regulatory bodies	
		25.30 Pledged as collateral - excluding collateral pledged an FHLB	to
		25.31 Pledged as collateral to FHLB - including assets backing funding agreements	
		25.32 Other	

25.3 For category (25.26) provide the following:

	1 Nature of Restriction	2 Description		3 ount	
	Not applicable				0
26.1	Does the reporting entity have any hedging transactions reported on Sc	hedule DB?	Yes [] No [X]
26.2	If yes, has a comprehensive description of the hedging program been n If no, attach a description with this statement.	nade available to the domiciliary state? Yes [] No [] N/#	(X
LINES 2	6.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONI	_Y:			
26.3	Does the reporting entity utilize derivatives to hedge variable annuity gu	arantees subject to fluctuations as a result of interest rate sensitivity?	Yes [] No []
26.4	26.42 Per	ecial accounting provision of SSAP No. 108 mitted accounting practice er accounting guidance	Yes []]]
26.5	 reserves and provides the impact of the hedging strategy within Financial Officer Certification has been obtained which indicated 	niciliary state. s consistent with the requirements of VM-21. he hedging strategy is incorporated within the establishment of VM-21	Yes [] No []
27.1	Were any preferred stocks or bonds owned as of December 31 of the c issuer, convertible into equity?	urrent year mandatorily convertible into equity, or, at the option of the	Yes [] No [X]
27.2	If yes, state the amount thereof at December 31 of the current year		\$		
28.	Excluding items in Schedule E - Part 3 - Special Deposits, real estate, r offices, vaults or safety deposit boxes, were all stocks, bonds and other custodial agreement with a qualified bank or trust company in accordan Outsourcing of Critical Functions, Custodial or Safekeeping Agreement	securities, owned throughout the current year held pursuant to a	Yes [)	X] No[]
20.04	For every sets that complements of the NAIC Figure 2	- Constituen Eventiness I longly and a second to the following			

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

1	2
Name of Custodian(s)	Custodian's Address
SunTrust Bank	P.O. Box 465, Atlanta, GA 30302

GENERAL INTERROGATORIES

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

1	2	3	
Name(s)	Location(s)	Complete Explanation(s)	
Not applicable			

Γ	1	2	3	4
	Old Custodian	New Custodian	Date of Change	Reason
				Not applicable

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

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

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
				Investment
				Management
Central Registration				Agreement
Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed
105900	New England Asset Management, Inc.	KUR85E5PS4GQFZTFC130	SEC	N0
l				

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?

Yes [] No [X]

1	2	3
		Book/Adjusted
CUSIP #	Name of Mutual Fund	Carrying Value
	Not applicable	0
29.2999 - Total		0

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

If yes, complete the following schedule:

29.2

1	2	3	4
		Amount of Mutual	
		Fund's Book/Adjusted	
		Carrying Value	
	Name of Significant Holding of the	Attributable to the	Date of
Name of Mutual Fund (from above table)	Mutual Fund	Holding	Valuation
Not applicable		0	

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

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
30.1 Bonds	4,607,008	4,885,617	
30.2 Preferred stocks			0
30.3 Totals	4,822,408	5,101,017	278,609

30.4	Describe the sources or methods utilized in determining the fair values:		
	Fair values are based on end of period prices provided by independent pricing services such as Refinitiv or IHS Markit. If a vendor price is unavailable, a price may be obtained from a broker. Short-term securities are valued at amortized cost. Cash equivalents, excluding money market mutual funds, are valued at amortized cost. Money market mutual funds are valued using a stable Net Asset Value (NAV).		
31.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Yes [] No [X]
31.2	If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Yes [] No []
31.3	If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D: Not applicable		
32.1 32.2	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? If no, list exceptions: Not applicable	Yes [X] No []
33.	 By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security: a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal. 		
	Has the reporting entity self-designated 5GI securities?	Yes [] No [X]
34.	 By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security: a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators. d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO. 	Yes [] No [X]
35.	 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?	·	
36.	 By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following: a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date. b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties. c. If the investment is available for regulator review. d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 36.a - 36.c are reported as long-term investments. 	1 N- F Y	

GENERAL INTERROGATORIES

OTHER

37.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?	\$	427,923
37.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade a service organizations and statistical or rating bureaus during the period covered by this statement.	ssociations,	
	1 2 Name Amount Paid		
38.1	Amount of payments for legal expenses, if any?	\$	
38.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.	3	
	Name Amount Paid Bryan, Cave, Leighton, Paisner, LLP		
39.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if a	any?\$	0
39.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement		

1	2
Name	Amount Paid

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supple	ment Insurance in force?	Yes [] No [X]
1.2	If yes, indicate premium earned on U.S. business only		\$0
1.3	1.31 Reason for excluding	Supplement Insurance Experience Exhibit?	\$0
1.4	Indicate amount of earned premium attributable to Canadia	an and/or Other Alien not included in Item (1.2) above.	\$0
1.5	Indicate total incurred claims on all Medicare Supplement	Insurance.	\$0
1.6	Individual policies:	Most current three years:	
	· · · · · · · · · · · · · · · · · · ·	1.61 Total premium earned	\$ 0
		1.62 Total incurred claims	
		1.63 Number of covered lives	
		All years prior to most surrent three years	
		All years prior to most current three years 1.64 Total premium earned	¢ O
		1.65 Total incurred claims	
		1.66 Number of covered lives	0
<i>.</i> –			
1.7	Group policies:	Most current three years:	
		1.71 Total premium earned	
		1.72 Total incurred claims	\$0
		1.73 Number of covered lives	0
		All years prior to most current three years	
		1.74 Total premium earned	\$0
		1.75 Total incurred claims	\$0
		1.76 Number of covered lives	
2.	Health Test:		
		1 2	
		Current Year Prior Year	
	2.1 Premium Numerator	0	
	2.2 Premium Denominator		
	2.3 Premium Ratio (2.1/2.2)		
		00	
	2.0 10001001001000(2.112.0)		
3.1	Did the reporting entity issue participating policies during the	he calendar year?	Yes [] No [X]
3.2	If yes, provide the amount of premium written for participat	ting and/or non-participating policies	
	during the calendar year:		
		3.21 Participating policies	
		3.22 Non-participating policies	\$0
4.	For mutual reporting Entities and Reciprocal Exchanges O		
4.1	Does the reporting entity issue assessable policies?		Yes [] No []
4.2	Does the reporting entity issue non-assessable policies?		Yes [] No []
4.3	If assessable policies are issued, what is the extent of the	contingent liability of the policyholders?	%0.0
4.4	Total amount of assessments paid or ordered to be paid d	uring the year on deposit notes or contingent premiums.	\$0
5.	For Reciprocal Exchanges Only:		
5.1	Does the Exchange appoint local agents?		Yes [] No []
5.2	If yes, is the commission paid:		
	5.21	Out of Attorney's-in-fact compensation] No [] N/A []
		As a direct expense of the exchange	
5.3	What expenses of the Exchange are not paid out of the co		,
5.4		Ilment of certain conditions, been deferred?	Yes [] No []
0.1			
5.5	If yes, give full information		
0.0			

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss? The Company maintains a reinsurance placement comprised of both an at least 87.5% primary Quota Share Treaty up to \$1,000,000 per claim and an Excess of Loss Treaty up to \$49 million, any one claim. Net losses after both the Quota Share and the Excess reinsurance treaties are then protected by a 70% Quota Share maintained with the JRG Reinsurance Company, Ltd, an affiliate; and beginning in 2018 with Carolina Re, also an affiliate.				
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process. For workers' compensation, the Company relies upon Catastrophe modeling expertise from its reinsurance brokers. For all other business the PML is estimated by use of catastrophic modeling software from AIR Worldwide Touchstone version 5.1.				
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss? With the exception of one program, the company cedes at least 85% of all exposures via a primary 1M quota share reinsurance. For one specific property per risk reinsurance treaty, the company cedes 20% of primary 500K and 100% of 39.5M excess of 500k per occurrence				
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes [X]	No []	
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss. Not applicable				
7.1	Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)?	Yes []	No [X]	
7.2	If yes, indicate the number of reinsurance contracts containing such provisions:				.0
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes [X]	No []	
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes [X]	No []	
8.2	If yes, give full information Not applicable				
9.1	 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; 				
	(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or				
	(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.	Yes []	No [X]	
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or				
	(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes []	No [X]	
9.3	 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved. 				
9.4	 Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? 	Yes []	No [X]	
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.				
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:	V F	1		
	 (a) The entity does not utilize reinsurance; or, (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation 			No [X]	
	supplement; or. (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an ettoptican external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an		-	No[X]	
10	attestation supplement.	169 [1	No [X]	

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1	Has the reporting entity guaranteed policies issued b	y any other entity and n	ow in force?			Yes [] No [X]
11.2	If yes, give full information Not applicable					
12.1	If the reporting entity recorded accrued retrospective amount of corresponding liabilities recorded for:					
						0
		12.12 Unp	aid underwriting expens	ses (including loss adjus	tment expenses)	\$0
12.2	Of the amount on Line 15.3, Page 2, state the amount	nt which is secured by le	etters of credit, collateral	l, and other funds		.\$0
12.3	If the reporting entity underwrites commercial insurar accepted from its insureds covering unpaid premium	nce risks, such as worke s and/or unpaid losses?	ers' compensation, are p	premium notes or promis	sory notes Yes [] No [X] N/A []
12.4	If yes, provide the range of interest rates charged un	der such notes during th	e period covered by this	s statement:		
		12.41 From	n			
		12.42 To				
12.5	Are letters of credit or collateral and other funds rece promissory notes taken by a reporting entity, or to se losses under loss deductible features of commercial	cure any of the reporting	entity's reported direct	unpaid loss reserves,	including unpaid	Yes [X] No []
12.6	If yes, state the amount thereof at December 31 of the	e current year:				
		12.61 Lett	ers of credit			.\$
		12.62 Coll	ateral and other funds			.\$
13.1	Largest net aggregate amount insured in any one ris	k (excluding workers' co	mpensation):			\$150,000
13.2	Does any reinsurance contract considered in the calor reinstatement provision?					Yes [] No [X]
13.3	State the number of reinsurance contracts (excluding facilities or facultative obligatory contracts) considered	individual facultative rised in the calculation of the	sk certificates, but includ ne amount.	ding facultative program	s, automatic	
14.1	Is the company a cedant in a multiple cedant reinsur	ance contract?				Yes [X] No []
14.2	If yes, please describe the method of allocating and a Premiums and losses are ceded on a pro-rata basis.					
14.3	If the answer to 14.1 is yes, are the methods describ contracts?					Yes [] No [X]
14.4	If the answer to 14.3 is no, are all the methods descr	ibed in 14.2 entirely con	tained in written agreen	nents?		Yes [] No [X]
14.5	If the answer to 14.4 is no, please explain: Premiums and losses are ceded on a pro-rata basis.					
15.1	Has the reporting entity guaranteed any financed pre	mium accounts?				Yes [] No [X]
15.2	If yes, give full information Not applicable					
16.1	16.1 Does the reporting entity write any warranty business?					Yes [] No [X]
		1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11	Home	0	0	0		.0

..0

0

0

..0

.0

0

..0

.0

0

..0

0

0

0 0 0

16.14 Other* * Disclose type of coverage:

16.12 Products

16.13 Automobile

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1	Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance?	Yes [] No [X]
	Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:	
	17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance	\$0
	17.12 Unfunded portion of Interrogatory 17.11	
	17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11	
	17.14 Case reserves portion of Interrogatory 17.11	\$0
	17.15 Incurred but not reported portion of Interrogatory 17.11	\$0
	17.16 Unearned premium portion of Interrogatory 17.11	
	17.17 Contingent commission portion of Interrogatory 17.11	\$0
18.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]
18.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$0
18.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]
18.4	If yes, please provide the balance of funds administered as of the reporting date.	\$0
19.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X] No []
19.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [] No []

FIVE-YEAR HISTORICAL DATA

	Show amounts in whole do	YEAR HIS llars only, no cents; s			.e. 17.6.	
		1 2020	2 2019	3 2018	4 2017	5 2016
	Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3,		238,069,195	165.225.538		
	- , - , - , , - , - ,		, ,			
3 F	Property and liability combined lines (Lines 3 4 5					
	8, 22 & 27)		23,416,350	16,663,231		14,866,510
4. <i>I</i>	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	386.756	0	0	(1)	
	Nonproportional reinsurance lines (Lines 31, 32 &					
	33)	0	0	0	0	0
	Fotal (Line 35) Net Premiums Written (Page 8, Part 1B, Col. 6)				144 , 136 , 524	
	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3,					
	18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	, ,				5,805,441
		111,679				
	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)			665		
	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28					,
		0	0	0	(1)	0
11. 1	Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
12. 1	Гоtal (Line 35)					
5	Statement of Income (Page 4)					
	Net underwriting gain (loss) (Line 8)		,	'		(217,594
14. N	Net investment gain or (loss) (Line 11)					
15. 1	Fotal other income (Line 15)	2,362,169			8,314	
16. [17. F	Dividends to policyholders (Line 17) Federal and foreign income taxes incurred (Line 19)	1,580,054	0	0	0 	0 (527,975
	Net income (Line 20)		1,042,875			
	Balance Sheet Lines (Pages 2 and 3)					
19. 1	Total admitted assets excluding protected cell					
	business (Page 2, Line 26, Col. 3)			405,957,041		
	Premiums and considerations (Page 2, Col. 3) 20.1 In course of collection (Line 15.1)	07 599 021		39,111,532		
			, ,	, ,		
21	Fotal liabilities excluding protected cell business					
	(Page 3, Line 26)		, ,			
	Losses (Page 3, Line 1)		, ,	, ,		
23. L 24. l	Loss adjustment expenses (Page 3, Line 3) Jnearned premiums (Page 3, Line 9)	9, 180,233 7 100 675			, ,	5,789,913 2,775,205
24. 0	Capital paid up (Page 3, Lines 30 & 31)			4,200,000		
26. 5	Surplus as regards policyholders (Page 3, Line 37)					
(Cash Flow (Page 5)					
	Net cash from operations (Line 11)	(26,695,554)	(50 , 100 , 484)			
	Risk-Based Capital Analysis	114 001 700	00.004.000	04 001 404	50 070 071	
28. 1 29. A	Fotal adjusted capital Authorized control level risk-based capital	114,031,792				56,705,930 14 720 772
F	Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. E	Sonds (Line 1) Stocks (Lines 2.1 & 2.2)		5.1			
31. 8	Stocks (Lines 2.1 & 2.2) Nortgage loans on real estate (Lines 3.1 and 3.2)	/6.1				
32. M 33. F	Real estate (Lines 4.1, 4.2 & 4.3)		0.0			
34 (Cash, cash aquivalants and short term investments					
	(Line 5)		11.7	8.5		
35. (Contract loans (Line 6)	0.0	0.0			0.0
36. [Derivatives (Line 7) Dther invested assets (Line 8)	0.0	0.0	0.0		0.0 0.0
37. (38. F	Receivables for securities (Line 8)					
30 9	Securities lending reinvested collateral assets (Line					
			0.0			0.0
	Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
41. (Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
I	nvestments in Parent, Subsidiaries and					
12 /	Affiliates Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)	_	_	0	0	0
10	Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44 A	Affiliated common stocks (Schedule D. Summary					
15 /	Affiliated short-term investments (subtotals included					
46	in Schedule DA Verification, Col. 5, Line 10)	0		0		
	Affiliated mortgage loans on real estate		v	0	0	0 0
47. 7 48. 1	All other affiliated Fotal of above Lines 42 to 47	94.354 687	83.568.671		40.453.677	44,029,423
49 1	Fotal Investment in Parent included in Lines 42 to 47 above					
50. F	Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders					
	(Line 48 above divided by Page 3, Col. 1, Line 37	5 00	04.0	04.0	c0 7	~ ~~
	x 100.0)	82.7	84.2	84.3	69.7	77.6

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company FIVE-YEAR HISTORICAL DATA

		(Cont	inued) 2	3	4	5
		2020	2019	2018	2017	2016
	Capital and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)					(156,176
52.	Dividends to stockholders (Line 35)	0	0	0	0	(
53.	Change in surplus as regards policyholders for the year (Line 38)		5,192,742		1,372,441	(473,608
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)		63,014,247	50,105,241		
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	9,369,760	3,312,747	3,247,184	4,363,826	
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	7,342,165		5,836,096	9,817,727	2, 196, 10
57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)		0	0	0	
58.	Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	
59.	Total (Line 35)					
	Net Losses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	3, 157, 599	3,136,203	2,623,044	3,997,790	7,505,73
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)		4,629	3,514	6,137	5,31
63.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	
64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	
65.	Total (Line 35)	3, 190, 502	3, 165, 524	2,645,046	4,076,138	7,563,16
	Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66.	Premiums earned (Line 1)					
67.	Losses incurred (Line 2)					
68.	Loss expenses incurred (Line 3)					
69.	Other underwriting expenses incurred (Line 4)	5.3				
70.	Net underwriting gain (loss) (Line 8)		5.0	5.4	8.2	
	Other Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	(11.0)	11.4			
72.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	60.8		74.3		
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)					
	One Year Loss Development (\$000 omitted)					
74.	expenses incurred prior to current year (Schedule	(989)	(522)	(171)	(127)	(51
75.						
	Two Year Loss Development (\$000 omitted)					
76.	Development in estimated losses and loss expenses incurred two years before the current					
	year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(1,104)	(492)	26	(722)	
77.	Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above					
	divided by Page 4, Line 21, Col. 2 x 100.0)	(1.2)	(0.8)	0.0	(1.3)	(1.8



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 3494 BUSINE	<u>SS IN THE STATE O</u>				_		D0r	RING THE YEAF	K 2020	NAIC COIL	pany Code 3	
	Policy and Mer Less Return F	1 2 or Credit			5	6	7	8	9	10 Direct Defense	11	12
	Premiums on Po		Dividends Paid					Direct Defense	Direct Defense	and Cost		
	1		or Credited to					and Cost	and Cost	Containment	Commissions	
Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licens and Fees
1. Fire		2, 127, 490	0	1,226,779	1,380,221	1,488,953						111,
2.1 Allied lines	7 ,779,824	7 , 049 , 796	0		1,414,661	2,366,220	1, 154,087				1,789,389	
2.2 Multiple peril crop	0	0	0	0	0	0	0	0	0	0	0	
2.3 Federal flood	0	0	۵	0	0	۵	0	0	0	0	0	
2.4. Private crop	0	0	0	0	0	0	0	0	۵	0	D	
2.5 Private flood	0	0	Q	0	0	Q	0	0	0	0	0	
3. Farmowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	
4. Homeowners multiple peril	0	0	0	0	0	0	0	0	0	0	0	
5.1 Commercial multiple peril (non-liability portion)		14,301,521	0	7,490,038			10,903,892	432.242		1.645.710	4,173,158	413
5.2 Commercial multiple peril (liability portion)	7,624,740		0	3,937,075	1,397,506	4,968,324	18,959,032	1,051,730	1,605,404	2,654,143		
 Mortgage guaranty 	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0	0			0		0	0	0		
8. Ocean marine	0	0	0	0	0	0	0	0	0	0	0	
9. Inland marine	2.349.248	1.684.057		1.367.602				2.582				
		1,004,00/	V									
10. Financial guaranty			U								U	••••••
11. Medical professional liability				0	U			U	0	U	U	
2. Earthquake	6,854	7, 115	0		0	0	0	0	0	0	1,748	••••••
Group accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	
14. Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0	0	0	
15.1 Collectively renewable accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	
15.2 Non-cancelable accident and health(b)	0	0	0	0	0	0	0	0	0	0	0	
5.3 Guaranteed renewable accident and health(b)	0	0	0	0	0	0	0	0	0	0	۵	
5.4 Non-renewable for stated reasons only (b)	0	0	0	0	0	0	0	0	0	0	0	
15.5 Other accident only	0	0	0	0	0	0	0	0	0	0	0	
15.6 Medicare Title XVIII exempt from state taxes or fees.	0	0	0	0	0	0	0	0	0	0	0	
15.7 All other accident and health (b)	0	0	0	0	0	0	0	0	0	0	0	
15.7 All other accident and reach (b)	0		0 0		0				0	0		
	12.756.618	12.788.389		2,012,813	6.792.642	14.937.820	19.169.364		1.879.195	2.955.550	2.005.911	496
16. Workers' compensation	, , ,			13,915,797		4,802,925	24.357.195	1, 116, 138	1,095,345	3.571.876		
17.1 Other Liability - occurrence					1,347,490						5,245,007	
17.2 Other Liability - claims made	,	,	0	, -			,	,	,			
17.3 Excess workers' compensation	0	0	0	0	0	O	0	0	0	0	0	
18. Products liability			0		0	10,704			1,004		19,017	
19.1 Private passenger auto no-fault (personal injury protection)			0	5, 149, 368	3,873,488	11,718,720	24,455,671	4,249,892	6,810,477	6,598,257	4,452,559	
19.2 Other private passenger auto liability			0	3, 156, 227	5,655,008	7,617,497			536,617	1,368,639	2, 177, 340	
19.3 Commercial auto no-fault (personal injury protection)			0	400,278	715,776		1,461,825					
19.4 Other commercial auto liability			0		17,991,841			2,883,563	4,505,780	7,027,286	9,215,012	1,873
21.1 Private passenger auto physical damage		2,902,054	0		1,804,092	1,438,146						
21.2 Commercial auto physical damage			0	6, 157, 237	4,178,248		4,526,025					
22. Aircraft (all perils)			0			1,705,244		0			2,552,045	
23. Fidelity	0	0	0	0	0	0	0	0	0	0	0	
24. Surety	Ő	0	0	0		0	0	Ũ	0	0	0	
26. Burglary and theft	589.892	432.868	0		53.138		37.341	1.165	6.038	5.707	135.678	
27. Boiler and machinery	1,783,827	1,502,081							94.605			
								6.447	42.490			
			0	0			223,247	0,447			U	
29. International				······	U			U				
30. Warranty				⁰	0			0		0	l	·
34. Aggregate write-ins for other lines of business		0	0	······			0	0	0	0		
35. TOTALS (a)	183,964,023	163,705,260	0	83,126,064	53,527,993	95,776,719	171,810,034	11,754,625	18,639,856	27,610,974	38,303,421	6,979
DETAILS OF WRITE-INS												
2												
03												
8. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	
9. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1

(a) Finance and service charges not included in Lines 1 to 35 \$4,361,722

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (\$000 Omitted)

1	2	3	4	5	Reinsura		8		10	11	12	13	14	15
	2	5	-	5	6	7	5	3	10		12	15	Amount of Assets	15
					0	'							Pledged or	
	NAIC										Funds Held By or		Compensating	Amount of
	Com-				Paid Losses and			Contingent	Assumed		Deposited With		Balances to	Assets Pledged
ID	pany		Domiciliary	Assumed	Loss Adjustment	Known Case		Commissions	Premiums	Unearned	Reinsured	Latters of Credit	Secure Letters of	
Number	Code	Name of Reinsured	Jurisdiction	Premium	Expenses	Losses and LAE	Cols. 6 + 7	Payable	Receivable	Premium	Companies	Posted	Credit	Held in Trust
22-2824607	12203	James River Insurance Company						1 dydbic				1 05100	orcuit	
47-1588915		Falls Lake Fire and Casualty Company	CA					0				0	0	0
20-8946040		James River Casualty Company	VA			1.583		0				0	0	0
20-0328998		Stonewood Insurance Company	NC.					0			20,328	0	0	0
		- U.S. Intercompany Pooling	110	141.641	11,562	69,227	80.789	0	36,645	68,541	315,408	0	0	0
		I.S. Non-Pool		141,041	0	05,227	00,709	0	0,040	00,041	0	0		0
		other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0
07999999.				141,641	11,562	69,227	80,789	0	36,645	68.541	315.408	0	ş	0
		IDINEGAL MUT INS CO	DA	141,041	,		80,789	0	36,645	00,041	315,408	0	0	0
			PA	I	4			0	, , ,	0	••••••		0	0
		her U.S. Unaffiliated Insurers	ND/		4	70	74	0	(17)	0	0	0	0	0
AA-9992118 .		National Workers' Compensation Pool	NY					0			0	0	0	0
AA-9991103 .	00000	Arkansas Commercial Auto Insurance Procedure	AR	0	0		1	0	0	0	0	0	0	0
AA-9991107 .		Colorado Commercial Auto Insurance Procedure	CO	1	0	1	1	0	0	0	0	0	0	0
AA-9991108 . AA-9991167 .	00000	Connecticut Commercial Auto Insurance Procedure DC Commercial Auto Insurance Procedure		3	0	0	0	0	3.	2	0	0	0	0
AA-9991167 . AA-9991110 .		Delaware Commercial Auto Insurance Procedure	DC	U	0	0	0	0	0	0	0	0	0	0
AA-9991110 . AA-9991112 .	00000	Georgia Commercial Auto Insurance Procedure	UE	1	0	0	0	0	0.	0	0	0	0	0
AA-9991112 . AA-9991115 .		Illinois Commercial Auto Insurance Procedure	UA	0	0		0	0	U.	0	0	0	0	0
AA-9991113 . AA-9991120 .		Kentucky Commercial Auto Insurance Procedure	IL		10	ນວ	<u>0</u> 0 0	0		12	0	0	0	0
AA-9991120 . AA-9991121 .	00000	Louisiana Commercial Auto Insurance Procedure	ΙΔ	۱۱ ۱	0	2 3	ے۔۔۔۔۔ ۸	0		0	0	0	0	0
AA-9991125 .	00000	Minnesota Commercial Auto Insurance Procedure	LA	0	0			0	0	0	0	0	0	0
AA-9991127 .	00000	Mississippi Commercial Auto Insurance Procedure	MS		0	5		0	0	0	0	0	0	0
AA-9991134		New Jersey Commercial Auto Insurance Procedure	N.I	119	19	192		0			0	0	0	0
AA-9991136		New Mexico Commercial Auto Insurance Procedure	NM			2	2	0			0	0	0	0
AA-9991137		New York Special Distribution Program	NY	91	12	152	164	0			0	0	0	0
AA-9991141		Ohio Commercial Auto Insurance Procedure	OH	3	0	2	2	0	2	2	0	0	0	0
AA-9991143	00000	Oregon Commercial Auto Insurance Procedure	OR	0	0	1	1	0	0	0	0	0	0	0
AA-9991144		Pennsylvania Commercial Auto Insurance Procedure	PA.	1	0	0	0	0	0		0	0	0	0
AA-9991146		Rhode Island Commercial Auto Insurance Procedure	RI		0	0	0	0	0		0	0	0	0
AA-9991153		Virginia Commercial Auto Insurance Procedure	VA	7	0			0		3	0	0	0	0
AA-9991156 .		West Virginia Commercial Auto Insurance Procedure	WV	1	0	0	0	0	0	1	0	0	0	0
AA-9991414 .		Indiana Workers Comp	IN	2	0			0	0	0	0	0	0	0
AA-9991161	00000	Commonwealth Automobile Reinsurers	MA		0	7	7	0	0	8	0	0	0	0
	Total Po	ols, Associations or Other Similar Facilities - Mandatory Pools	3	938	95	801	896	0	198	297	0	0	0	0
		ools and Associations		938	95	801	896	0	198	297	0	0	0	0
9999999 T				142,580	11,661	70,098	81,759	0	36,826	68,838	315,408	0	0	0
2222222 I	ulais			142,000	11,001	70,090	01,733	0	00,020	00,000	515,400	0	0	l l

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 2 3 4 5 ID pany Date of Contract Original Premium Number Code Name of Company 0	6 Reinsurance Premium
ID Number Com- pany Code Date of Original Premium Original Premium	Reinsurance Premium
ID Number Date of Code Original Premium I Image: Code Name of Company Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code Image: Code	Reinsurance Premium
	Premium

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

		•		-		Ceueu	Remounding		mber 31, CL			u)			1 10 1		<u> </u>	10	
1	2	3	4	5	6			0		ance Recoveration		1			16	Reinsurand		19	20
						7	8	9	10	11	12	13	14	15		17	18	Net Amount	Funds Held
																		Recoverable	by
	NAIC														Amount in		Other	From	Company
	Com-				Reinsurance			Known	Known	IBNR	IBNR		Contingent	Columns	Dispute	Ceded	Amounts	Reinsurers	Under
ID	pany		Domiciliary	Special	Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Commis-	7 through	included in	Balances	Due to	Cols. 15 -	Reinsurance
Number	Code	Name of Reinsurer	Jurisdiction	Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	14 Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
.22-2824607		ames River Insurance Company	0H	0000									0		0		0		
					90,594			33,845			45,898	43,863			0				
		ized - Affiliates - U.S. Intercompany Poo	bling		90,094	6,320	1,646		10, 101	64,935		,	0			22,899	0		198,642
		ized - Affiliates - U.S. Non-Pool			0	0	0			0	0	0	0		0	0	0		•
0799999. T	otal Authori	ized - Affiliates - Other (Non-U.S.)			0	0	0		0	0	0	0	0		0	0	0		
0899999. T	otal Authori	ized - Affiliates			90,594	6,320	1,646	33,845	10, 101	64,935	45,898	43,863	0	206,608	0	22,899	0	183,709	198,642
.02-6005008	23337 Am	merican European Insurance Company	NH			0	0	6,732			3, 103		0		0	1, 161	0		0
.06-1430254		rch Reins Co	DE						198				0		0	1,594	0		0
.51-0434766		xis Reins Co	NY		4,705		117	1,592			617	1,520	0		0	1,423	0		0
.06-0237820		hubb Tempest Re US	PA		4,415		144	1,657				117	0		0		0		0
.31-0542366		he Cincinnati Ins Co	OH		1,908	39				1,982			0		0	498	0		0
		ndurance Assurance Corporation of America							_						······ •				
.35-2293075		autore resolution of poracion of America	DF			36							0		n –		n		<u>م</u>
.13-2673100		poral Paine Corp					۱۵۱۵ ۸						U		0		U		
. 13-2673 100		eneral Reins Corp otors Insurance Corporation	UE			17 16													
			MI	•••••											·····		U		
.13-4924125		unich Reins Amer Inc	DE	• • • • • • • • • • • • • • • • • • • •			63			3, 126		1,348	0	7,782			0	7,086	0
.47-0355979		ational Indemnity Company	NE	· · · · · · · · · · · · · · · · · · ·	(226)			1,935		3, 124		545	0	6,441	0	(1)	0	6,442	0
.31-4177110		ationwide Mutual Fire Insurance Co	ОН				16	412				1,892	0	3,426	0		0	2,461	0
.47-0698507		dyssey Reins Co	CT			81		1,033		2,612		1,050	0	5,569	0		0	4,914	0
.13-3031176		artner Reinsurance Company of the US	NY			17	7					12	0	1,862	0		0	1,781	0
.52-1952955	10357 Re	enaissance Reinsurance U.S. Inc	MD			8	9					818	0	2,098	0	635	0	1,463	O
.43-0727872	15105 Sa	afety National Casualty Corporation	MO				10	1,082		1,027			0	2,682	0		0	2, 160	0
.13-1675535		wiss Reinsurance America Corporation	NY			1,851			2,764		5,816		0		0		0		0
.75-1444207		COR Reinsurance Company	NY.		6		0	0	0	0	0	0	0	0			0		0
13-2918573	42439 To	pa Reinsurance Company	DE		0	66	41	544	43	379	67	0	0	1.140	0	0	0	1.140	0
30-0703280		okio Millennnium Re AG	NY		14	0	48	1,843	196	1,020	180	0	0	3.287	0	68	0		0
.13-5616275		ransatlantic Reins Co	NY			17			19	400	70		0	1,015	0		0		0
13-1290712		Reinsurance America, Inc.	NY		2,480	53	14	834	53		158		0		0	365	0		0
.05-0316605		actory Mutual Insurance company	DI								60		0		0	100			0
.95-2769232		nsurance Company of the West	ni				0					430	0		0		0		0
.23-1641984			UA			U.	0	1,525	0/		2	0	u	1,029				1,000	
		BE Reins Corp	PA PA	•••••					0	U	1 000	U				(3)			0
.23-1336198		shogur mat the co	PA DF		(14)			1,283	Q	5,855	1,033	0	0			0	0	8,242	0
.22-2005057		verest Reins Co	DE	· · · · · · · · · · · · · · · · · · ·			0		1	1/	2		0	214	0	(3)	0	217	0
.74-2195939		ouston Casualty Company	IX			0	0	0	0	0	0	0	0	0	0	1	0	(1)	
.06-1481194		arkel Global Reins Co	DE		0	0	0	0	0	0	0	2	0	2	0	3	0	(1)	0
.95-3187355		llianz Global Risk US	IL			0	0	0	0	3	0		0		0	5	0	47	0
.95-4387273	19489 AI	llied World Assurance Co US	DE						45			1,565	0		0	1,616	0	1,390	0
0999999. T	otal Authori	ized - Other U.S. Unaffiliated Insurers			131,977	3,483	1,804	42,744	6,338	90,188	15,626	54,855	0	215,038	0	33,668	0	181,370	0
.AA-9991159		ichigan Catastrophe Claim Assn	MI				0		0				0		0	(2,014)	0		0
.AA-9995035		utual Reins Bureau	IL			0	0			3	1	3	0		0	19	0		0
		ized - Pools - Mandatory Pools			1,671	193	0		15	20	4	51	0	1,104	0	(1,995)	0		0
.AA-1120337		spen Ins UK Ltd	GBR		1,079	0	0				16		0		0		0		0
.AA-1120337		annover Ruckversicherungs AG	DEU.			1.339					1.020		U		·····	4.948	U		
			GBR.	• • • • • • • • • • • • • • • • • • • •							1,020								
.AA-1126033		loyd's Syndicate Number 0033		•••••		ıı			5				0		ŏ	(13)	0		0
.AA-1126435		loyd's Syndicate Number 0435	GBR			0	0		16	0	0	0	0				0		0
.AA-1126510		loyd's Syndicate Number 0510	GBR			6	0	2	0	0	0	114	0		0	2	0		0
.AA-1126566		loyd's Syndicate Number 0566	GBR			0	0	0	0	0	0	0	0	0	0	0	0	0	0
.AA-1126609		loyd's Syndicate Number 0609	GBR			1	Q	0	O	3	0		0		0 .	0	0		0
.AA-1126727	00000 LI	loyd's Syndicate Number 0727	GBR				0	1	D	D	0	54	۵		O	0	0		۵
.AA-1127414	LI	loyd's Syndicate Number 1414	GBR			0	0	0	0	18	0		0		0		0		0
.AA-1126780		loyd's Syndicate Number 0780	GBR.			0	0	.48			1	0	0				0		0

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

	-	-	1	_		00000	toiniourunt				SUUD Omitte	u)							
1	2	3	4	5	6			1		rance Recover			r	1	16	Reinsuran	-	19	20
						7	8	9	10	11	12	13	14	15		17	18	Net Amount	Funds Held
																		Recoverable	by
	NAIC														Amount in		Other	From	Company
	Com-				Reinsurance			Known	Known	IBNR	IBNR		Contingent	Columns	Dispute	Ceded	Amounts	Reinsurers	Under
ID			Domiciliary	Special	Premiums	Paid	Paid			Loss	LAE	Lincornod			included in			Cols. 15 -	Reinsurance
	pany	Name of Deineuron						Case Loss	Case LAE			Unearned	Commis-	7 through		Balances	Due to		
Number	Code	Name of Reinsurer	Jurisdiction	Code	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	14 Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
.AA-1127084	00000	Lloyd's Syndicate Number 1084	GBR				0	1	0	8	1		0		0	(2)	0		0
.AA-1120156	00000	Lloyd's Syndicate Number 1686	GBR			0	0		1	1	0	0	0		0	0	0		0
.AA-1127861	00000	Lloyd's Syndicate Number 1861	GBR.		81	0	0	0	0	3	0	20	0		0	(6)	0		0
AA-1120084	.00000	Lloyd's Syndicate Number 1955	GBR.		24	ñ	p	ñ	0	0	0	0	0		ñ	3	ñ	(3)	0
.AA-1128001	.00000	Lloyd's Syndicate Number 2001	GBR.	•••••	.214						203		0				0		0
			GBR.	•••••			01	2,312	230	1, 100			0						0
.AA-1128003	00000	Lloyd's Syndicate Number 2003		••••••			0						0				0		0
.AA-1120158	00000	Lloyd's Syndicate Number 2014	GBR			0	0	144				0	0				0		0
.AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR			6	0	2	0	11	1		0			(7)	0		0
.AA-1128791	00000	Lloyd's Syndicate Number 2791	GBR			15 .	0	5	1		4	357	0		0	(8)	0		D
.AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR			0	1					612	0		0		0		0
.AA-1129000	00000	Lloyd's Syndicate Number 3000	GBR.		12	0	0	0	0	0	0	32	0		0	3	0		0
.AA-1126005	.00000	Lloyd's Syndicate Number 4000	GBR.		36	0	0	0	0	2	0	17	0			(13)	0		0
.AA-1120000	.00000	Lloyd's Syndicate Number 4000	GBR.			n .		۰ ۱	۵. ۱	0	۵ ۱	A	<u>ر</u>	A	0	(10)	<u>م</u>	Q	n N
.AA-1126004			GBR	•••••	12			0			0					(2)			0
	00000	Lloyd's Syndicate Number 4444	GBR	•••••			U							0 228	0		0	(1) 148	
.AA-1126006	00000	Lloyd's Syndicate Number 4472				0	0	0	0				0		0	80	0		0
.AA-1120006	00000	Lloyd's Syndicate Number 1980	GBR			0	0	0	0	0	0	0	0	0	0	0	0	0	0
.AA-1120163	00000	Lloyd's Syndicate Number 5678	GBR			0	0	0	0		6		0		0		0		0
.AA-1120067	00000	Lloyd's Syndicate Number 4242	GBR			0	0	0	0	0	0		0		0	0	0		0
.AA-1120097	00000	Lloyd's Syndicate Number 2468	GBR		22	0	0	0	0	0	0	10	0	10	0	0	0	10	0
.AA-1126623	00000	Lloyd's Syndicate Number 623	GBR.		2	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1126382	.00000	Lloyd's Syndicate Number 382	GBR.	•••••	8	۰ ۵	¢	0	0	¢	0	p	0	0	¢	0	0	0	0
.AA-1120002	.00000	Lloyd's Syndicate Number 302	GBR	•••••				0			0					0		0	
				••••••			0	0	0	0		0			0	0	0		0
.AA-1120106	00000	Lloyd's Syndicate Number 1969	GBR				U		0	U	0	0	0	0	U	U		0	
.AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR			0	0	0	0	0	0	0	0	0	0	(2)	0	2	0
.AA-1120124	00000	Lloyd's Syndicate Number 1945	GBR			0	0	0	0	0	0	0	0	0	0	(2)	0	2	0
.AA-1120113	00000	Lloyd's Syndicate Number 3334	GBR			0	0	0	0	0	0	0	0	0	0	(1)	0	1	0
.AA-1120179	00000	Lloyd's Syndicate Number 2988	GBR.		. 167	0	0	0	0		2		0		0	0	0		0
.AA-1120157	.00000	Lloyd's Syndicate Number 1729	GBR.		10	0	0	0	0	0	0	7	0	7	0	1	0	6	0
.AA-1840000	.00000	Mapfre Re Compania de Reaseguros, SA	ESP		3	ñ	p	ñ	0	ñ	0	0	0	0	ñ	0	ñ	0	ñ
.AA-3194130	.00000	Endurance Specialty Ins Ltd	BMU	•••••	1,384	б Б	وو ۱	19		235	42		0			0	0	1,227	0
			BMU	•••••			v						0			0.000			0
.AA-1370020		Swiss Re International SE	DWU	••••••			0				64	1,927	0	2,361			0	(571)	0
.AA-3190686	00000	Partner Reinsurance Company Limited	LUX			0	0	0	0	0	0	0	0	0	0		0	(1)	0
		orized - Other Non-U.S. Insurers			23,753	1,406	237	8,164	737	8,208	1,436	14,079	0	34,267	0	8,538	0	25,729	0
1499999. T	otal Auth	orized Excluding Protected Cells (Sum of	0899999, 099	99999,															
		1199999 and 1299999)	,	,	247,995	11,402	3,687	85,574	17, 191	163,351	62,964	112,848	0	457.017	0	63,110	0	393.907	198,642
.47-1588915		Falls Lake Fire and Casualty Company	C4										0	- 1			n n		
.20-8946040		James River Casualty Company	VA										0	,,					
			VA																
.20-0328998		Stonewood Insurance Company	INU			1,450			2,318				0	,			0		
		uthorized - Affiliates - U.S. Intercompany F	Pooling		43,069	3,004	783		4,802	30,871	21,821	20,853	0	- 1			0	,	94,437
1899999. T	otal Una	uthorized - Affiliates - U.S. Non-Pool			0	0	0		0	0	0	0	0	0	0	0	0	0	0
AA-3191387	00000	Carolina Re, Ltd	BMU.			1, 141							0		0		0		0
.AA-3190958		JRG Reinsurance Company, Ltd	BMU		0								0			,	0		ñ
		uthorized - Affiliates - Other (Non-U.S.) - 0			15.852	1,392	482			7,736	1,291	7,845	0				0	,	0
			Julei																0
		uthorized - Affiliates - Other (Non-U.S.)			15,852	1,392	482		797	7,736	1,291	7,845	0	,			0	21,063	0
		uthorized - Affiliates			58,921	4,396	1,265	21,857	5,599	38,607	23,112	28,698	0	123,534	0	15,132	0	108,402	94,437
.AA-3194128	00000	Allied World Assurance Co Ltd	BMU		0	0	0	0	0	0	0	1	0		0		0	(2)	0
.AA-3191190	.00000	Hamilton Re. Ltd.	BMU		(112)	40	5						0		0	(2)	0		0
.AA-3190060	00000	Hannover Re (Bermuda) Ltd	BMU			0	0	0	0	0	0	0	0	0	0		0	0	0
.AA-1460019		MS Amlin AG	CHE			U							U				0		
			UTIE HKG					1,757					u				U		U
.AA-5320039		Peak Reinsurance Company Limited	ΠNU			Û	0	0	0	0	0		0		0	0	0		0

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1	2	3	4	5	6					ance Recover		-/			16	Reinsuran	ce Pavable	19	20
·	~	Ŭ		Ū	Ű.	7	8	9	10	11	12	13	14	15	10	17	18		Funds Held
						•	Ū	Ŭ										Recoverable	by
	NAIC														Amount in		Other	From	Company
	Com-				Reinsurance			Known	Known	IBNR	IBNR		Contingent	Columns	Dispute	Ceded	Amounts	Reinsurers	Under
ID	pany		Domiciliary	Special	Premiums	Paid	Paid	Case Loss	Case LAE	Loss	LAE	Unearned	Commis-	7 through	included in	Balances	Due to	Cols. 15 -	Reinsurance
Number	Code	Name of Reinsurer	Jurisdiction	Ċode	Ceded	Losses	LAE	Reserves	Reserves	Reserves	Reserves	Premiums	sions	14 Totals	Column 15	Payable	Reinsurers	[17 + 18]	Treaties
.AA-1120191	00000	Convex Insurance UK Limited	GBR			0	0	1	0		0		0		0	(1)	0		0
.AA-5340660		New India Assurance Company	IND		71	0	0	0	0	2	0		0		0	0	0		0
.AA-0053911		American Risk Services Reinsurance Co Ltd .	TCA				2	21	0	18	3	0	0		0		0		
.AA-3191295		Third Point Reins Co USA Ltd	BMU		75	1	1	7	3			0	0		0		0	10	0
.AA-3191179		Third Point Reins Co Ltd	BMU		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
.AA-3770492		Topsail Reinsurance SPC, Ltd	CYM		1,400	0	0	0	0		24	1,038	0	1, 198	0	275	0	923	0
.AA-1440076		Sirius International Ins	SWE		2,390	10	0	2	0		64	1,747	0	2, 185	0	0	0	2, 185	0
		uthorized - Other Non-U.S. Insurers		4,776	198	62	2,175	202	2,105	349	3,226	0	8,317	0	519	0	7,798	49	
		uthorized Excluding Protected Cells (Sum	2399999,																
	,	, 2599999 and 2699999)		63,697	4,594	1,327	24,032	5,801	40,712	23,461	31,924	0	131,851	0	15,651	0	116,200	94,486	
		ified - Affiliates - U.S. Non-Pool			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599999. To	otal Certi	ified - Affiliates - Other (Non-U.S.)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3699999. To	otal Certi	ified - Affiliates			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4299999. To	otal Certi	ified Excluding Protected Cells (Sum of 36	699999, 37999	999,															
3	8999999,	, 3999999 and 4099999)			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4699999. To	otal Reci	procal Jurisdiction - Affiliates - U.S. Non-F	Pool		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. To	otal Reci	procal Jurisdiction - Affiliates - Other (Non	n-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. To	otal Reci	procal Jurisdiction - Affiliates			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5699999. To	699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999,																		
5	5199999, 5299999, 5399999 and 5499999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0
5799999. To	otal Auth	orized, Unauthorized, Reciprocal Jurisdict	fied Excluding																
		d Cells (Sum of 1499999, 2899999, 42999		311,692	15,996	5,014	109,606	22,992	204,063	86,425	144,772	0	588,868	0	78,761	0	510,107	293, 128	
5899999. To	otal Prote	ected Cells (Sum of 1399999, 2799999, 4	599999)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9999999 To	tals	· · ·			311,692	15,996	5,014	109,606	22,992	204,063	86,425	144,772	0	588,868	0	78,761	0	510, 107	293, 128

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

(Credit	Risk)
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Line Zi Z				Colle	atorol		25		27				Codod E	oingurango (rodit Diek			
U Nume Participant Single Back Nume Participant Participant </td <td></td> <td></td> <td>04</td> <td></td> <td></td> <td>04</td> <td>20</td> <td>20</td> <td>21</td> <td>00</td> <td>00</td> <td>20</td> <td></td> <td></td> <td></td> <td>24</td> <td>05</td> <td>20</td>			04			04	20	20	21	00	00	20				24	05	20
U Single memory End of the second se			21	22	23	24				28	29	30	31	32	33	34	35	
NO Name Marging Beneficity Total Function Single Description Not Encode Not Description Application (Columnation) Description (Columnation) Description (Columnation) <thdescription)< th=""> Description (Columnation</thdescription)<>																		
No. No. No. Solghe Tradit All Market No. No. <td></td>																		
Image: Process of the second of the																	Collateralized	collateralized
D Number Matting From Heat From Matting Beneficial (Coll Stress) Heat From Fractor (Coll Stress) Fractor (Coll Stres) Fractor (Coll Stress)												Reinsurance					Recoverables	Recoverables
D Number Matting From Heat From Matting Beneficial (Coll Stress) Heat From Fractor (Coll Stress) Fractor (Coll Stres) Fractor (Coll Stress)												Pavable &					(Col. 32 *	(Col. 33 *
Der Norm Istancy of Participant Istancy of Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative Derivative						Single				Total Amount				Total	Stressed Net			\
ID Name Name of Reinscore Confirming Trues & College Trues & Pressore Trues & Reinscore Trues & Reins					lesuing or			Net										
Nume Participation Bank Other Bank Other Provides	п						Total Funda		Applicable		Ctropped	(P.P
From Oct.1 Name of Reinsurer Bencicary From Col.3 Letters of Certer Prediction Collutions Collutions			N. 117 . 1.										0					
Col.1 From Col.3 Truets Col.etter Number Collateral Collateral <thcollateral< th=""> Collateral</thcollateral<>					-		,											
12-28807 James fixer instructs drawny 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0																		
D105009 Teal Authorized - Affiliates - U.S. Inter-Pool 0 XXX XXX<			Trusts	Credit	Number	Collateral		Collateral	(Col. 78)							Equivalent		Col. 34)
Popling Popling Vac Vac Vac Vac	.22-2824607	James River Insurance Company	0	0		0		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Debsolve Other Section O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O	0199999. To	otal Authorized - Affiliates - U.S. Intercompany																
Understand Understand Use Vision Vi	F	Pooling	0	0	XXX	0	206.608	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Or799999. Total Authorized - Affiliates - Other (Non-U.S.) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			0	0		0	,	0	0									
D0959999 Total Authorized - Affiniales 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				•		-	-						^				^////	^~~~
D2 ODD O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O O			-	0		0	-	-		-		•	0	-	-		0	0
Ide-Hasses Ide-Has			•	0	XXX	0		•	0	-		•	0	0	9	XXX	0	0
bi-GAZ780 Airs Beinto O 0 1 420 6.774 9.817 1.423 5.838 0 8.389 1.389 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1.399 1			0	0					0					, , ,		6	1,856	1, 185
06 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			0	0		0			0					0		2	0	453
13-16-02280 The Cincing Line Corport Lin of America 0 0 0 0 0 648 3.374 0 3.672 4.646 468 4.148 0 4.148 2 0 13-262005 frequence Assumance Corporation 0 0 0 100 856 0 255 1.110 109 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 0 1.011 1.011 0 1.011 1.011 0 1.011 0 1.011 1.011 0 1.011 0 1.011 1.011 0 1.012 0 0 0 0 0 0 1.011 1.011 1.015 1.011 1.011 1.011 1.011 1.011 1.011 1.011 1.011 1.011 1.0111 1.01			0	0		0			0					0		3	0	
S5-22007 Endurance Suprame Corporation of America 0 0 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 00 0	.06-0237820	Chubb Tempest Re US	0	0		0			0			231	11,077	0	11,077	1	0	
13-82700	.31-0542366	The Cincinnati Ins Co	0	0		0			0					0		2	0	
13-82700	35-2293075	Endurance Assurance Corporation of America	0	0		0	804	542	0	1.346	1.615	804	811	0	811	2	0	
38-08565 letters lengurance Orporation 0 0 1.043 1.447 0 2.408 1.043 1.946 0 1.946 4 0 34-004155 Multich Reins Aren Inc 0 0 0 0 0 7.769 0 7.779 0 7.779 1 0 47-035979 National Indemity Consary 0 0 0 0 666 7.769 0 7.779 0 7.779 0 7.779 1 0 47-036807 Orgass Preins Co. 0 0 0 655 4.944 0 5.569 6.663 655 5.128 0 2.133 2 0 42-102825 Peraissance Reinsurance Merica Corporation 0 0 0 2.168 1.463 0 2.068 2.183 0 1.845 2.00 3.3377 51-14407 0 0.852 1.143 0 2.068 2.183 0 1.845 0 3.857 2	13-2673100	General Beins Corp	0	0		0			0					0		1	0	
13-429425 Munich Reins Amer Inc 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <t< td=""><td>38-0855585</td><td>Motors Insurance Corporation</td><td>0</td><td>0</td><td></td><td>0</td><td></td><td></td><td>0</td><td></td><td></td><td></td><td></td><td>0</td><td></td><td>4</td><td>0</td><td></td></t<>	38-0855585	Motors Insurance Corporation	0	0		0			0					0		4	0	
47-035979 National Indemity Company 0 0 (1) 6.442 0 6.441 7.729 (1) 7.730 1 0	13_4024125	Munich Reins Amer Inc	0	0		0			00					0 0		ч Э	0	
131-47710 Nationide Mutual Fire Insurance Co. 0 0 965 2.461 0 3.462 4.111 965 5.468 0 3.146 2 0 13-030176 Partner Reinsurance Company of the US 0 0 855 6.463 0 2.153 2 0 13-030176 Partner Reinsurance V.S. Inc 0 0 .05549 6.853 1.483 0 2.153 2 0 13-030176 Partner Reinsurance V.S. Inc 0 0 .0522 2.160 0 2.082 3.218 5522 2.666 0 2.666 2 0 .0 13-167553 Tore Reinsurance Company 0 0 .0 0 2.061 6.177 0 87.018 0.0 2.666 2 0 .0 .0 .0 1.00 1.00 1.00 1.0 0 1.0 1.2 0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0			0	0		0			0					0		4	0	278
147-088807 00rssey feins Co. 00rssey feins Co. 00rssey feins Co. 0 6.028 3. 0 15-001706 Partner Reinsurance Company of the US. 0 0 81 1.761 0 1.862 2.248 8.1 2.153 0. 2.153 2. 0 15-001706 Steins Reinsurance Reinsurance Company 0 0 0.522 2.160 0. 2.682 2.18 6.855 1.883 0 2.686 2. 0 0 15-167555 Steins Reinsurance Company 0 0 0.0 0.0 2.696 0.0 2.696 2.0901 83.521 2. 0.0 3 175-1444207 SUGR Reinsurance Company 0 0 0.0 0.111 0 0.0 1.111 0 1.368 3.676 1.00 3 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 3.676 1.00 </td <td></td> <td></td> <td></td> <td>0</td> <td></td> <td>0</td> <td></td> <td></td> <td>0</td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td></td> <td>1 1</td> <td>0</td> <td></td>				0		0			0					0		1 1	0	
13-30176 Partner Reinsurance Company of the US 0 0			0	0		0			0					0		2	0	
52-192265 Renaissance Reinsurance U.S. Inc 0 0 655 1.463 0 2.088 2.518 6.53 1.883 0 1.883 2 0 13-1675535 Saisty National Casual IV corporation 0 0 0.2091 66.117 0 87.018 1.04.422 2.0901 83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0 .83.521 0			0	0		0			0					0		J	0	
43-072872 Safety National Casualty Corporation 0 0			0	0		0			0					0		2	0	
13-675355 Sviss Reinsurance America Corporation 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <td< td=""><td></td><td></td><td>0</td><td>0</td><td></td><td>0</td><td></td><td></td><td>0</td><td></td><td></td><td></td><td></td><td>0</td><td></td><td>2</td><td>0</td><td>77</td></td<>			0	0		0			0					0		2	0	77
175-144207 SCOR Reinsurance Company 0 0 (1) 1 0 1 2 0 13-2918573 Toa Reinsurance Company 0 0 0 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,140 0 1,105 1,184 109 1,109 0 1,015 1,129,112 1,112,0112 1,112,0112 1,112,0112 1,112,0112 1,112,0112 1,112,0112 1,112,0112 1,112,0112 1,112,0114 1,112,0114 1,112,0114			0	0		0			0					0		2	0	111
13-291873 Toa Reinsurance Company 0 0 0 1,140 0 1,140 1,368 0 1,368 0 1,368 1 0 30-0703280 Tokio Willemnium Re AG 0 0 0 0 3,267 3,944 68 3,876 0 3,876 0 3,676 0 3,676 0 1 0 1 1,1-561627 1/218 1/9 0 3,265 0 3,876 0 1,61 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			0	0		0	20,901		0					0		2	0	
30-0703280 Tokio Nillemnium Re AG 0 0 0 68 3.219 0 3.287 3.944 68 3.876 0 3.876 1 0 13-5616275 Trasatlantic Reins Co 0 0 0 0 0 0 0 10/9 996 0 1.015 1.218 109 1.099 0 1.025 2 0 13-120712 X. Reinsurance America, Inc. 0 0 0 0 0 0.0100 740 0 840 1.008 100 908 0 908 2 0 0 23-1641944 OE Reins Corp 0 0 0 0 1.538 0 1.629 1.955 91 1.684 0 1.84 0 1.84 0 1.84 0 1.83 0 1.221336 0 3.3 0 3.3 0 3.3 0 3.3 0 3.3 0 1.22-1336188 0 0.0 <td< td=""><td></td><td>SCOR Reinsurance Company</td><td>0</td><td>0</td><td></td><td>0</td><td>(1)</td><td>1</td><td>0</td><td></td><td>0</td><td>(1)</td><td>1</td><td>0</td><td>1</td><td>2</td><td>0</td><td>0</td></td<>		SCOR Reinsurance Company	0	0		0	(1)	1	0		0	(1)	1	0	1	2	0	0
13-5616275 Transat lant ic Reins Co 0 0 109 906 0 1,015 1,218 109 1,109 2 0 13-520712 XL Reinsurance America, Inc. 0 0 0 365 2,652 0 3,017 3,620 365 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 3,255 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	.13-2918573	Toa Reinsurance Company	0	0		0	0	1,140	0		1,368	0		0	1,368	3	0	
13-1290712 XL Reinsurance America, Inc. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	.30-0703280	Tokio Millennnium Re AG	0	0		0			0					0		1	0	
13-1290712 XL Reinsurance America, Inc. 0 0 0 365 2,652 0 3,017 3,620 365 3,255 2 0 05-036005 Factory Mutual Insurance company 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <	13-5616275	Transatlantic Reins Co	0	0		0	109	906	0	1.015	1.218	109	1,109	0	1,109	2	0	45
05-0316605 Factory Mutual Insurance company 0 0 0 100 740 0 840 1,008 100 908 2 0 95-2769232 Insurance Company of the West 0 0 0 0 91 1,538 0 1,629 1,955 91 1,664 0 1,864 3 0 23-1641984 Donegal Mut Ins Co 0 0 0 0 0 0 3 0 0 3 0 3 0 0 3 0 0 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </td <td></td> <td></td> <td>0</td> <td>0</td> <td></td> <td>0</td> <td>365</td> <td></td> <td>0</td> <td></td> <td></td> <td></td> <td></td> <td>0</td> <td></td> <td>2</td> <td>0</td> <td>133</td>			0	0		0	365		0					0		2	0	133
95-2769232 Insurance Company of the West 0 0 0 0 1,629 1,955 91 1,864 0 1,864 3 0 0 23-1641994 QBE Reins Corp 0 0 0 0 0 0 0 3 0 0 0 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <td< td=""><td></td><td></td><td>0</td><td>0</td><td></td><td>0</td><td></td><td></td><td>0</td><td></td><td></td><td></td><td></td><td>0</td><td></td><td>2</td><td>0</td><td>37</td></td<>			0	0		0			0					0		2	0	37
23-1641984 QBE Reins Corp 0 0 0 3 0 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 <td></td> <td></td> <td>0</td> <td>۰. ۱</td> <td></td> <td>0</td> <td></td> <td></td> <td>۰ ۱</td> <td></td> <td></td> <td></td> <td></td> <td>۰ ۱</td> <td></td> <td>3</td> <td>0</td> <td>89</td>			0	۰. ۱		0			۰ ۱					۰ ۱		3	0	89
23-1336198 Donegal Mut Ins Co 0 0 9,034 8,242 0 0 8,242 9,890 9,890 9,034 8,566 3 4,34 22-2005057 Everest Reins Co 0 0 0 0 214 257 (3) 260 0 260 2 0 0 74-2195939 Houston Casualty Company 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			۰ ۱	U		۰ ۱			۰	,				0 ^	,,504 ຈ	3	n	
22-2005057 Everest Reins Co 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0<			0	U		0.024			U	······			······	۸د <u>ں</u> ۵	050	9	0	0
74-2195939 Houston Casualty Company 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			0	U				U	0					ສ,034		J		
06-1481194 Markel Global Reins Co 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			0	0		0			0					0		4	0	
95-3187355 Allianz Global Risk US 0 0 0 0 5 47 0 52 52 57 0 57 2 0 95-4387273 Allied World Assurance Co US 0 0 0 1,616 1,390 0 3,006 3,607 1,616 1,991 0 1,991 3 0 0999999. Total Authorized - Other U.S. Unaffiliated Insurers 0 0 XXX 46,147 79,021 136,017 0 215,038 258,046 33,666 224,379 46,147 178,232 XXX 2,289 8 AA-9991159 Michigan Catastrophe Claim Assn 0 0 0 (2,014) 2,827 0 XXX XX			0	0		0	0	0	0	0	0	0	0	0	0	I	0	0
95-4387273 Allied World Assurance Co US 0 0 0 1,616 1,390 0 3,006 3,607 1,616 1,991 0 1,991 3 0 0999999. Total Authorized - Other U.S. Unaffiliated Insurers 0 0 XXX 46,147 79,021 136,017 0 215,038 258,046 33,666 224,379 46,147 178,232 XXX 2,289 8 AA-9991159 Michigan Catastrophe Claim Assn 0 0 0 0 0 0 XXX XXX <td< td=""><td></td><td></td><td>0</td><td>0</td><td>•••••</td><td>0</td><td>2</td><td>0</td><td>0</td><td>2</td><td>2</td><td>2</td><td>0</td><td>0</td><td>0</td><td>J</td><td>0</td><td>0</td></td<>			0	0	•••••	0	2	0	0	2	2	2	0	0	0	J	0	0
O999999. Total Authorized - Other U.S. Unaffiliated Insurers 0 0 XXX 46,147 79,021 136,017 0 215,038 258,046 33,666 224,379 46,147 178,232 XXX 2,289 8 AA-9991159 Michigan Catastrophe Claim Assn 0 0 0 0 (2,014) 2,827 0 XXX			0	0		0			0					0		2	0	2
AA-9991159 Michigan Catastrophe Claim Assn 0 0 0 (2,014) 2,827 0 XXX XXX <td></td> <td></td> <td>0</td> <td>0</td> <td></td> <td>0</td> <td>,</td> <td>,</td> <td>0</td> <td>, ,</td> <td></td> <td>,</td> <td>,</td> <td>0</td> <td>,</td> <td>3</td> <td>0</td> <td></td>			0	0		0	,	,	0	, ,		,	,	0	,	3	0	
AA-9995035 Mutual Reins Bureau 0 0 0 19 272 0 XXX XXX XXX XXX XXX XXX XXX XXX XXX	0999999. To	otal Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	46,147	79,021	136,017	0	215,038	258,046	33,666	224,379	46, 147	178,232	XXX	2,289	8, 194
AA-9995035 Mutual Reins Bureau 0 0 0 19 272 0 XXX XXX XXX XXX XXX XXX XXX XXX XXX	.AA-9991159	Michigan Catastrophe Claim Assn	0	0		0	(2,014)		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
			0	0		0			0									XXX
			۰ ۱	۰ ۱	XXX	۰ ۱												
AA-1120337 Aspen Ins UK Ltd 0 0 0 259 1,898 0 2,157 2,588 259 2,329 0 2,329 4 0				0	7777	0								^~~~		1	^////	
				0		0								0		*	0	
				0		0								0		4	0	
AA-1126033 Lloyd's Syndicate Number 0033	.AA-1126033	Lioya's Syndicate Number 0033	0	0		0	(13)	433	0			(13)		0		J	0	25

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Credit Risk)

			Colle	ateral		25		27				Codod	Reinsurance C	rodit Dick			
		21	22	23	24	25	20	21	28	29	30	31	32	33	34	35	36
		21	22	23	24				20	29	30	31	52		34	30	Credit Risk
																Credit Risk or	
											. .					Collateralized	
											Reinsurance					Recoverables	
											Payable &					(Col. 32 *	(Col. 33 *
					Single				Total Amount		Funds Held		Total	Stressed Net		Factor	Factor
				Issuing or	Beneficiary		Net		Recoverable		(Cols.		Collateral	Recoverable		Applicable to	Applicable to
ID				Confirming	Trusts &	Total Funds	Recoverable	Applicable	from	Stressed	17+18+20;		(Cols. 21+22	Net of		Reinsurer	Reinsurer
Number		Multiple		Bank	Other	Held,	Net of Funds	Sch. F	Reinsurers	Recoverable	but not in	Stressed Net	+ 24, not in	Collateral	Reinsurer	Designation	Designation
From	Name of Reinsurer	Beneficiary	Letters of	Reference	Allowable	Payables &	Held &	Penalty	Less Penalty	(Col. 28 *	excess of	Recoverable	Excess of	Offsets	Designation	Equivalent in	Equivalent in
Col. 1	From Col. 3	Trusts	Credit	Number	Collateral	Collateral	Collateral	(Col. 78)	(Cols. 15-27)	120%)	Col. 29)	(Cols. 29-30)	Col. 31)	(Cols. 31-32)	Equivalent	Col. 34)	Col. 34)
.AA-1126435	Lloyd's Syndicate Number 0435	0	0		0			0			19	231	0	231	3	0	11
.AA-1126510	Lloyd's Syndicate Number 0510	0	0		0	2		0		146	2	144	0	144	3	0	7
.AA-1126566	Lloyd's Syndicate Number 0566	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
.AA-1126609	Lloyd's Syndicate Number 0609	0	0		0	0		0			0	40	0	40	3	0	2
.AA-1126727	Lloyd's Syndicate Number 0727	0	0		0	0		0		71	0	71	0		3	0	
.AA-1127414	Lloyd's Syndicate Number 1414	0	0		0			0					0		3	0	10
.AA-1126780	Lloyd's Syndicate Number 0780	0	0		0	6		0		70	6	64	0	64	3	0	3
.AA-1127084	Lloyd's Syndicate Number 1084	0	0		0	(2)		0	107		(2)	130	0	130	3	0	6
.AA-1120156	Lloyd's Syndicate Number 1686	0	0		0	0		0	17		0		0		3	0	1
.AA-1127861	Lloyd's Syndicate Number 1861	0	0		0	(6)		0			(6)		0		3	0	2
.AA-1120084	Lloyd's Syndicate Number 1955	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
.AA-1128001	Lloyd's Syndicate Number 2001	0	0		0	(28)		0		5, 105	(28)	5, 133	0	5, 133	3	0	
.AA-1128003	Lloyd's Syndicate Number 2003	0	0		0			0					0		3	0	13
.AA-1120158	Lloyd's Syndicate Number 2014	0	0		0			0					0		3	0	
.AA-1128623	Lloyd's Syndicate Number 2623	0	0		0	(7)		0			(7)		0		3	0	9
.AA-1128791	Lloyd's Syndicate Number 2791	0	0		0	(8)		0	418		(8)	510	0	510	3	0	
.AA-1128987	Lloyd's Syndicate Number 2987	0	0		0			0	1, 152	1,382		1, 133	0	1, 133	3	0	54
.AA-1129000	Lloyd's Syndicate Number 3000	0	0		0	3		0			3		0		3	0	2
.AA-1126005	Lloyd's Syndicate Number 4000	0	0		0	(13)		0			(13)		0		3	0	2
.AA-1120075	Lloyd's Syndicate Number 4020	0	0		0	(2)	8	0	6	7	(2)	9	0	9	3	0	0
	Lloyd's Syndicate Number 4444	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
	Lloyd's Syndicate Number 4472	0	0		0		148	0					0	194	3	0	9
.AA-1120006	Lloyd's Syndicate Number 1980	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
	Lloyd's Syndicate Number 5678	0	0		0			0			20		0		3	0	4
	Lloyd's Syndicate Number 4242	0	0		0	0	9	0	9	11	0	11	0	11	3	0	1
	Lloyd's Syndicate Number 2468	0	0		0	0	10	0	10		0	12	0	12	3	0	1
	Lloyd's Syndicate Number 623	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
	Lloyd's Syndicate Number 382	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
	Lloyd's Syndicate Number 2007	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
	Lloyd's Syndicate Number 1969	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
	Lloyd's Syndicate Number 1856	0	0		0	(2)	2	0	0	0	(2)	2	0	2	3	0	0
	Lloyd's Syndicate Number 1945	0	0		0	(2)	2	0	0	0	(2)		0	2	3	0	0
	Lloyd's Syndicate Number 3334	0	0		0	(1)	1	0	0	0	(1)		0	1	3	0	0
	Lloyd's Syndicate Number 2988	0	0		0	0	153	0	153		0	184	0		3	0	9
	Lloyd's Syndicate Number 1729	0	0		0	1	6	0	7	8	1	7	0	7	3	0	0
	Mapfre Re Compania de Reaseguros, SA	0	0		0	0	0	0	0	0	0	0	0	0	3	0	0
	Endurance Specialty Ins Ltd	0	1,036		0	1,036	191	0	1,227	1,472	0	1,472	1,036		2		
	Swiss Re International SE	0	226	0010	0		0	0	2,361		2,833	0	0	0	3	0	0
	Partner Reinsurance Company Limited	0	0		0	0	0	0	0	0	0	0	0	0	2	0	0
	tal Authorized - Other Non-U.S. Insurers	0	1,262	XXX	0	8,998	25,269	0	34,267	41,120	8,434	32,686	1,036	31,650	XXX	42	1,393
	tal Authorized Excluding Protected Cells (Sum of																
0	899999, 0999999, 1099999, 1199999 and 1299999)	0	1,262	XXX	46,147	292,632	164,385	0	249,305	299,166	42,101	257,065	47,183	209,882	XXX	2,332	9,586
.47-1588915	Falls Lake Fire and Casualty Company	0	0		0		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
	· · · · · · · · · · · · · · · · · · ·																

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Credit Risk)

		Colla	iteral		25	26	27				Ceded F	Reinsurance Ci	redit Risk			
	21	22	23	24	20	20	21	28	29	30	31	32	33	34	35	36
	21	22	23	24				20	29	50	51	52		34		Credit Risk
															Credit Risk or	
										D					Collateralized	
										Reinsurance					Recoverables	
										Payable &					(Col. 32 *	(Col. 33 *
				Single				Total Amount		Funds Held		Total	Stressed Net		Factor	Factor
			Issuing or	Beneficiary		Net		Recoverable		(Cols.		Collateral	Recoverable		Applicable to	
ID			Confirming	Trusts &	Total Funds		Applicable	from	Stressed	17+18+20;		(Cols. 21+22			Reinsurer	Reinsurer
Number	Multiple		Bank	Other	Held,	Net of Funds	Sch. F	Reinsurers	Recoverable	but not in	Stressed Net	+ 24, not in	Collateral	Reinsurer	Designation	Designation
From Name of Reinsurer	Beneficiary	Letters of	Reference	Allowable	Payables &	Held &	Penalty	Less Penalty	(Col. 28 *	excess of	Recoverable		Offsets	Designation	Equivalent in	Equivalent in
Col. 1 From Col. 3	Trusts	Credit	Number	Collateral	Collateral	Collateral	(Col. 78)	(Cols. 15-27)	120%)	Col. 29)	(Cols. 29-30)	Col. 31)	(Cols. 31-32)	Equivalent	Col. 34)	Col. 34)
.20-8946040 James River Casualty Company	0	0		0		0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.20-0328998 Stonewood Insurance Company	0	0		0	47,418	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1599999. Total Unauthorized - Affiliates - U.S. Intercompany																
Pooling	0	0	XXX	0	98,224	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-3191387 Carolina Re, Ltd	0	0				7	7	19,407		4 , 244	19,044			3	728	
.AA-3190958 JRG Reinsurance Company, Ltd	0	0		6,413	5,896	0	0	5,896	7,075	3	7,072	6,413	659	3		
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.) -																
Other	0	0	XXX	21,576	25,303	7	7	25,303	30,364	4,247	26,117	21,576	4,541	XXX	1,036	218
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	21,576	25,303	7	7	25,303	30,364	4,247	26,117	21,576	4,541	XXX	1,036	218
2299999. Total Unauthorized - Affiliates	0	0	XXX	21,576	123,527	7	7	25,303	30,364	4,247	26,117	21,576	4,541	XXX	1,036	218
AA-3194128 Allied World Assurance Co Ltd	0	0		0	1	0	0	1	1	1	0	0	0	3	0	0
.AA-3191190 Hamilton Re, Ltd	0	1,792		0	1,224	0	0		1,469	(2)	1,471	1,471	0	4		0
AA-3190060 Hannover Re (Bermuda) Ltd	0	0		0	0	0	0	0	0	0	0	0	0	2	0	0
_AA-1460019 MS Amlin AG	0	4,281		0		0	0						0	3		0
.AA-5320039 Peak Reinsurance Company Limited	0			0		4	4			0			7	4	2	0
.AA-1120191 Convex Insurance UK Limited	0			0		2	2				51		8	4	2	0
.AA-5340660 New India Assurance Company	0			0	20	0	0			0			0	5	1	0
.AA-0053911 American Risk Services Reinsurance Co Ltd	0	0		0	130	0	0				0	0	0	6	0	0
.AA-3191295 Third Point Reins Co USA Ltd	0			0		0	0					18	0	4	1	0
.AA-3191179 Third Point Reins Co Ltd	0	0		0	0	0	0	0	0	0	0	0	0	4	0	0
.AA-3770492 Topsail Reinsurance SPC, Ltd	0	1,040		0	1 , 198	0	0	1 , 198	1,438		1 , 163	1,040	123	6		
_AA-1440076 Sirius International Ins	0			0	2, 171			2,171		0		2, 171		4		
2699999. Total Unauthorized - Other Non-U.S. Insurers	0	9,436	XXX	0	8,297	20	20	8,297	9,956	563	9,393	8,821	572	XXX	433	41
2899999. Total Unauthorized Excluding Protected Cells (Sum of																
2299999, 2399999, 2499999, 2599999 and 2699999)	0	9,436	XXX	21,576	131,824	27	27	33,600	40,320	4,810	35,510	30,397	5,112	XXX	1,469	259
3299999. Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999. Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4299999. Total Certified Excluding Protected Cells (Sum of																
3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-				-			-									
U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells	Ŭ	Ť	7001	, in the second se	Ť	Ť	Ŭ	, , , , , , , , , , , , , , , , , , ,	Ů	Ť	Ť	Ů	Ť Š	,,,,,	Ť Š	Ť
(Sum of 5099999, 5199999, 5299999, 5399999 and																
(Sum of Sossess, Sheeses, Szesses, Szesses, Szesses, Stesses and 5499999)	0	0	XXX	0	0	0	0	0	0	0	n	0	0	XXX	0	0
	U	U	////	U	U	U	U	U	U	U	U	U	0	////	U	U

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

10	`rodit	Diale	
10	reuit	Risk)	

							(Credit Ris	5K)									
			Colla	ateral		25	26	27				Ceded R	einsurance Cr	edit Risk			
		21	22	23	24				28	29	30	31	32	33	34	35	36
																	Credit Risk
																Credit Risk on	
																Collateralized	
											Reinsurance						Recoverables
											Payable &					(Col. 32 *	(Col. 33 *
					Single				Total Amount		Funds Held		Total	Stressed Net		Factor	Factor
				Issuing or	Beneficiary		Net		Recoverable		(Cols.		Collateral	Recoverable			Applicable to
ID				Confirming	Trusts &		Recoverable	Applicable	from	Stressed	17+18+20;		(Cols. 21+22			Reinsurer	Reinsurer
Number		Multiple		Bank	Other		Net of Funds	Sch. F	Reinsurers	Recoverable		Stressed Net	+ 24, not in	Collateral	Reinsurer	Designation	Designation
From	Name of Reinsurer	Beneficiary	Letters of	Reference	Allowable	Payables &	Held &	Penalty	Less Penalty	(Col. 28 *		Recoverable	Excess of	Offsets		Equivalent in	
Col. 1	From Col. 3	Trusts	Credit	Number	Collateral	Collateral	Collateral	(Col. 78)	(Cols. 15-27)	120%)	Col. 29)	(Cols. 29-30)	Col. 31)	(Cols. 31-32)	Equivalent	Col. 34)	Col. 34)
	tal Authorized, Unauthorized, Reciprocal Jurisdiction																
	nd Certified Excluding Protected Cells (Sum of																
1.	499999, 2899999, 4299999 and 5699999)	0	10,698	XXX	67,723	424,456	164,412	27	282,905	339,486	46,911	292,575	77,580	214,995	XXX	3,800	9,845
5899999. To	tal Protected Cells (Sum of 1399999, 2799999,																
4	199999 and 5599999)	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Tot	als	0	10,698	XXX	67,723	424,456	164,412	27	282,905	339,486	46,911	292,575	77,580	214,995	XXX	3,800	9,845

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Aging of Ceded Reinsurance)

		Doir	Douronoo Doo	worable on De	id Losses and	Daid Loop Adi			44	45	46 47	48	49	50	51	52	53
				overable on Pa		Palu Loss Auj	usimeni Expe		44	45	40 47	40	49	50	51	52	55
		37			Overdue			43									1
			38	39	40	41	42				Recoverab	le					1
									Total	Recoverable	on Paid			Percentage			I
									Recoverable	on Paid	Total Losses &			of Amounts			I
									on Paid	Losses &	Recoverable LAE Over 9			More Than			Amounts in
									Losses &	LAE Over 90				90 Days	Percentage		Col. 47 for
								Total Due	LAE	Days Past	Losses & Due Amour	nts		Overdue Not	More Than	Is the	Reinsurers
ID							Total	Cols. 37+42	Amounts in	Due Amounts	LAE Not in	Amounts		in Dispute	120 Days	Amount in	with Values
Number							Overdue	(In total	Dispute	in Dispute	Amounts Not Dispute	Received	Percentage	(Col.	Overdue	Col. 50 Less	Less Than
From	Name of Reinsurer		1 - 29	30 - 90	91 - 120	Over 120	Cols. 38+39	should equal	Included in	Included in	in Dispute (Cols. 40	+ Prior	Overdue Col.	47/[Cols.	(Col. 41/	Than 20%?	20% in
Col. 1	From Col. 3	Current	Days	Days	Days	Days	+40+41	Cols. 7+8)	Col. 43	Cols. 40 & 41	(Cols 43-44) 41 - 45)	90 Days	42/Col. 43	46+48])	Col. 43)	(Yes or No)	Col. 50
.22-2824607	James River Insurance Company	7.966	0	0	0	0	0		0	0		.0	0.0	0.0	0.0	YES	0
	otal Authorized - Affiliates - U.S. Intercompany	,						,			,						
	Pooling	7,966	0	0	0	0	0	7,966	0	0	7,966	0 0	0.0	0.0	0.0	XXX	0
	otal Authorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	7,000	0	0		0 0			0.0	XXX	0
		0	0	0	-	0	0	0	0	0	•	0 0			0.0	XXX	0
	otal Authorized - Affiliates - Other (Non-U.S.)	•	•	_	-	-	0	0	÷								0
	otal Authorized - Affiliates	7,966		0	0	0	0	7,966	0	0	.,	0 0			0.0	XXX	0
	American European Insurance Company	0		0	0	0	0	l0	0	l0	0	.0	0.0		0.0	YES.	0
	Arch Reins Co		84		0	0			0	0		.00			0.0	YES	0
	Axis Reins Co		83	0	0	0	83		0	0		.0 0		0.0	0.0	YES	0
	Chubb Tempest Re US		5	0	0	0	5		0	0		.0	1.5	0.0	0.0	YES	0
	The Cincinnati Ins Co	105	0	0	0	0	0		0	0		.0	0.0	0.0	0.0	YES	0
	Endurance Assurance Corporation of America		9	9	0	0		54	0	0	54	.0			0.0	YES	0
	General Reins Corp	21	0	0	0	0	0	21	0	0		.0	0.0	0.0	0.0	YES	0
	Motors Insurance Corporation	27	0	0	0	0	0		0	0		.0	0.0	0.0	0.0	YES	0
	Munich Reins Amer Inc				0	0	47		0	0		.0		0.0	0.0	YES.	0
	National Indemnity Company			0	0	0			0	0		.0		0.0	0.0	YES	0
	Nationwide Mutual Fire Insurance Co	55	0	0	0	0	0	55	0	0		.0	0.0	0.0	0.0	YES	0
.47-0698507	Odyssey Reins Co		4	0	0	0	4		0	0		.0	2.9	0.0	0.0	YES	0
.13-3031176	Partner Reinsurance Company of the US		0	0	0	0	0		0	0		.0			0.0	YES.	0
	Renaissance Reinsurance U.S. Inc		0	0	0	0	0		0	0		.0	.0.0	.0.0		YES	0
.43-0727872	Safety National Casualty Corporation			0	0	0			0	0		.0		.0.0		YES	0
	Swiss Reinsurance America Corporation	2.362	348	59	0	0	407	2.769	0	0	2.769	0 0	14.7	0.0	0.0	YES	0
.75-1444207	SCOR Reinsurance Company	0	0	0	0	0	0		0	0	0	.0	0.0		0.0	YES	0
	Toa Reinsurance Company		20	33	0	0	53		0	0		0 0		0.0	0.0	YES.	0
	Tokio Millennnium Re AG		11	16	0	0	27	48	0	0	48	0 0			0.0	YES	0
	Transatlantic Reins Co		0	0	0	0	0	21	0	0		0 0		0.0		YES	0
	XL Reinsurance America, Inc.		0	0	0	0	0	67	0	0	67	0 0	0.0	0.0		YES	0
	Factory Mutual Insurance company	0	n	0	0	0	n	0	0	n	0	0 0	0.0	0.0		YES	0
95-2769232	Insurance Company of the West	0	n	0	0	n N	0	0	0	0	n n n n n n n n n n n n n n n n n n n	0 0	0.0		0.0	YES	0
	QBE Reins Corp	0	0	0	0	0	0	0	0	0	Ő	0 0	0.0	0.0	0.0	YES	0
	Donegal Mut Ins Co		18	0	0 N	0 N	18	71	n	n	71	0 0		0.0	0.0	YES	0
	Everest Reins Co		i0	0	0 N	0 N	10 N	a	0 N	0 N	9	0 0	0.0		0.0	YES	0
	Houston Casualty Company		0	0	0 0	0 ^	0 ^		0	0		0 0	0.0	0.0	0.0	YES	0
	Markel Global Reins Co	0	0	0	0	0	0	0	0	0		0		0.0	0.0	YES.	
	Allianz Global Risk US	0	0	0	0	0	0	0	0	0					0.0	YES.	
	Allied World Assurance Co US		0	0	0	0	0		0	0	121	0			0.0	YES.	
		121	0	0	0		0	121	0	0	121		0.0	0.0	0.0	ico	0
	otal Authorized - Other U.S. Unaffiliated	1 000			_	-	000	5 005	_	-	5 007		10 -			X0.07	-
	nsurers	4,299	804	184	0	0	988	5,287	0	0	0,201	0 0	10.1	0.0	0.0		0
	Michigan Catastrophe Claim Assn	(180)		0	0	0				0		.00			0.0	YES	0
	Mutual Reins Bureau	0		0	0	0	0	0	0	0	0	.00		0.0	0.0	YES	0
	otal Authorized - Pools - Mandatory Pools	(180)		0	0	0	373	193	0	0	100	0 0	100.0		0.0		0
	Aspen Ins UK Ltd	0		0	0	0	0	0	0	0	0	.0 0	0.0		0.0	YES	0
	Hannover Ruckversicherungs AG				0	0	1 , 193	1,514	0	0		.00		0.0	0.0	YES	0
.AA-1126033	Lloyd's Syndicate Number 0033		0	0	0	0	0		0	0		.0	0.0	0.0	0.0	YES	0
							-					*					

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		Rei	insurance Reco	verable on Pa	id Losses and	Paid Loss Adi		nses	44	45	46	47	48	49	50	51	52	53
		37			Overdue			43		10	10		10	10	00	01	02	00
		07	38	39	40	41	42					Recoverable						
			50	39	40	41	42		Total	Recoverable		on Paid			Percentage		1	
									Recoverable	on Paid	Total	Losses &			of Amounts		1	
									on Paid			LOSSES & LAE Over 90			More Than		1	Amounto in
										Losses &	Recoverable					Devertees	I	Amounts in
									Losses &	LAE Over 90		Days Past			90 Days	Percentage		Col. 47 for
								Total Due	LAE	Days Past	Losses &	Due Amounts			Overdue Not		Is the	Reinsurers
ID							Total	Cols. 37+42		Due Amounts		Not in	Amounts		in Dispute	120 Days	Amount in	with Values
Number							Overdue	(In total	Dispute	in Dispute	Amounts Not	Dispute	Received	Percentage	(Col.	Overdue	Col. 50 Less	
From	Name of Reinsurer		1 - 29	30 - 90	91 - 120	Over 120	Cols. 38+39	should equal	Included in	Included in	in Dispute	(Cols. 40 +	Prior	Overdue Col.	. 47/[Cols.	(Col. 41/	Than 20%?	20% in
Col. 1	From Col. 3	Current	Days	Days	Days	Days	+40+41	Cols. 7+8)	Col. 43	Cols. 40 & 41	(Cols 43-44)	41 - 45)	90 Days	42/Col. 43	46+48])	Col. 43)	(Yes or No)	Col. 50
.AA-1126435	Lloyd's Syndicate Number 0435	0	0	0	0	0	0	0	0	0	0	0		0.0.	0.0	0.0	YES	0
.AA-1126510	Lloyd's Syndicate Number 0510	6	0	0	0	0	0	6	0	0	6	0		0.0	0.0	0.0		0
.AA-1126566	Lloyd's Syndicate Number 0566	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0	0.0	YES	0
.AA-1126609	Lloyd's Syndicate Number 0609	1	0	0	0	0	0	1	0	0	1	0		0.0	0.0	0.0	YES	0
.AA-1126727	Lloyd's Syndicate Number 0727	4	0	0	0	0	0	4	0	0	4	0		0.0	0.0	0.0	YES	0
.AA-1127414	Lloyd's Syndicate Number 1414	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0	0.0	YES	0
AA-1126780	Lloyd's Syndicate Number 0780	0	0	0	0	0	0	0		0	0	0		0.0				0
.AA-1127084	Lloyd's Syndicate Number 1084		0	0	0	0	0		0	0		0		0.0	0.0		YES.	0
.AA-1120156	Lloyd's Syndicate Number 1686	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1127861	Lloyd's Syndicate Number 1861	0	0	0	0	0	0	0	0	0	0	0	(0
AA-1120084	Lloyd's Syndicate Number 1955	0	0	0	0	0	0	0	0	0	0	0	(0.0			0
AA-1128001	Lloyd's Syndicate Number 2001	29	15	21	0	0	36	65	0	0	65	0	(55.4	0.0			0
AA-1128003	Lloyd's Syndicate Number 2003	0		0	0	0	0	0	0	0	0	0	(0.0	0.0			0
AA-1120158	Lloyd's Syndicate Number 2014	0	•••••	0	0	0	0	0	0	0	0	0		0.0	0.0			0
AA-1128623	Lloyd's Syndicate Number 2623	6	0	0	0	0	0	6	0	0	6	0		0.0				0
.AA-1128791	Lloyd's Syndicate Number 2791		0	ů	0	0	0	15	0	0	15	0						0
.AA-1128987	Lloyd's Syndicate Number 2987	1	0	0	0	0	0		0	0	1	0		0.0				0
.AA-1120900	Lloyd's Syndicate Number 3000	I 0	0	0	0	0	0	1	0	0	0	0		0.0				0
.AA-1126005	Lloyd's Syndicate Number 4000	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1120005	Lloyd's Syndicate Number 4000	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1126004	Lloyd's Syndicate Number 4444	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1126004	Lloyd's Syndicate Number 4444	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1120006		0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
	Lloyd's Syndicate Number 1980	0	0	0	0	0	0	0	0	0	0	0						0
.AA-1120163	Lloyd's Syndicate Number 5678	0	0	0	0	0	0	0	0	0	0	0		0.0.	0.0			0
.AA-1120067	Lloyd's Syndicate Number 4242	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0		YES	0
.AA-1120097	Lloyd's Syndicate Number 2468	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1126623	Lloyd's Syndicate Number 623	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1126382	Lloyd's Syndicate Number 382	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1120071	Lloyd's Syndicate Number 2007	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1120106	Lloyd's Syndicate Number 1969	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0			0
.AA-1120171	Lloyd's Syndicate Number 1856	0	0	0	<u>0</u>	0	0	0	·····0	0	0	0	C	0.0	0.0			0
.AA-1120124	Lloyd's Syndicate Number 1945	0	0	0	0	0	0	0	0	0	0	0	C	0.0	0.0		YES	0
.AA-1120113	Lloyd's Syndicate Number 3334	0	0	0	0	0	0	0	0	0	0	0	·····.	0.0	0.0			0
.AA-1120179	Lloyd's Syndicate Number 2988	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1120157	Lloyd's Syndicate Number 1729	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-1840000	Mapfre Re Compania de Reaseguros, SA	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
.AA-3194130	Endurance Specialty Ins Ltd	5	0	0	0	0	0	5	0	0	5	0	0	0.0	0.0			0
.AA-1370020	Swiss Re International SE	4	0	0	0	0	0	4	0	0	4	0	0	D 0.0	0.0			0
.AA-3190686	Partner Reinsurance Company Limited	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0			0
	otal Authorized - Other Non-U.S. Insurers	414	275	954	0	0	1,229	1,643	0	0	1,643	0	(0 74.8	0.0	0.0	XXX	0
1499999. To	otal Authorized Excluding Protected Cells (Sum																	
	of 0899999, 0999999, 1099999, 1199999 and														1		1	
	1299999)	12,499	1,452	1,138	0	0	2,590	15,089	0	0	15,089	0	0	0 17.2	0.0	0.0	XXX	0
	Falls Lake Fire and Casualty Company					0	0		0	0		0	(0.0	0.0			0
	arro cano rito and vasuarry company		0	0			0							0.0		0.0	ILV	0

		Rein	surance Reco	verable on Pa	id Losses and	Paid Loss Adj			44	45	46	47	48	49	50	51	52	53
	-	37			Overdue			43		-10	40	-11	40	-10	00	01	02	00
		01	38	39	40	41	42					Recoverable						
			00	00	-10		74		Total	Recoverable		on Paid			Percentage			
									Recoverable	on Paid	Total	Losses &			of Amounts			
									on Paid	Losses &	Recoverable	LAE Over 90			More Than			Amounts in
									Losses &	LAE Over 90	on Paid	Days Past			90 Days	Percentage		Col. 47 for
								Total Due	LAE	Days Past	Losses &	Due Amounts			Overdue Not	More Than	Is the	Reinsurers
ID							Total	Cols. 37+42	Amounts in	Due Amounts	LAE	Not in	Amounts		in Dispute	120 Days	Amount in	with Values
Number							Overdue	(In total	Dispute	in Dispute	Amounts Not	Dispute	Received	Percentage	(Col.	Overdue	Col. 50 Less	Less Than
From	Name of Reinsurer		1 - 29	30 - 90	91 - 120	Over 120	Cols. 38+39	should equal	Included in	Included in	in Dispute	(Cols. 40 +	Prior	Overdue Col.	47/[Cols.	(Col. 41/	Than 20%?	20% in
Col. 1	From Col. 3	Current	Days	Days	Days	Days	+40+41	Cols. 7+8)	Col. 43	Cols. 40 & 41	(Cols 43-44)	41 - 45)	90 Days	42/Col. 43	46+48])	Col. 43)	(Yes or No)	Col. 50
	James River Casualty Company	1, 175	0	0	0	0	0	1, 175	0	0	1, 175	0	0	0.0	0.0	0.0	YES	0
	Stonewood Insurance Company	1,828	0	0	0	0	0	1,828	0	0	1,828	0	0	0.0	0.0	0.0	YES	0
	otal Unauthorized - Affiliates - U.S.																	
	ntercompany Pooling	3,787	0	0	0	0	0	3,787	0	0	3,787	0	0	0.0	0.0	0.0	XXX	0
	otal Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	Carolina Re, Ltd	1,528	0	0	0	0	0		0	0		0	0	0.0	0.0	0.0	YES	0
	JRG Reinsurance Company, Ltd		0	0	0	0	0		0	0		0	0	0.0	0.0	0.0	YES	0
	otal Unauthorized - Affiliates - Other (Non-U.S.)																	
	Other	1,874	0	0	0	0	0	1,874	0	0	1,874	0	0	0.0	0.0	0.0	XXX	0
	otal Unauthorized - Affiliates - Other (Non-U.S.)	1,874	0	0	0	•	0	1,874	0	0	,	0	0	0.0	0.0	0.0	XXX	0
	otal Unauthorized - Affiliates	5,661	0	0	0	-	0	5,661	0	0	•,•••	0	0	010	0.0	0.0	XXX	0
	Allied World Assurance Co Ltd	0	0	0	0	0	0	0	0	0		0	0	0.0	0.0	0.0	YES	0
	Hamilton Re, Ltd.			0	0	0		45	0	0	45	0	0		0.0	0.0	YES	0
	Hannover Re (Bermuda) Ltd	0	0	0	0	0	0	0 115	0	0	0 115	0	0	0.0	0.0	0.0	YES.	0
	MS Amlin AG Peak Reinsurance Company Limited	66 0		14	0	0			0	0		0	0	42.6 0.0	0.0 	0.0 0.0	YES. YES	0
	Convex Insurance UK Limited	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
	New India Assurance Company	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES	0
	American Risk Services Reinsurance Co Ltd		0	0	0	0	0		0	0	88	0	0	0.0	0.0	0.0	YES	0
	Third Point Reins Co USA Ltd	2	0	0	0	0	0	2	0	0	2	0	0	0.0	0.0	0.0	YES	0
	Third Point Reins Co Ltd	0	0	0	0	0	0	0	0	0	0	0	0		0.0	0.0	YES	0
AA-3770492	Topsail Reinsurance SPC, Ltd.	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	YES.	0
.AA-1440076	Sirius International Ins	10	0	0	0	0	0	10	0	0	10	0	0	0.0	0.0	0.0	YES	0
2699999. To	otal Unauthorized - Other Non-U.S. Insurers	172	74	14	0	0	88	260	0	0	260	0	0	33.8	0.0	0.0	XXX	0
	otal Unauthorized Excluding Protected Cells																	
	Sum of 2299999, 2399999, 2499999, 2599999																	
	and 2699999)	5,833	74	14	0	0	88	5,921	0	0	5,921	0	0	1.5	0.0	0.0	XXX	0
3299999. To	otal Certified - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0		0	0		0.0	0.0	XXX	0
3599999. To	otal Certified - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0		0	0	0.0	0.0	0.0	XXX	0
3699999. To	otal Certified - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Certified Excluding Protected Cells (Sum of																	
	3699999, 3799999, 3899999, 3999999 and																	
	099999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Reciprocal Jurisdiction - Affiliates - U.S.																	
	Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Reciprocal Jurisdiction - Affiliates - Other																1001	
	Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Reciprocal Jurisdiction - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
	otal Reciprocal Jurisdiction Excluding Protected																	
	Cells (Sum of 5099999, 5199999, 5299999,		-		-	-	-	-	_	-		_	-				2004	
5	5399999 and 5499999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0

									aranee)									
		Rein	surance Recov	verable on Pai	d Losses and	Paid Loss Ad	ustment Expe	nses	44	45	46	47	48	49	50	51	52	53
		37			Overdue			43										
			38	39	40	41	42					Recoverable						
									Total	Recoverable		on Paid			Percentage			
									Recoverable	on Paid	Total	Losses &			of Amounts			
									on Paid	Losses &	Recoverable	LAE Over 90			More Than			Amounts in
									Losses &	LAE Over 90	on Paid	Days Past			90 Days	Percentage		Col. 47 for
								Total Due	LAE	Days Past	Losses &	Due Amounts			Overdue Not	More Than	Is the	Reinsurers
ID							Total	Cols. 37+42	Amounts in	Due Amounts	LAE	Not in	Amounts		in Dispute	120 Days	Amount in	with Values
Number							Overdue	(In total	Dispute	in Dispute	Amounts Not	Dispute	Received	Percentage	(Col.	Overdue	Col. 50 Less	Less Than
From	Name of Reinsurer		1 - 29	30 - 90	91 - 120	Over 120		should equal	Included in	Included in	in Dispute	(Cols. 40 +	Prior	Overdue Col.	47/[Cols.	(Col. 41/	Than 20%?	20% in
Col. 1	From Col. 3	Current	Days	Days	Days	Days	+40+41	Cols. 7+8)	Col. 43	Cols. 40 & 41	(Cols 43-44)	`41 - 45)	90 Days	42/Col. 43	46+48])	Col. 43)	(Yes or No)	Col. 50
5799999. To	tal Authorized, Unauthorized, Reciprocal																	
Ji	urisdiction and Certified Excluding Protected																	
С	ells (Sum of 1499999, 2899999, 4299999 and																	
	699999)	18,332	1,526	1,152	0	0	2,678	21,010	0	0	21,010	0	0	12.7	0.0	0.0	XXX	0
5899999. To	tal Protected Cells (Sum of 1399999,																	
2	799999, 4199999 and 5599999)	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
9999999 Tot	als	18,332	1,526	1,152	0	0	2,678	21,010	0	0	21,010	0	0	12.7	0.0	0.0	XXX	0

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Provision for Reinsurance for Certified Reinsurers)

							Reinsulatio	e for Certified	,	ortified Beineu	ranaa						
		54	55	56	57	58	59	60	Provision for C 61	62	fance 63	64	65	Complete	f Col. 52 = "No";	Othonuioc	69
		54	55	50	57	58	59		01	62	63	64	60	Complete l		Otherwise	69
								Percent of							Enter 0		
								Collateral					000/ 5	66	67	68	Provision for
								Provided for					20% of				Overdue
								Net	Allowed on	20% of		Provision for	Recoverable				Reinsurance
						Net		Recoverables	Net	Recoverable		Reinsurance	on Paid	Total			Ceded to
						Recoverables		Subject to	Recoverables		Amount of	with Certified		Collateral	Net		Certified
				Percent		Subject to		Collateral	Subject to	Losses & LAE	Credit Allowed	Reinsurers	Over 90 Days	Provided (Col.	Unsecured		Reinsurers
		Certified	Effective	Collateral	Catastrophe	Collateral	Dollar Amoun	t Requirements	Collateral	Over 90 Days	for Net	Due to	Past Due	20 + Col. 21 +	Recoverable		(Greater of
ID		Reinsurer	Date of	Required for	Recoverables	Requirements	of Collateral	([Ċol. 20 +	Requirements	Past Due	Recoverables	Collateral	Amounts Not	Col. 22 +	for Which		[Col. 62 + Col.
Number		Rating	Certified	Full Credit	Qualifying for	for Full Credit	Required	Col. 21 + Col.	(Col. 60 / Col.	Amounts in	(Col. 57 +	Deficiency	in Dispute	Col. 24. not	Credit is	20% of	65] or Col.68;
From	Name of Reinsurer	(1 through	Reinsurer	(0% through	Collateral	(Col. 19 -	(Col. 56 *	22 + Col. 24] /	56, not to	Dispute (Col.	Col. 58 *	(Col. 19 -	(Col. 47 *	to Exceed	Allowed (Col.	Amount in	not to Exceed
Col. 1	From Col. 3	6)	Rating	100%)	Deferral	Col. 57)	Col. 58)	Col. 58)	exceed 100%)	45 * 20%)	Col. 61])	Col. 63)	20%)	Col. 63)	63 - Col. 66)	Col. 67	Col. 63)
.22-2824607	James River Insurance Company		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
0199999, To	otal Authorized - Affiliates - U.S. Intercompany P			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - U.S. Non-Pool	3		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Authorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.02-6005008	American European Insurance Company		XXX	XXX	XXX		XXX	XXX		XXX			XXX		XXX	XXX	
	Arch Reins Co	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
51-0434766	Axis Reins Co			XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.06-0237820	Chubb Tempest Re US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.31-0542366	The Cincinnati Ins Co			XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
	Endurance Assurance Corporation of America		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
.13-2673100	General Reins Corp	XXX		XXX	XXX	XXX		XXX		XXX			XXX		XXX	XXX	XXX
	Motors Insurance Corporation			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.13-4924125	Munich Reins Amer Inc			XXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
. 13-4924 125			XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX			XXX	XXX	XXX	
.4/-03559/9	National Indemnity Company					XXX					XXX		XXX				XXX
.31-4177110	Nationwide Mutual Fire Insurance Co		XXX		XXX		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX
.47-0698507	Odyssey Reins Co		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.13-3031176	Partner Reinsurance Company of the US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.52-1952955	Renaissance Reinsurance U.S. Inc	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.43-0727872	Safety National Casualty Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.13-1675535	Swiss Reinsurance America Corporation		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX
.75-1444207	SCOR Reinsurance Company		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.13-2918573	Toa Reinsurance Company		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.30-0703280	Tokio Millennnium Re AG		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.13-5616275	Transatlantic Reins Co		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.13-1290712	XL Reinsurance America, Inc.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.05-0316605	Factory Mutual Insurance company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.95-2769232	Insurance Company of the West		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.23-1641984	QBE Reins Corp	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.23-1336198	Donegal Mut Ins Co	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.22-2005057	Everest Reins Co		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.74-2195939	Houston Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.06-1481194	Markel Global Reins Co	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Allianz Global Risk US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Allied World Assurance Co US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0999999. To	otal Authorized - Other U.S. Unaffiliated Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-9991159	Michigan Catastrophe Claim Assn	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-9995035	Mutual Reins Bureau	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999. To	otal Authorized - Pools - Mandatory Pools			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1120337	Aspen Ins UK Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1340125	Hannover Ruckversicherungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Provision for Reinsurance for Certified Reinsurers)

								Provision for C	Certified Reinsu	rance						
	54	55	56	57	58	59	60	61	62	63	64	65	Complete i	f Col. 52 = "No"	; Otherwise	69
							Percent of							Enter 0		
							Collateral						66	67	68	Provision for
							Provided for	Percent Credit	t			20% of				Overdue
							Net	Allowed on	20% of		Provision for	Recoverable				Reinsurance
					Net		Recoverables	Net	Recoverable		Reinsurance	on Paid	Total			Ceded to
					Recoverables		Subject to	Recoverables	on Paid	Amount of	with Certified	Losses & LAE	Collateral	Net		Certified
			Percent		Subject to		Collateral	Subject to	Losses & LAE	Credit Allowed	Reinsurers	Over 90 Days	Provided (Col.	Unsecured		Reinsurers
	Certified	Effective	Collateral	Catastrophe	Collateral	Dollar Amoun	Requirements	Collateral	Over 90 Days	for Net	Due to	Past Due	20 + Col. 21 +	Recoverable		(Greater of
ID	Reinsurer	Date of	Required for	Recoverables	Requirements	of Collateral	([Ċol. 20 +	Requirements	Past Due	Recoverables	Collateral	Amounts Not	Col. 22 +	for Which		[Col. 62 + Col.
Number	Rating	Certified	Full Credit	Qualifying for	for Full Credit	Required	Col. 21 + Col.	(Col. 60 / Col.	Amounts in	(Col. 57 +	Deficiency	in Dispute	Col. 24, not	Credit is	20% of	65] or Col.68;
From Name of Reinsurer	(1 through	Reinsurer	(0% through	Collateral	(Col. 19 -	(Col. 56 *	22 + Col. 24] /	56, not to	Dispute (Col.	[Col. 58 *	(Col. 19 -	(Col. 47 *	to Exceed	Allowed (Col.	Amount in	not to Exceed
Col. 1 From Col. 3	6)	Rating	100%)	Deferral	Col. 57)	Col. 58)	Col. 58)	exceed 100%)	45 * 20%)	Col. 61])	Col. 63)	20%)	Col. 63)	63 - Col. 66)	Col. 67	Col. 63)
.AA-1126033 Lloyd's Syndicate Number 0033	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126435 Lloyd's Syndicate Number 0435	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
.AA-1126510 Lloyd's Syndicate Number 0510	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1126566 Lloyd's Syndicate Number 0566	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
.AA-1126609 Lloyd's Syndicate Number 0609	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1126727 Lloyd's Syndicate Number 0727	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
.AA-1127414 Lloyd's Syndicate Number 1414	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1126780 Lloyd's Syndicate Number 0780	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
_AA-1127084 Lloyd's Syndicate Number 1084	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1120156 Lloyd's Syndicate Number 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1127861 Lloyd's Syndicate Number 1861	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1120084 Lloyd's Syndicate Number 1955	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1128001 Lloyd's Syndicate Number 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1128003 Lloyd's Syndicate Number 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1120158 Lloyd's Syndicate Number 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1128623 Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1128791 Lloyd's Syndicate Number 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1128987 Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1129000 Lloyd's Syndicate Number 3000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126005 Lloyd's Syndicate Number 4000	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1120075 Lloyd's Syndicate Number 4020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126004 Lloyd's Syndicate Number 4444	XXX	XXX	XXX	XXX		XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	
.AA-1126006 Lloyd's Syndicate Number 4472	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-1120006 Lloyd's Syndicate Number 1980	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120163 Lloyd's Syndicate Number 5678	XXX XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120067 Lloyd's Syndicate Number 4242		XXX	XXX	XXX	XXX	XXX		XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX
.AA-1120097 Lloyd's Syndicate Number 2468 .AA-1126623 Lloyd's Syndicate Number 623	XXX XXX	XXX	XXX	XXX XXX	XXX XXX	XXX		XXX	XXX	XXX XXX	XXX XXX	XXX	XXX	XXX	XXX	
.AA-1126623Lloyd's Syndicate Number 623 .AA-1126382Lloyd's Syndicate Number 382	XXX	XXX XXX	XXX XXX			XXX XXX	XXX XXX	XXX XXX	XXX XXX		XXX XXX	XXX XXX	XXX XXX	XXX XXX	XXX XXX	
AA-1120382 Lloyd's Syndicate Number 382	XXX XXX	XXX	XXX	XXX	XXX	XXX XXX	XXX	XXX XXX	XXX XXX	XXX	XXX XXX	XXX XXX		XXX	XXX	XXX
AA-11200/1 Lloyd's Syndicate Number 2007 AA-1120106 Lloyd's Syndicate Number 1969			XXX				XXX		XXX	XXX				XXX		
.AA-1120106 Lloyd's Syndicate Number 1969		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
AA-1120171 Lloyd's Syndicate Number 1806			XXX	XXX	XXX		XXX		XXX	XXX		XXX	XXX	XXX		XXX
AA-1120124 Lloyd's Syndicate Number 1945		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
AA-1120179 Llovd's Syndicate Number 2988	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
AA-1120179 Lloyd's Syndicate Number 2966				XXX	XXX		XXX		XXX	XXX		XXX	XXX	XXX		
.AA-120137 Lloyd s Syndroate Number 1725	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
AA-3194130 Endurance Specialty Ins Ltd	XXX			XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX
AA-1370020 Swiss Re International SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190686 Partner Reinsurance Company Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1299999. Total Authorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1233333. Total Authonzeu - Other Non-0.3. Insulers			~~~	~~~	~~~	~~~	~~~	~~~	~~~	~~~	~~~	~~~	~~~	~~~	~~~	~~~

SCHEDULE F - PART 3 (Continued) Ceded Reinsurance as of December 31, Current Year (\$000 Omitted) (Provision for Reinsurance for Certified Reinsurers)

						•			Provision for C	ertified Reinsu	rance						
		54	55	56	57	58	59	60	61	62	63	64	65	Complete it	f Col. 52 = "No"	; Otherwise	69
								Percent of							Enter 0		
								Collateral						66	67	68	Provision for
								Provided for	Percent Credit				20% of				Overdue
								Net	Allowed on	20% of		Provision for	Recoverable				Reinsurance
						Net		Recoverables	Net	Recoverable		Reinsurance	on Paid	Total			Ceded to
						Recoverables		Subject to	Recoverables	on Paid	Amount of	with Certified	Losses & LAE	Collateral	Net		Certified
				Percent		Subject to		Collateral	Subject to	Losses & LAE	Credit Allowed	Reinsurers	Over 90 Days	Provided (Col.	Unsecured		Reinsurers
		Certified	Effective	Collateral	Catastrophe	Collateral	Dollar Amount	Requirements	Collateral	Over 90 Days	for Net	Due to	Past Due	20 + Col. 21 +	Recoverable		(Greater of
ID		Reinsurer	Date of	Required for	Recoverables		of Collateral	([Col. 20 +	Requirements	Past Due	Recoverables	Collateral	Amounts Not	Col. 22 +	for Which		[Col. 62 + Col.
Number		Rating	Certified	Full Credit		for Full Credit	Required	Col. 21 + Col.	(Col. 60 / Col.	Amounts in	(Col. 57 +	Deficiency	in Dispute	Col. 24, not	Credit is	20% of	65] or Col.68;
From	Name of Reinsurer	(1 through	Reinsurer	(0% through	Collateral	(Col. 19 -	(Col. 56 *	22 + Col. 24] /		Dispute (Col.	[Col. 58 *	(Col. 19 -	(Col. 47 *	to Exceed	Allowed (Col.	Amount in	not to Exceed
Col. 1	From Col. 3	6)	Rating	100%)	Deferral	Col. 57)	Col. 58)	Col. 58)	exceed 100%)	45 * 20%)	Col. 61])	Col. 63)	20%)	Col. 63)	63 - Col. 66)	Col. 67	Col. 63)
1499999. To	otal Authorized Excluding Protected Cells (Sum of 089	9999, 09999	999,														
1	1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.47-1588915	Falls Lake Fire and Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.20-8946040	James River Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.20-0328998	Stonewood Insurance Company	XXX	XXX	XXX	XXX		XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1599999. To	otal Unauthorized - Affiliates - U.S. Intercompany Pooli	ing		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999. To	otal Unauthorized - Affiliates - U.S. Non-Pool	•		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191387	Carolina Re, Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190958	JRG Reinsurance Company, Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - Other (Non-U.S.) - Other	r		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates - Other (Non-U.S.)	-		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Allied World Assurance Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Hamilton Re. Ltd.	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX		XXX
	Hannover Re (Bermuda) Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	MS Amlin AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Peak Reinsurance Company Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Convex Insurance UK Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	New India Assurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	American Risk Services Reinsurance Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3191295	Third Point Reins Co USA Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Third Point Reins Co Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
.AA-3770492	Topsail Reinsurance SPC, Ltd.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	Sirius International Ins	XXX	XXX	XXX		XXX	XXX	XXX	XXX		XXX	XXX	XXX		XXX	XXX	XXX
2699999, T	otal Unauthorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2899999. To	otal Unauthorized Excluding Protected Cells (Sum of 2	299999, 239	99999,														
	2499999, 2599999 and 2699999)	,,	,	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Certified - Affiliates - U.S. Non-Pool			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
	otal Certified - Affiliates - Other (Non-U.S.)			XXX	0	0	0		XXX	0	0	0	0	0	0	0	0
	otal Certified - Affiliates			XXX	0	0	0		XXX	0	0	0	0	0	0	0	0
	otal Certified Excluding Protected Cells (Sum of 36999	99, 3799999	9, 3899999.		ľ	U U	Ů			Ŭ	Ŭ	v	0	Ŭ	U U		
3	3999999 and 4099999)	,	,,	XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
	otal Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Reciprocal Jurisdiction - Affiliates - Other (Non-U.S	S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal Reciprocal Jurisdiction Excluding Protected Cells (5199999, 5299999, 5399999 and 5499999)	(Sum of 509	9999,	XXX	XXX	xxx	xxx	XXX	XXX	xxx	XXX	XXX	xxx	XXX	xxx	XXX	XXX
-	otal Authorized, Unauthorized, Reciprocal Jurisdiction a	and Cortifica	1 Evoluting	~~~~	~~~	~~~	~~~	~~~~	~~~	~~~~	~~~~	~~~	~~~~	~~~	~~~	~~~	
	Protected Cells (Sum of 1499999, 2899999, 4299999 a			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
	otal Protected Cells (Sum of 1399999, 2799999, 41999			XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0
9999999 To				XXX	ů 0	0	0		XXX	0	0	0	0	0	0	0	,
333333310				////	0	U	0	/////	////	U	0	0	0	0	U	0	0

		70				due Authorized and				
		70	Dravision for Linguth	horized Reinsurance		iction Reinsurance		Total Provision	for Boingurance	
							75	76		70
			71	72	73	74	75	10	77	78
					Complete if	Complete if				
					Col. 52 = "Yes";	Col. 52 = "No";				
					Otherwise Enter 0	Otherwise Enter 0				
						Greater of 20% of Net				
					20% of Recoverable	Recoverable Net of				
					on Paid Losses &	Funds Held &				
		000/ -f								
		20% of		Provision for Overdue	LAE Over 90 Days	Collateral, or 20% of				
		Recoverable on Paid	Provision for	Reinsurance from	Past Due Amounts	Recoverable on Paid	Provision for Amounts			
		Losses & LAE Over	Reinsurance with	Unauthorized	Not in Dispute + 20%	Losses & LAE Over 90		Provision for Amounts		
ID		90 Days past Due	Unauthorized	Reinsurers and	of Amounts in	Days Past Due	and Reciprocal	Ceded to Unauthorized	Provision for Amounts	
Number		Amounts Not in	Reinsurers Due to	Amounts in Dispute	Dispute	(Greater of Col. 26 *	Jurisdiction	Reinsurers	Ceded to Certified	Total Provision for
From	Name of Reinsurer	Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or	Reinsurers	(Cols. 71 + 72 Not in	Reinsurers	Reinsurance
Col. 1	From Col. 3	(Col. 47 * 20%)	(Col. 26)	Amount in Col. 16)	[Col. 45 * 20%])	Cols. [40 + 41] * 20%)	(Cols. 73 + 74)	Excess of Col. 15)	(Cols. 64 + 69)	(Cols. 75 + 76 + 77)
.22-2824607	James River Insurance Company	0	XXX	XXX	0		(XXX	XXX	0
	balles inver insurance company	0		XXX		<u>ر</u>		XXX		
		0	XXX		0	0	0	XXX	XXX	0
	otal Authorized - Affiliates - U.S. Non-Pool				•	*	•			0
	otal Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	*	0	1000	XXX	0
	otal Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
	American European Insurance Company	0	XXX	XXX	D	۵	0	XXX	XXX	0
.06-1430254	Arch Reins Co	0	XXX		ο	0	0			0
51-0434766	Axis Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
	Chubb Tempest Re US	0	XXX	XXX	0	0	0	XXX	XXX	0
	The Cincinnati Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
	Endurance Assurance Corporation of America		XXX	XXX				XXX	XXX	
	General Reins Corp	0		XXX				XXX		
	Motors Insurance Corporation						0			
		U	XXX	XXX	U		U	XXX	XXX	U
	Munich Reins Amer Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
.47-0355979	National Indemnity Company	0	XXX	XXX	0	۵	0	XXX	XXX	0
.31-4177110	Nationwide Mutual Fire Insurance Co	0	XXX	XXX	0	0	0	XXX	XXX	0
	Odyssey Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
.13-3031176	Partner Reinsurance Company of the US	0	XXX	XXX	0	0	0	XXX	XXX	0
.52-1952955	Renaissance Reinsurance U.S. Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
.43-0727872	Safety National Casualty Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
	Swiss Reinsurance America Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
	SCOR Reinsurance Company	n l	XXX	XXX	n N	n n	n	XXX	XXX	n N
	Toa Reinsurance Company	۰	XXX	XXX	n	n	۰	XXX	XXX	
	Tokio Millennnium Re AG		XXX	XXX		0		XXX	XXX	
	Transatlantic Reins Co		XXX	XXX	J			XXX	XXX	
		v								
	XL Reinsurance America, Inc.		XXX	XXX	ļ	ļ		XXX	XXX	
	Factory Mutual Insurance company	0	XXX	XXX	0	0	0	XXX	XXX	0
	Insurance Company of the West	0	XXX	XXX	0	0		XXX	XXX	0
	QBE Reins Corp	Q	XXX	XXX	Q	l0	0	XXX	XXX	0
	Donegal Mut Ins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
.22-2005057	Everest Reins Co	0	XXX		0	0	0	XXX	XXX	0
.74-2195939	Houston Casualty Company	0	XXX		0	0	0		XXX	0
	Markel Global Reins Co	0	XXX	XXX	0	0	0	XXX	XXX	0
	Allianz Global Risk US	0	XXX	XXX	0	0	0	XXX	XXX	0
	Allied World Assurance Co US	0	XXX	XXX	0	0	0	XXX	XXX	0 0
	otal Authorized - Other U.S. Unaffiliated Insurers	0		XXX	0	0	0		XXX	<u>ه</u>
		0			0	0	0			0
	Michigan Catastrophe Claim Assn		XXX	XXX	Ď	L		XXX	XXX	Q
	Mutual Reins Bureau	0	XXX	XXX	0	ļ0	0	XXX	XXX	0
	otal Authorized - Pools - Mandatory Pools	0		XXX	0	-	•		XXX	0
.AA-1120337	Aspen Ins UK Ltd	0	XXX	XXX	۵	0	0	XXX	XXX	0

ID Number 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Lissues Provision for Overdue (Col. 47 * 20%) Provision for Amounts (Col. 47 * 20%) A4 + 1126303 Logd's syndiate Number 050 0 XXX XXX 0 0 XXX A4 + 1126303 Logd's syndiate Number 050 0 XXX XXX 0 0 XXX A4 + 1126303 Logd's syndiate Number 050 0 XXX XXX 0 0 XXX A4 + 1126303 Logd's syndiate Number 060 0 XXX 0 0 XXX A4 + 1126304 Logd's syndiate Number 060 0 <td< th=""><th>ion for Reinsurance 77</th><th>78</th></td<>	ion for Reinsurance 77	78
ID Number From Name of Reinsurer From 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due to Collateral Deficiency (Col. 72 71 72 73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 76 Number From Name of Reinsurer Col. 1 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due to Collateral Deficiency (Col. 74 Provision for Overdue Reinsurance from Unauthorized Amounts in Dispute Provision for Amounts 0 Provision for Amounts Coll 47 Provision for Amounts 0 Provision for Amounts Collateral Deficiency (Col. 74 Provision for Amounts 0		79
ID Number From Name of Reinsurer 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not Provision for Reinsurance from Unauthorized Reinsurance from Provision for Amounts Collateral Deficiency (Col. 47 * 20%) Complete if Colls 22 * 1%e°; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Provision for Amounts Days Past Due Amounts in Dispute (Col. 47 * 20%) Provision for Amounts Reinsurance from Unauthorized Reinsurers Due to Collateral Deficiency (Col. 47 * 20%) Provision for Amounts (Col. 47 * 20%) Provision for Amo	((/x
ID Number Name of Reinsurer 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due 90 Days past Due 10 Dispute Provision for Overdue Reinsurance with Unauthorized Provision for Amounts Reinsurance with Col. 17 + 20% of the Col. 40 + 411 - 20% of the Col. 40 + 411 - 20% of the Col. 40 + 411 - 20% of 0 Provision for Amounts Reinsurance (Col. 73 + 74) Provision for Amounts Reinsurance (Col. 73 + 74) A4-13803 Lloyd's Syndicate Nuber 035 0 XXX XXX 0 0 0 XXX A4-112850 Lloyd's Syndicate Nuber 0510 0 XXX XXX 0 0 0 XXX A4-112860 Lloyd's		10
ID Number Provision for Overdue Provision for Overdue Otherwise Enter 0 Greater of 20% of Net Recoverable on Paid Losses & LAE Over 90 Provision for Overdue Greater of 20% of Recoverable on Paid Losses & LAE Over 90 Provision for Amounts Natin Dispute Provision for Amounts Not in Dispute + 20% of Amounts in Dispute Provision for Amounts Not in Dispute + 20% Provision for Amounts Dispute Provision for Amounts Not in Dispute + 20% Provision for Amounts Not in Dispute Provision for Amounts Dispute Provision for Amounts Not in Dispute Provision for Amounts Not in Dispute Provision for Amounts Dispute Provision for Amounts Not in Dispute Provision for Amounts Dispute Provision for Amounts Dispute A4-120303 Hanover Ruckversicheru		
ID Name of Reinsurer 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute Provision for Overdue Reinsurance with Unauthorized Amounts Not in Dispute Provision for Overdue Reinsurers and Amounts Not in Dispute Greater of 20% of Net Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute Front Signet (Col. 1 Greater of Col. 26 (Col. 47 * 20%) + (Col. 47 * 20%) Front Signet Col. 1 Front Signet Reinsurers Provision for Amounts Reinsurers Due (Col. 10 + 20% of the Col. 10 + 20% of Col. 10 + 20% of Co		
ID Name of Reinsurer 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute Provision for Overdue Reinsurance with Unauthorized Amounts Not in Dispute Provision for Overdue Reinsurers and Amounts Not in Dispute Greater of 20% of Net Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute Front Signet (Col. 1 Greater of Col. 26 (Col. 47 * 20%) + (Col. 47 * 20%) Front Signet Col. 1 Front Signet Reinsurers Provision for Amounts Reinsurers Due (Col. 10 + 20% of the Col. 10 + 20% of Col. 10 + 20% of Co		
ID Name of Reinsurer 20% of Recoverable OP aid Syndicate Number 003 Provision for Recoverable on Paid (Coll. 47 * 20%) Provision for Overdue Reinsurance with Unauthorized Reinsurance with Unauthorized Reinsurance (Col. 47 * 20%) Recoverable Re for Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Col. 47 * 20%) Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% <td></td> <td></td>		
ID Name of Reinsurer 20% of Recoverable OP aid Syndicate Number 003 Provision for Recoverable on Paid (Coll. 47 * 20%) Provision for Overdue Reinsurance with Unauthorized Reinsurance with Unauthorized Reinsurance (Col. 47 * 20%) Recoverable Re for Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Greater Of Col. 26 * 20% of Recoverable on Paid Days Past Due (Col. 47 * 20%) Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% Provision for Amo Ceded to Unauthorized Reinsurers Col. [40 + 41] * 20% <td></td> <td></td>		
ID ID ID NumberName of Reinsurer From Col. 120% of Recoverable on Paid Losses & LAE Over Mounts Not in (Col. 47 * 20%)Provision for Overdue Reinsurance with Unauthorized Reinsurance model Mumber (Col. 70 + 20%)Funds Heid & Collateral. 0 20% of Recoverable on Paid Dasses & LAE Over Mamunts Not in (Col. 47 * 20%)Provision for Overdue Reinsurance with Unauthorized Reinsurers and (Col. 70 + 20%)Funds Heid & Collateral. 0 20% of Recoverable on Paid Dasses & LAE Over Of Amounts in Dispute (Col. 70 + 20%)Funds Heid & Collateral. 0 20% of Reinsurers and (Col. 71 + 20%)Provision for Amounts Dispute (Col. 72 + 74)Provision for Amounts Dispute		
ID NumberName of Reinsurer FromName of Reinsurer From Col. 120% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)Provision for Overdue Reinsurance with Unauthorized Reinsurance with Unauthorized Reinsurers and Amounts Not in Collateral Deficiency (Col. 47 * 20%)LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)Provision for Amounts Ceded to Authorized Reinsurers and Amounts in Dispute (Col. 47 * 20%)Provision for Amounts Reinsurers and Amounts in Dispute (Col. 47 * 20%)Provision for Amounts Colas (26 * 20%)Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 71 + 72 NC Excess of Col. 140 + 411 * 20%)Provision for Amounts Ceded to Authorized Reinsurers (Cols. 73 + 74)Provision for Amounts Ceded to Authorized Reinsurers (Cols. 71 + 72 NC Cols. [40 + 41] * 20%)Provision for Amounts Cols. [40 + 41] * 20%)Provision for Amounts Ceded to Authorized and Reciprocal Jurisdicton Reinsurers (Cols. 73 + 74)Provision for Amounts Ceded to Authorized Reinsurers (Cols. 71 + 72 NC Cols. [40 + 41] * 20%)Provision for Amounts Cols. [40 + 41] * 20%)Provision for Amounts Cols. [40 + 41] * 20%)I Dispute Col 1 for Col 3(Col. 47 * 20%)(Col. 47 * 20%)(Col. 45 * 20%))00000A-1126636Lloyd's Syndicate Number 063300XXXXXX0000XXXA-1126656Lloyd's Syndicate Number 066900XXXXXX000XXX		
ID Number From Col.1Name of Reinsurer From Col.3Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)Provision for Reinsurers Due to Collateral Deficiency (Col. 47 * 20%)Past Due Amounts Unauthorized Reinsurers Due to Collateral Deficiency (Col. 47 * 20%)Past Due Amounts in Dispute (Col. 47 * 20%)Recoverable on Paid Days Past Due (Col. 47 * 20%)Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction (Col. 47 * 20%)Provision for Amounts Ceded to Authorized Reinsurers (Col. 47 * 20%)Provision for Amounts Ceded to Authorized (Col. 47 * 20%)AA-132023 AA-112633 Lloyd's Syndicate Number 033Mainer Anoitate Number 0350XXXXXX000XXXAA-112650 AA-112656 Lloyd's Syndicate Number 05660XXXXXX000XXXAA-112650 AA-1126720XXXXXXXXX000XXXAA-112650 AA-112672Coll deficiency (Col. 47 * 20%)00XXXXXX000XXXAA-112666 AA-112672Lloyd's Syndicate Number 056600XXXXXX000XXXAA-112666 AA-112672Lloyd's Syn		
ID Number FromName of Reinsurer From Col. 3Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)Reinsurance with Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the (Col. 70 + 20% of the (Col. 47 * 20%)]+Not in Dispute + 20% of Amounts in Dispute (Col. 47 * 20%)]+Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Col. 71 + 20%)Provision for Amo Ceded to Unautho Reinsurers (Col. 70 + 20% of the (Col. 70 + 20% of the (Col. 47 * 20%)]+Not in Dispute + 20% of Amounts in Dispute (Col. 47 * 20%)]+Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)Provision for Amo Ceded to Unautho Reinsurers (Cols. 71 + 72 NC Cols. [40 + 41]* 20%)Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)Provision for Amo Ceded to Load's Cole 40 to Load's Cole 40 to Authorized Reinsurers (Col. 74 * 20%)]+Desces & LAE Over 90 Days Past Due (Col. 47 * 20%)]+Provision for Amo Ceded to Authorized Reinsurers (Cols. 71 + 72 NC Cols. [40 + 41]* 20%)Ceded to Authorized and Reciprocal Days Past Due (Cols. 73 + 74)Provision for Amo Reinsurers (Cols. 71 + 72 NC Cols. [40 + 41]* 20%)Provision for Amo Reinsurers (Cols. 73 + 74)Provision for Amo Reinsurers (Cols. 71 + 72 NC Cols. [40 + 41]* 20%)Ceded to Authorized Reinsurers (Cols. 73 + 74)Provision for Amo Reinsurers (Cols. 73 + 74)Provision for Amo Reinsurers (Cols. 73 + 74)AA-1126435 Logi's Syndicate Number 0635		
ID Number From Col.1Name of Reinsurer From Col.390 Days past Due Amounts Not in Dispute (Col.47*20%)Unauthorized Reinsurers Due to Collateral Deficiency (Col.74*20%)Reinsurers and Amounts in Dispute (Col.74*20%)Days Past Due (Gol.74*20%)and Reciprocal Jurisdiction Reinsurers (Col.74*20%)AA-1340125 A-112635 A-1126455 A-1126455Hannove Ruckversicherungs AG Lloyd's Syndicate Number 043500000XXXAA-1126510 Lloyd's Syndicate Number 05100XXXXXX0000XXXAA-1126566 Lloyd's Syndicate Number 06690XXXXXX000XXXAA-1126727 Lloyd's Syndicate Number 07270XXXXXXXXX000XXXAA-112670 Lloyd's Syndicate Number 07270XXXXXX000XXXAA-112670 Lloyd's Syndicate Number 07200XXXXXXXXX000XXXAA-112670 Lloyd's Syndicate Number 07200XXXXXX000XXXAA-112670 Lloyd's Syndicate Number 07400XXXXXX000XXXAA-112670 Lloyd's Syndicate Number 07400XXXXXX000XXXAA-112670 Lloyd's Syndicate Number 07400XXXXXX000XXXAA-112670 Lloyd's Syndicate Number 16860XXXXXX000XXX<		
Number From Col.1Name of Reinsurer From Col.3Amounts Not in Dispute (Col.47*20%)Reinsurers Due to Collateral Deficiency (Col.26)Amounts in Dispute (Col.70+20% of the Amount in Col.16)Dispute (Col.47*20%)+Greater of Col.26* 20% or (Col.47*20%)Jurisdiction Reinsurers (Cols.71+72 NC)AA-13025 AA-13025 AA-112633 AL10yd's Syndicate Number 0033 AA-1126435 Lloyd's Syndicate Number 0650 AA-132668 Lloyd's Syndicate Number 0669 Lloyd's Syndicate Number 0669 Lloyd's Syndicate Number 0727 AA-1126430 Lloyd's Syndicate Number 0780 AA-1126430 Lloyd's Syndicate Number 0780 AA-1126400 Lloyd's Syndicate Number 0780 AA-1126430 Lloyd's Syndicate Number 0780 AA-1126430 Lloyd's Syndicate Number 0780 AA-1127080 Lloyd's Syndicate Number 0780 AA-1127080 Lloyd's Syndicate Number 1684 AA-1127080 Lloyd's Syndicate Number 1684 AA-1127080 Lloyd's Syndicate Number 1686 AA-1127080 Lloyd's Syndicate Number 1686 	nts	
From Col. 1 Name of Reinsurer From Col. 3 Dispute (Col. 47 * 20%) Collateral Deficiency (Col. 47 * 20%) (Col. 70 + 20% of the Amount in Col. 16) ([Col. 47 * 20%] + [Col. 45 * 20%]) 20% or Cols. [40 + 41] * 20%) Reinsurers (Cols. 73 + 74) (Col. 71 + 72 Nc Excess of Col. 1 AA-130125 AA-132033 Lloyd's Syndicate Number 0033 0 0 0 0 XXX AA-1126435 Lloyd's Syndicate Number 0435 0 0 XXX 0 0 0 XXX AA-1126510 Lloyd's Syndicate Number 0510 0 0 XXX XXX 0 0 0 XXX AA-1126506 Lloyd's Syndicate Number 0510 0 XXX XXX 0 0 0 XXX AA-1126506 Lloyd's Syndicate Number 0566 0 0 XXX XXX 0 0 0 XXX AA-1126506 Lloyd's Syndicate Number 0609 0 0 XXX XXX 0 0 0 XXX AA-1126702 Lloyd's Syndicate Number 0727 0 XXX XXX 0 0 <td>zed Provision for Amounts</td> <td></td>	zed Provision for Amounts	
From Col.1 Name of Reinsurer From Col.3 Dispute (Col. 47 * 20%) Collateral Deficiency (Col. 26) (Col. 70 + 20% of the Amount in Col. 16) ([[Col. 47 * 20%]] + [[Col. 45 * 20%]) 20% or Cols. [40 + 41] * 20%) Reinsurers (Cols. 73 + 74) (Col. 71 + 72 Nc Excess of Col. 1 AA-130125 Hannover Ruckversicherungs AG 0 XXX XXX 0 0 0 XXX AA-1126430 Lloyd's Syndicate Number 0435 0 0 XXX XXX 0 0 0 XXX AA-1126450 Lloyd's Syndicate Number 0510 0 XXX XXX 0 0 XXX AA-1126660 Lloyd's Syndicate Number 0506 0 XXX XXX 0 0 XXX AA-1126609 Lloyd's Syndicate Number 0609 0 XXX XXX 0 0 XXX AA-1126609 Lloyd's Syndicate Number 0609 0 XXX XXX 0 0 XXX AA-1126707 Lloyd's Syndicate Number 077 0 XXX XXX 0 0 0 XXX AA-1126708 </td <td>Ceded to Certified</td> <td>Total Provision for</td>	Ceded to Certified	Total Provision for
Col. 1 From Col. 3 (Col. 47 * 20%) (Col. 26) Amount in Col. 16) Col. 45 * 20%) Cols. [40 + 41] * 20%) (Cols. 73 + 74) Excess of Col. 1 AA-1340125 Hannover Ruckversicherungs AG 0 0 0 0 0 0 XXX AA-112603 Lloyd's Syndicate Number 0033 0 0 0 XXX XXX 0 0 0 XXX AA-112635 Lloyd's Syndicate Number 0435 0 XXX XXX 0 0 0 XXX AA-1126510 Lloyd's Syndicate Number 0510 0 XXX XXX 0 0 0 XXX AA-1126566 Lloyd's Syndicate Number 0566 0 0 XXX XXX 0 0 0 XXX AA-1126609 Lloyd's Syndicate Number 0566 0 0 XXX XXX 0 0 0 XXX AA-112609 Lloyd's Syndicate Number 0566 0 0 XXX XXX 0 0 0 XXX <	in Reinsurers	Reinsurance
AA-1340125 Hannover Ruckversicherungs AG 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(Cols. 75 + 76 + 77)
AA-1126033 Lloyd's Syndicate Number 0033 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0) (0013: 04 · 00) XXX	
AA-1126435 Lloyd's Syndicate Number 0435 0 0 0 XXX AA-1126510 Lloyd's Syndicate Number 0510 0 0 0 XXX AA-1126566 Lloyd's Syndicate Number 0566 0 XXX XXX 0 0 0 XXX AA-1126566 Lloyd's Syndicate Number 0566 0 XXX XXX 0 0 0 XXX AA-1126607 Lloyd's Syndicate Number 0669 0 XXX XXX 0 0 0 XXX AA-1126727 Lloyd's Syndicate Number 0727 0 XXX XXX 0 0 0 XXX AA-1127414 Lloyd's Syndicate Number 0727 0 XXX XXX 0 0 0 XXX AA-11276780 Lloyd's Syndicate Number 0780 0 0 XXX XXX 0 0 0 XXX AA-1127084 Lloyd's Syndicate Number 1086 0 XXX XXX 0 0 0 XXX AA-1127084 Lloyd's Syndicate Number 1086 0 XXX XXX 0 0 0	XXX	v
AA-1126510 Lloyd's Syndicate Number 0510 0 0 0 XXX AA-1126566 Lloyd's Syndicate Number 0566 0 XXX XXX 0 0 0 XXX AA-1126566 Lloyd's Syndicate Number 0566 0 XXX XXX 0 0 0 XXX AA-1126609 Lloyd's Syndicate Number 0609 0 0 XXX XXX 0 0 0 XXX AA-112677 Lloyd's Syndicate Number 0727 0 XXX XXX 0 0 0 XXX AA-112744 Lloyd's Syndicate Number 1414 0 XXX XXX 0 0 0 XXX AA-1126780 Lloyd's Syndicate Number 1414 0 XXX XXX 0 0 0 XXX AA-1126780 Lloyd's Syndicate Number 1414 0 XXX XXX 0 0 0 XXX AA-1126784 Lloyd's Syndicate Number 0780 0 0 0 XXX XXX AA-1126784 Lloyd's Syndicate Number 1084 0 XXX XXX 0 0		
AA-1126566 Lloyd's Syndicate Number 0566 0 XXX XXX 0 0 0 XXX AA-1126609 Lloyd's Syndicate Number 0609 0 0 XXX XXX 0 0 0 XXX AA-1126727 Lloyd's Syndicate Number 0727 0 0 XXX XXX 0 0 0 XXX AA-1127414 Lloyd's Syndicate Number 1414 0 XXX XXX 0 0 0 XXX AA-1126780 Lloyd's Syndicate Number 0780 0 0 XXX XXX 0 0 0 XXX AA-1127084 Lloyd's Syndicate Number 0780 0 0 XXX XXX 0 0 0 XXX AA-1127084 Lloyd's Syndicate Number 1084 0 XXX XXX 0 0 0 XXX AA-1127084 Lloyd's Syndicate Number 1086 0 XXX XXX 0 0 0 XXX AA-1127084 Lloyd's Syndicate Number 1086 0 XXX XXX 0 0 0 XXX AA-1127084 </td <td>XXX</td> <td>.+</td>	XXX	.+
AA-1126609 Lloyd's Syndicate Number 0609 0 0 0 0 0 AA-1126727 Lloyd's Syndicate Number 0727 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	XXX	
AA-1126727 Lloyd's Syndicate Number 0727 0 0 0 XXX AA-1127414 Lloyd's Syndicate Number 1414 0 XXX XXX 0 0 0 XXX AA-1127610 Lloyd's Syndicate Number 0780 0 0 XXX 0 0 0 XXX AA-1126780 Lloyd's Syndicate Number 0780 0 0 XXX 0 0 0 XXX AA-1127080 Lloyd's Syndicate Number 0780 0 0 XXX XXX 0 0 0 XXX AA-1127080 Lloyd's Syndicate Number 1084 0 XXX XXX 0 0 0 XXX AA-1127081 Lloyd's Syndicate Number 1086 0 XXX XXX 0 0 0 XXX AA-1127081 Lloyd's Syndicate Number 1861 0 XXX XXX 0 0 0 XXX	XXX	0
AA-1127414 Lloyd's Syndicate Number 1414 0 0 0 XXX AA-1126780 Lloyd's Syndicate Number 0780 0 0 0 XXX AA-1127084 Lloyd's Syndicate Number 10780 0 0 XXX 0 0 0 XXX AA-1127084 Lloyd's Syndicate Number 1086 0 XXX XXX 0 0 0 XXX AA-1127081 Lloyd's Syndicate Number 1086 0 XXX XXX 0 0 0 XXX AA-1127081 Lloyd's Syndicate Number 1861 0 XXX XXX 0 0 0 XXX		0
AA-1126780 Lloyd's Syndicate Number 0780 0 0 XXX AA-1126780 Lloyd's Syndicate Number 0780 0 0 XXX AA-1127084 Lloyd's Syndicate Number 1084 0 XXX XXX 0 0 XXX AA-1120156 Lloyd's Syndicate Number 1686 0 XXX XXX 0 0 0 XXX AA-1120156 Lloyd's Syndicate Number 1686 0 XXX XXX 0 0 0 XXX AA-1127861 Lloyd's Syndicate Number 1861 0 XXX XXX 0 0 0 XXX		0
AA-1127084 Lloyd's Syndicate Number 1084 0 0 XXX AA-1120156 Lloyd's Syndicate Number 1686 0 XXX XXX 0 0 XXX AA-1120156 Lloyd's Syndicate Number 1686 0 XXX XXX 0 0 XXX AA-1120761 Lloyd's Syndicate Number 1861 0 XXX XXX 0 0 XXX	XXX	
AA-1127084 Lloyd's Syndicate Number 1084 0 0 XXX AA-1120156 Lloyd's Syndicate Number 1686 0 XXX XXX 0 0 XXX AA-1120156 Lloyd's Syndicate Number 1686 0 XXX XXX 0 0 XXX AA-1120761 Lloyd's Syndicate Number 1861 0 XXX XXX 0 0 XXX		0
AA-1120156 Lloyd's Sýndicate Number 1686 0 XXX XXX 0 0 XXX AA-1120761 Lloyd's Syndicate Number 1861 0 XXX XXX 0 0 XXX	XXX	0
AA-1127861 Lloyd's Syndicate Number 1861	XXX	0
	XXX	0
AA-1128001 Lloyd's Syndicate Number 2001	XXX	
AA-1128003 Lloyd's Syndicate Number 2003		
AA-1120158 Lloyd's Syndicate Number 2014	XXX	0
AA-1128623 Lloyd's Syndicate Number 2623	XXX	0
AA-1128791 Lloyd's Syndicate Number 2791 0	XXX	0
AA-1128987 Lloyd's Syndicate Number 2987 0 0		0
AA-1129000 Lloyd's Syndicate Number 3000 0 XXX XXX 0 0 0 XXX	XXX	0
AA-1126005 Lloyd's Syndicate Number 4000	XXX	0
AA-1120075 Llovd's Syndicate Number 4020 0	XXX	0
AA-1126004 Llovd's Syndicate Number 4444 0 0 XXX 0 0 0 0 0 XXX	XXX	0
AA-1126006 Lloyd's Syndicate Number 4472 0 0 0 0 0 XXX	XXX	
AA-1120006 Lloyd's Syndicate Number 11/2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	XXX	0
AA-1120000 Lloyd's Syndicate Number 1990	XXX	
	XXX	
		.t
AA-1120097 Lloyd's Syndicate Number 2468	XXX	.+0
AA-1126623 Lloyd's Syndicate Number 623	XXX	
AA-1126382 Lloyd's Syndicate Number 382	XXX	0
AA-1120071 Lloyd's Syndicate Number 2007	XXX	0
AA-1120106 Lloyd's Syndicate Number 1969	XXX	0
AA-1120171 Lloyd's Syndicate Number 1856 0	XXX	
AA-1120124 Lloyd's Syndicate Number 1945 0		.lo
A4-1120113 Lloyd's Syndicate Number 3334 0 0 XXX 0 0 0 0 XXX	XXX	0
AA-1120179 Lloyd's Syndicate Number 2988 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	XXX	0
A-112157 Lloyd's Syndicate Number 1729 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	XXX	۰ ۱
AA-1120137 Cloyd s syndicate Number 1729 AA-1840000 Mapfre Re Compania de Reaseguros, SA 0 0	XXX	
		1
AA-3194130 Endurance Special ty Ins Ltd 0 XXX 0 0 0 0 XXX	XXX	
AA-1370020 Swiss Re International SE		. <u> </u> 0
AA-3190686 Partner Reinsurance Company Limited	XXX	0

	70		(1000111013011101		due Authorized and					
	18	Provision for Linaut	horized Reinsurance		iction Reinsurance		Total Provision	for Reinsurance		
		71	72	73	74	75	76	77	78	
		7.1	12	Complete if	Complete if	75	70	11	70	
				Col. 52 = "Yes";	Col. 52 = "No";					
				Otherwise Enter 0	Otherwise Enter 0					
				Otherwise Enter 0	Otherwise Enter 0					
					Greater of 20% of Net					
				20% of Recoverable	Recoverable Net of					
				on Paid Losses &	Funds Held &					
	20% of		Provision for Overdue	LAE Over 90 Days	Collateral, or 20% of					
	Recoverable on Paid	Provision for	Reinsurance from	Past Due Amounts	Recoverable on Paid	Provision for Amounts				
	Losses & LAE Over	Reinsurance with	Unauthorized	Not in Dispute + 20%	Losses & LAE Over 90		Provision for Amounts			
ID	90 Days past Due	Unauthorized	Reinsurers and	of Amounts in	Days Past Due	and Reciprocal	Ceded to Unauthorized			
Number	Amounts Not in	Reinsurers Due to	Amounts in Dispute	Dispute	(Greater of Col. 26 *	Jurisdiction	Reinsurers	Ceded to Certified	Total Provision for	
From Name of Reinsurer	Dispute	Collateral Deficiency	(Col. 70 + 20% of the	([Col. 47 * 20%] +	20% or	Reinsurers	(Cols. 71 + 72 Not in	Reinsurers	Reinsurance	
Col. 1 From Col. 3	(Col. 47 * 20%)	(Col. 26)	Amount in Col. 16)	[Col. 45 * 20%])	Cols. [40 + 41] * 20%)	(Cols. 73 + 74)	Excess of Col. 15)	(Cols. 64 + 69)	(Cols. 75 + 76 + 77)	
1299999. Total Authorized - Other Non-U.S. Insurers	0	XXX	XXX	0	0	0	XXX	XXX	0	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999,										
0999999, 1099999, 1199999 and 1299999)	0	XXX	XXX	0	0	0	XXX	XXX	0	
.47-1588915 Falls Lake Fire and Casualty Company	0	0	0		XXX	XXX	0	XXX	0	
.20-8946040 James River Casualty Company	0	0	0	XXX	XXX	XXX	0	XXX	0	
.20-0328998 Stonewood Insurance Company	0	0	0				0		0	
1599999. Total Unauthorized - Affiliates - U.S. Intercompany Pooling	0	0	0	XXX	XXX	XXX	0	XXX	0	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	XXX	0	
,AA-3191387 Carolina Re, Ltd	0	7	0	XXX	XXX	XXX	7	XXX	7	
.AA-3190958 JRG Reinsurance Company, Ltd	0		0	XXX	XXX	XXX	0	XXX		
2099999. Total Unauthorized - Affiliates - Other (Non-U.S.) - Other	0	7	0	XXX	XXX	XXX	7	XXX	7	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)	0	7	0	XXX	XXX	XXX	7	XXX	7	
2299999. Total Unauthorized - Affiliates	0	7	0	XXX	XXX	XXX	7	XXX	7	
AA-3194128 Allied World Assurance Co Ltd	0	1	0	XXX	XXX	XXX	7	XXX	1	
.AA-3191190 Hamilton Re, Ltd.				XXX	XXX	XXX		XXX		
_AA-3191190 Hamilton Re, Lto. _AA-3190060 Hannover Re (Bermuda) Ltd				XXX	XXX	XXX	U	XXX		
.AA-3190000 Hainiover Re (Bermuda) Ltu				XXX	XXX	XXX	0	XXX		
AA-1400019 MS Amilin AG AA-5320039 Peak Reinsurance Company Limited							U			
				XXX	XXX		4	XXX		
AA-1120191 Convex Insurance UK Limited		2		XXX	XXX	XXX		XXX	2	
.AA-5340660 New India Assurance Company .AA-0053911 American Risk Services Reinsurance Co Ltd				XXX	XXX			XXX		
AA-0053911 American Hisk Services Reinsurance Co Ltd AA-3191295 Third Point Reins Co USA Ltd	L	0	L	XXX XXX	XXX XXX	XXX XXX	L	XXX XXX	0	
AA-3191295 Third Point Heins Co USA Ltd AA-3191179 Third Point Reins Co Ltd			ļ							
				XXX	XXX	XXX	l	XXX		
.AA-3770492 Topsail Reinsurance SPC, Ltd.			ļ0	XXX	XXX	XXX		XXX		
AA-1440076 Sirius International Ins				XXX	XXX			XXX		
2699999. Total Unauthorized - Other Non-U.S. Insurers	0	20	0	XXX	XXX	XXX	20	XXX	20	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999,				2007	2007	2007		2007		
2399999, 2499999, 2599999 and 2699999)	0	27		XXX	XXX	XXX	27	XXX	27	
3299999. Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
3599999. Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
3699999. Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999,										
3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0	
5099999. Total Reciprocal Jurisdiction - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of										
5099999, 5199999, 5299999, 5399999 and 54999999)	0	XXX	XXX	0	0	0	XXX	XXX	0	
		,,,,,	,,,,,	, v	, v	, v	,,,,,	,,,,,	0	

				(1010111013011101	r toiniourunioo)					
		70			Provision for Over	due Authorized and				
			Provision for Unaut	horized Reinsurance	Reciprocal Jurisd	iction Reinsurance		Total Provision	for Reinsurance	
			71	72	73	74	75	76	77	78
					Complete if	Complete if				
					Col. 52 = "Yes";	Col. 52 = "No";				
					Otherwise Enter 0	Otherwise Enter 0				
ID Number From Col. 1	Name of Reinsurer From Col. 3	20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
	otal Authorized, Unauthorized, Reciprocal Jurisdiction and Certified	(001.11 2070)	(001. 20)	Amount in Col. 10)		20/0)	(0013.73 * 74)		(0013. 04 + 03)	
	Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and									
	699999)	0	27	0	0	0	0	27	0	27
	otal Protected Cells (Sum of 1399999, 2799999, 4199999 and									
	599999)	0	0	0	0	0	0	0	0	0
9999999 To	tals	0	27	0	0	0	0	27	0	27

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

		10		
1	2	3	4	5
Issuing or Confirming				
Bank Reference				
Number Used	.			
in Col. 23 of	Letters of	American Bankers Association		
Sch F Part 3	Credit Code	(ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001 2.			Wells Fargo Bank, National Association	
0001 2.		981390502	Lloyds Bank Corporate Markets PLC	
0001 2.			Suntrust Bank	
0002 2.		026002574	Barclays Bank PLC, New York Branch	
0002 2.		026007689	Lloyds Bank Corporate Markets PLC, New York Branch	
0002 2.		026007728	National Australia Bank, Limited	
0002 2.		026007689	BNP Paribus, New York Branch	
0002		026008044	Commerzbank Aktiengesellschaft, Filiale Luxemburg	
0003			Citibank Europe PLC	43
0004 1		026001591	Standard Chartered Bank	33
0005 1.			Commerce Bank	
0006			Lloyds Bank Corporate Markets PLC, New York Branch	45
0007 1			Barclays Bank PLC, New York Branch	31
0008			Nordea Bank ABP, New York Branch	2.171
0009 1		026009632	MUFG Bank, Ltd, New York Branch	1,036
0010 1		026009593	Bank of America, N.A.	226
· · · · · · · · · · · · · · · · · · ·				0
Total				10,698
i otai				10,000

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000:

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.	Axis Reinsurance Co		
2.	Chubb Tempest Re US		
3.	Safety National Casualty Corp		
4.	Swiss Reinsurance America Corp		
5.	Factory Mutual Insurance Company		804

B. Report the five largest reinsurance recoverables reported in Schedule F, Part 3, Column 15, due from any one reinsurer (based on the total recoverables, Schedule F, Part 3,Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6.	James River Insurance Company			Yes [X] No []
7.	Swiss Reinsurance America Corporation			Yes [] No [X]
8.	Stonewood Insurance Company			Yes [X] No []
9.	American European Insurance Company			Yes [] No [X]
10.	James River Casualty Company			Yes [X] No []

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

SCHEDULE F - PART 6

		1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)		0	
2.	Premiums and considerations (Line 15)		0	
3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)		(21,010,509)	C
4.	Funds held by or deposited with reinsured companies (Line 16.2)		0	
5.	Other assets	1,753,533	0	
6.	Net amount recoverable from reinsurers	0	216,040,900	
7.	Protected cell assets (Line 27)	0	0	C
8.	Totals (Line 28)		195,030,391	761,041,651
	LIABILITIES (Page 3)			
9.	Losses and loss adjustment expenses (Lines 1 through 3)			
10.	Taxes, expenses, and other obligations (Lines 4 through 8)		0	
11.	Unearned premiums (Line 9)	7, 190,675		
12.	Advance premiums (Line 10)		0	
13.	Dividends declared and unpaid (Line 11.1 and 11.2)	0	0	C
14.	Ceded reinsurance premiums payable (net of ceding commissions (Line 12)		(78,761,429)	C
15.	Funds held by company under reinsurance treaties (Line 13)		(293, 127, 874)	C
16.	Amounts withheld or retained by company for account of others (Line 14)	0	0	C
17.	Provision for reinsurance (Line 16)		(27,000)	C
18.	Other liabilities		0	
19.	Total liabilities excluding protected cell business (Line 26)		195,030,391	647,009,859
20.	Protected cell liabilities (Line 27)	0	0	C
21.	Surplus as regards policyholders (Line 37)	114,031,792	XXX	114,031,792

If yes, give full explanation: The above exhibit includes restatements for unaffiliated reinsurance, affiliated reinsurance as well as interompany pooling arrangement.

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities **NONE**

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

ΝΟΝΕ

Schedule H - Part 4 - Reinsurance

Schedule H - Part 5 - Health Claims

NONE

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

(\$000 OMITTED)

		Pr	emiums Earn	ed			Los	s and Loss Ex	pense Payme	ents			12
	ears in	1	2	3				and Cost	Adjusting		10	11	
	Vhich				Loss Pa	1 2 22		t Payments	Payn				Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
-	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and		0	(4 - 5 + 6 - 7	
In	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	XXX	XXX		212	25		68	12	3	149	XXX
2.	2011	21,723	16,213	5,510	14,209	10,831	2, 172	1,519		241	46	4 , 589	XXX
3.	2012	27,858	22,742	5, 117	18,021	15,384	3,301	2,369			27	4 , 184	XXX
4.	2013	19,616	14,894	4,722	6,540	4,723	2,541	1,746					XXX
5.	2014		19 , 109	5,945	8,083	6,453	3, 163	2,287	1,045		47	3, 140	XXX
6.	2015		23,390	6,974	9,605	7,541	3,222	2,344	1,639		84	3,705	XXX
7.	2016			7,647	15,265	12,898	3,662	2,819	1,434			3,935	XXX
8.	2017	60,250	51,463	8,787	21,274	19,180	4,085	3,402	1,843	1,219	276	3,400	XXX
9.	2018	68 , 159		9, 168	16,988	15,427	3, 152	2,647	2,082	1,523		2,625	XXX
10.	2019	77,713	66 , 860	10,853	10,085	9,034	1,910	1,685	2,336	1,253	76		XXX
11.	2020	97,951	84,321	13,630	5,053	4,694	509	472	1,932	1,198	36	1,131	XXX
12.	Totals	XXX	XXX	XXX	125,452	106,376	27,742	21,339	14,984	8,020	977	32,443	xxx

1						5.4						23	24	25
		Case	Losses Basis	Unpaid Bulk +	IBNR	Defens Case		Containment Bulk +	Unpaid · IBNR	Adjusting Ung				
		13	14	15	16	17	18	19	20	21	22	Salvage	Total Net	Number of Claims
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	and Subrog- ation Anticipated	Losses and Expenses Unpaid	Outstand- ing Direct and Assumed
1.	Prior		141	514			69		73	71	10	0		XXX
2.	2011	12	8			21	14	70	52	26	0	0	105	XXX
3.	2012	715	598	255	211		62	62	49	49	9	0	240	XXX
4.	2013	351		407		121	84			55	11	0	272	XXX
5.	2014		409			146					12	0		XXX
6.	2015	1,737	1,374					168		217		0		XXX
7.	2016	2,400	1,900	2,749	2,375			715		245	65	0	1,324	XXX
8.	2017	5,723	4 ,855	6,577	5,786	947	729	1,563	1,293		32	0	2,459	XXX
9.	2018		7,240	10 , 122	8,806	1,631	1,263	2,445	1,994		151	0	3,569	XXX
10.	2019	9,655	8,479			1,820	1,497	5,031	4,078		(272)	0	6,422	XXX
11.	2020	10,998	9,971	35,151	30,449	1,412	1,233	8,537	6,916	1,845	247	0	9,128	XXX
12.	Totals	40,785	35,237	78,375	67,730	7,304	5,786	19,143	15,456	4,329	354	0	25,374	XXX

		Losses and	Total d Loss Expense	es Incurred		oss Expense F d /Premiums E		Nontabula	r Discount	34	Net Balance Sheet Reserves After Discount	
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior		XXX	XXX	XXX	XXX	XXX	0	0	xxx		
2.	2011	17,534	12,840	4,694				0	0	10.0		51
3.	2012	23,425		4,423				0	0	10.0		
4.	2013	11,014	7,516					0	0	10.0		
5.	2014	14,211	10,599	3,613				0	0	10.0		
6.	2015	17,613	13, 110					0	0	10.0		
7.	2016							0	0			
8.	2017							0	0	10.0	1,659	
9.	2018			6 , 195				0	0	10.0	2,411	1, 158
10.	2019		43,957					0	0	10.0		2,455
11.	2020	65,437	55,178	10,259	66.8	65.4	75.3	0	0	10.0	5,729	3,399
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	16,193	9,180

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 2 - SUMMARY

Ye	ars in	INCURRED	NET LOSSES	AND DEFEN	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YE	AR END (\$00	0 OMITTED)	DEVELC	PMENT	
Whick	n Losses	1	2	3	4	5	6	7	8	9	10	11	12	
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	One Year	Two Year	
1.	Prior	11,965	10,847	9,000	7,834	7,838	7,776	8,277	8,474	8, 130	7,978	(152)	(496)	
2.	2011	4,365	4,719	4,549	4,277	4,251	4,218	4,209	4,210	4, 173	4,110	(63)	(100)	
3.	2012	XXX	3,642	3,738	3,618	3,531	3,519	3,593	3,637	3,687	3,770	83		
4.	2013	XXX	XXX	2,985	2,981	2,758	2,804	2,860	2,887	2,856	2,840	(16)	(47)	
5.	2014	XXX	XXX	XXX	3,676	3,381	2,916	2,694	2,729	2,868	2,909	41		
6.	2015	XXX	XXX	XXX	XXX	4,258	3,962	3,662	3,533	3,518	3,613	95	80	
7.	2016	XXX	XXX	XXX	XXX	XXX	4,748	4,522	4,499	4,432	4 , 354	(78)	(145)	
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	5,444	5, 120	5, 105	4,925	(180)	(195)	
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,811	5,611	5,298	(313)	(513)	
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,923	6,518	(405)	XXX	
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,927	XXX	XXX	
											12. Totals	(989)	(1,104)	

SCHEDULE P - PART 3 - SUMMARY

		CUMUL	ATIVE PAID N	NET LOSSES	AND DEFEN	ISE AND COS	ST CONTAIN	MENT EXPEN	NSES REPOR	RTED AT YEA	AR END	11	12
						(\$000 ON	AITTED)					Number of	Number of
Ye	ears in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
v	Vhich											Closed	Closed
Lo	osses											With	Without
V	Vere											Loss	Loss
Inc	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1.	Prior				4,524	5,203	5,834	6,820	7, 162	7,363	7,455	xxx	xxx
2.	2011	1,219		3,076		3,703	3,820	3,924	3,968	4,023	4,031	XXX	XXX
3.	2012	xxx		1,592		2,516	2,856	3,078	3,254	3,420	3,569	XXX	XXX
4.	2013	xxx	XXX			1, 149	1,752	2, 193		2,515	2,613	XXX	XXX
5.	2014	xxx	XXX	XXX			1,081	1,550	1,997	2,365	2,506	XXX	XXX
6.	2015	xxx	XXX	XXX	XXX			1,464		2,603	2,943	XXX	xxx
7.	2016	xxx	xxx	xxx	XXX	XXX		1,022	1,833	2,595	3,209	xxx	xxx
8.	2017	xxx	xxx	xxx	xxx	XXX	XXX		1,221	2,009	2,777	xxx	xxx
9.	2018	xxx	xxx	xxx	XXX	XXX	XXX	XXX		1 , 165	2,066	XXX	xxx
10.	2019	xxx	xxx	xxx	XXX	XXX	XXX	XXX	XXX		1,276	XXX	xxx
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	397	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTI											
	ears in	1	2	3	4	5	6	7	8	9	10
	Vhich										
	osses Vere										
	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	9,358	6,654			1,613	1,339				
2.	2011	2, 158	1,471				313			117	
3.	2012	xxx	2,011	1,464					143		
4.	2013	xxx	xxx	2,227	1,879		648	407			
5.	2014	xxx	xxx	xxx	2,851	2,136	1,334				
6.	2015	xxx	xxx	xxx	xxx	3, 189	2,270	1,403			164
7.	2016	xxx	xxx	xxx	xxx	XXX	3,660	2,446	1,441		514
8.	2017	xxx	xxx	xxx	XXX	XXX	XXX	3,951	2,665	1,752	1,061
9.	2018	xxx	xxx	xxx	XXX	XXX	XXX	XXX	4,372	3,011	1,767
10.	2019	xxx	xxx	xxx	XXX		xxx	xxx	XXX	5,275	3,743
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,323

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

						(\$00	0 OMITTED						
		Pr	emiums Earne				Los	s and Loss Ex	pense Payme	ents			12
	ears in	1	2	3				and Cost	Adjusting		10	11	
	Vhich				Loss Pa			nt Payments	Payn				Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and	.			D		.		.		Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	0	0	0	0	0	0	0	0	0	0
5.	2014	0	0	0	0	0	0	0	0	0	0	0	0
6.	2015	0	0	0	0	0	0	0	0	0	0	0	0
7.	2016	0	0	0	0	0	0	0	0	0	0	0	0
8.	2017	0	0	0	0	0	0	0	0	0	0	0	0
9.	2018	0	0	0	0	0	0	0	0	0	0	0	0
10.	2019	0	0	0	0	0	0	0	0	0	0	0	0
11.	2020	4	4	0	0	0	0	0	1	1	0	0	0
12.	Totals	XXX	XXX	XXX	0	0	0	0	1	1	0	0	XXX

												23	24	25
		Case		Unpaid Bulk +	IBNR		e and Cost (Basis	Containment Bulk +		Adjusti Other				
		13	14	15	16	17	18	19	20	21	22	Salvage and	Total Net Losses	Number of Claims Outstand-
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrog- ation Anticipated	and Expenses Unpaid	ing Direct and Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2014	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2015	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2016	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	2017	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2018	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	2020	0	0	1	1	0	0	0	0	0	0	0	0	0
12.	Totals	0	0	1	1	0	0	0	0	0	0	0	0	0

			Total			oss Expense F				34	Net Balar	nce Sheet
			Loss Expense			ed /Premiums E		Nontabula				fter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	xxx	XXX	XXX	XXX	XXX	XXX	0	0	xxx	0	0
2.	2011	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	2020	3	3	0	70.3	70.3	0.0		0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL (\$000 OMITTED)

						(\$00	0 OMITTED)					
		Pre	emiums Earne	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	Vhich				Loss Pa	ayments	Containmer	t Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ear	ned and										Salvage and	Paid Cols	Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
In	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	XXX	xxx	0	0	0	0	0	0	0	0	xxx
2.	2011		0		80	0	5	0	13	0	1		
3.	2012			0	0	0	0	0	0	0	0	0	0
4.	2013	1	1	0	6	6	0	0	0	1	0	(1)	0
5.	2014	74	70	4	112	112	2	1	6	7	0	0	20
6.	2015	51	50	1	97	97	1	1	4	4	0	0	25
7.	2016	0	0	0	0	0	0	0	0	0	0	0	0
8.	2017	0	0	0	0	0	0	0	0	0	0	0	0
9.	2018	1, 191	1 , 158	33	205	199	124	121	88	86	1	11	117
10.	2019	4,632	4,463	169				407			3	58	
11.	2020	4,356	4,165	191	286	273	114	109	331	316	1	34	241
12.	Totals	XXX	XXX	XXX	1,662	1,534	669	639	780	738	6	200	XXX

												23	24	25
		Case		Unpaid Bulk +		Defens Case		Containment Bulk +		Adjusti				
		13	14	15	16	17	18	19	20	Other 0 21	22			Number
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed		Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	of Claims Outstand- ing
			00000	71000011100	00000	7.000011100	oodou	71000011100	ocucu	7.000011100	00000	, unioipatoa	onpaid	7.000011100
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2014	0	0	9	9	0	0	2	2	0	0	0	0	0
6.	2015	0	0	(37)	(35)	0	0	(6)	(6)	0	0	0	(2)	0
7.	2016	0	0		93	0	0	17	16	0	0	0	5	0
8.	2017	0	0	41	40	0	0	7	7	0	0	0	2	0
9.	2018	80		53	54	29	28	9	10	0	0	0	2	3
10.	2019			808		234	225	143	138	0	0	0	54	28
11.	2020	311	295	1,629	1,561	71	67	287	275	0	0	0	99	61
12.	Totals	795	764	2,602	2,504	334	320	459	442	0	0	0	161	92

			Total			oss Expense F				34	Net Balar	nce Sheet
			Loss Expense			ed /Premiums E		Nontabula			Reserves A	
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	XXX	XXX	xxx	XXX	XXX	xxx	0	0	xxx	0	0
2.	2011		0			0.0		0	0	0.0	0	0
3.	2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2013	6	7	(1)			0.0	0	0	0.0	0	0
5.	2014			0			12.1	0	0		0	0
6.	2015	59	61	(2)	115.1		(195.0)	0	0	0.0	(2)	0
7.	2016	115	110	5	0.0	0.0	0.0	0	0	0.0	4	1
8.	2017	49	47	2	0.0	0.0	0.0	0	0	0.0	2	0
9.	2018						40.1	0	0	0.0	1	1
10.	2019	3,227	3, 115					0	0	0.0	40	14
11.	2020	3,029	2,896	133	69.5	69.5	69.6	0	0	0.0	84	15
12.	Totals	XXX	XXX	xxx	XXX	XXX	XXX	0	0	XXX	130	31

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL (\$000 OMITTED)

						(\$00	<u>D OMITTED</u>	/					
		Pre	emiums Earne	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
v	Vhich				Loss Pa	yments	Containmer	t Payments	Payn				Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ean	ned and										Salvage and	Paid Cols	Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2011	10	1	0	6	0	1	0	1	0	0	0	2
۷.	2011		1	9	0	0	1	0		0	0	0	<i>L</i>
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	0	0	0	0	0	0	0	0	0	6
5.	2014			35			54	50	33		2	45	766
5.	2014										······		
6.	2015	1,548	1,438	110						68	10	81	3,997
_		4 040	4 0 4 0	000	0.070	0.077		000	100	100		054	0.070
7.	2016	4,346	4,040		2,879	2,677			130	123	44	254	6,870
8.	2017	.6,278			5,452						47		
0.		,											
9.	2018	6,119			3,729	3,547		161			41	2	
		4 0 4 0	4 007	010	1 000	1 000							10.1
10.	2019	4,916	4,697	219	1,306	1,262	77	61	241		17	81	194
11.	2020	6,138	5,938	200	560	545	51	45	345	330	4	36	130
	2020	0,100	0,000	200		0+0	01		0+0	500			.00
12.	Totals	XXX	XXX	XXX	15,423	14,644	1,555	1,348	1,258	1,472	165	773	XXX

												23	24	25
		Case		Unpaid Bulk +	IBNR	Defens Case		Containment Bulk +		Adjusti Other	ng and Innaid			
		13	14	15	16	17	18	19	20	21	22			Number
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	of Claims Outstand- ing Direct and Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2014	5	4			1	1	5	5	0	0	0	2	1
6.	2015	45	43	(31)	(34)	1	1	(5)	(6)	0	0	0	7	1
7.	2016					27	23	68	64	1	(1)	0	49	5
8.	2017	1,024			<u>3</u> 36			50		2	(4)	0		15
9.	2018	1, 141	1,089	92		69	47	(37)	(32)	4	114	0	(56)	24
10.	2019	1, 122	1,096	1,548	1,480	70	51		177	3	(305)	0		14
11.	2020	1,268	1,235	1,908	1,801	57	53	315	270	246	216	0	218	41
12.	Totals	4,938	4,700	4,293	4,078	276	217	573	526	256	21	0	794	99

			Total			oss Expense F				34	Net Balar	nce Sheet
			d Loss Expense			ed /Premiums E		Nontabula			Reserves A	
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	XXX	XXX	xxx	XXX	XXX	xxx	0	0	xxx	0	0
2.	2011	8	0	8		0.0		0	0	0.0	0	0
3.	2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2014			47				0	0		2	0
6.	2015	1,313	1,226					0	0	0.0	6	1
7.	2016	4,232						0	0	0.0		10
8.	2017	7,618						0	0	0.0		17
9.	2018	5,478		(54)		<u>96.4</u>	(14.1)	0	0	0.0		<u>(</u> 93)
10.	2019	4,544	4,042					0	0	0.0	94	
11.	2020	4,750	4,496	254	77.4	75.7	127.3	0			140	78
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	453	341

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION) (\$000 OMITTED)

						(000	UOWITTED	/					
		Pr	emiums Earne	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
v	Vhich				Loss Pa	yments	Containmer	t Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ean	ned and										Salvage and	Paid Cols	Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
						-				_	_	Í Í	
1.	Prior	XXX	XXX	XXX	7	3	1	1	1	0	0	6	XXX
2.	2011	3,841	2,702	1 , 139	2,892	2,025				0	18	1, 182	
3.	2012	3,508	2,556		2,412	1,744				0	15		137
4.	2013	2,025	1,484					116		1	15		55
5.	2014		2,210		1,026					11	4		
6.	2015	4,523	3,380	1, 143	1,968	1,485				27			
7.	2016	7, 173	5,862										
8.	2017												
9.	2018			1,451		6,457	1,406						
10.				1,381	4,707					523	13	875	422
11.		19,620	18,245	1,375	2,071	1,903	239	224	726	400	2	509	328
<u> </u>	2020	19,020	10,240	1,375	2,071	1,903	209	224	720	400	2	509	320
12.	Totals	XXX	XXX	XXX	32,090	27,590	6,203	5,402	4,721	2,453	358	7,568	XXX

												23	24	25
		Case	Losses	Unpaid Bulk +			e and Cost C Basis	Containment Bulk +		Adjusti Other I				
		13	14	15	16	17	18	19	20	21	22	Salvage	Total Net	Number of Claims
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	and Subrog- ation Anticipated	Losses and Expenses Unpaid	Outstand- ing Direct and Assumed
1.	Prior	108	21	111	59	3	2	14	10	11	0	0	154	0
2.	2011	5	3	35	25	1	1	6	4	14	0	0		0
3.	2012	2	1	51		0	0	7	5	8	0	0		0
4.	2013	1	0	21	15	0	0	4	3	4	0	0	12	0
5.	2014	4	3		23	0	0	7	5	3	0	0	16	0
6.	2015	44		96	75	5	4	16	13	11	0	0	46	1
7.	2016						21		81	22	0	0		3
8.	2017	1,637	1,569	2,927	2,754					48	0	0		
9.	2018	2,852	2,765	4,285	4,022					20	0	0		55
10.	2019	3,565	3,365	4,693	4,536			814		40	0	0		
11.	2020	5,283	4,930	4,869	4,685	817	764	841	810	234	0	0	855	174
12.	Totals	13,660	12,840	17,618	16,671	2,001	1,887	3,050	2,893	416	0	0	2,452	348

			Total			oss Expense F				34		nce Sheet
			Loss Expense			ed /Premiums E	/	Nontabula			Reserves A	
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
-		Assumed	Cedeu	INCL	Assumed	Cedeu						
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX		16
2.	2011	3,596		1,210				0	0	0.0	12	16
3.	2012	3,054	2,055					0	0	0.0	16	11
4.	2013	1, 146						0	0	0.0	7	5
5.	2014	1,492						0	0	0.0	11	5
6.	2015	2,695	1,890					0	0	0.0		16
7.	2016	3,790	3,049	740				0	0	0.0	65	35
8.	2017	15,000	13,763	1,238				0	0	0.0		86
9.	2018	17,493		1, 172				0	0	0.0		78
10.	2019	16 , 155	14,823	1,333				0	0	0.0		
11.	2020	15,081	13,717	1,365	76.9	75.2	99.2	0	0	0.0	537	318
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,767	685

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

						(\$00	0 OMITTED)					
		Pre	emiums Earne	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
v	Vhich				Loss Pa	yments	Containmer	t Payments	Paym	nents			Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	xxx	XXX	0	0	0	0	0	0	0	0	XXX
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	0	0	0	0	0	0	0	0	0	0
5.	2014	213		6			21	20	2	2	2	5	4
6.	2015			11	634	629	31	31	2	2	3	5	16
7.	2016	1,118	1,110	8	1,034	1,030			6	6	3	5	28
8.	2017	1,487	1,479	8	1,001			133	9	9	3	5	42
9.	2018	1,369	1,368	1			47	47	4	4	15	0	27
10.	2019	3, 176	3, 176	0	678	678	70	70	14	14	3	0	33
11.	2020	3,889	3,883	7	524	524	37	37	11	11	1	0	34
12.	Totals	XXX	XXX	XXX	4,319	4,301	517	513	48	48	30	21	XXX

												23	24	25
		Case		Unpaid Bulk +	IDNID	Defens Case	e and Cost (Unpaid · IBNR	Adjusti Other I				
		13	14	15	16	17	18	19	20	21	22			Number
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	of Claims Outstand- ing Direct and Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2014	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2015	4	4	23	24	0	0	4	4	0	0	0	0	0
7.	2016	54	53	106		1	1	19	18	0	0	0	9	1
8.	2017		178			7	7	50	50	0	0	0	3	3
9.	2018	124	124			6	6	63	63	0	0	0	2	4
10.	2019	205	205	848		21	21	150	150	0	0	0	0	7
11.	2020	709	709	1,314	1,314	49	49	232	232	0	0	0	0	16
12.	Totals	1,274	1,272	2,933	2,922	85	85	518	516	0	0	0	13	32

			Total			oss Expense F				34		nce Sheet
		Losses and Loss Expenses Incurred				ed /Premiums E		Nontabula				fter Discount
		26 Diant	27	28	29 Diaut	30	31	32	33	Inter- Company	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
		Assumed	Cedeu	INCL	Assumed	Cedeu	INCL	L035		Ŭ		
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2011	0	0	0		0.0	0.0	0	0	0.0	0	0
3.	2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2014			5				0	0	0.0	0	0
6.	2015			5				0	0	0.0	0	0
7.	2016			14				0	0	0.0	8	1
8.	2017			8				0	0	0.0	3	0
9.	2018			2				0	0		2	0
10.	2019		1,987	0			0.0	0	0		0	0
11.	2020	2,876	2,876	0	73.9	74.1	2.3	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	12	2

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE (\$000 OMITTED)

						(\$00)	<u>) OMITTED</u>	/					
		Pr	emiums Earne	ed			Los	s and Loss Ex	opense Payme	ents			12
Ye	ears in	1	2	3		Defense and Cost Adjusting and Other 10 11							
Which					Loss Pa	Loss Payments		Containment Payments		Payments			Number of
Premiu	ums Were				4	5	6	7	8	9		Total Net	Claims
Earr	ned and										Salvage and	Paid Cols	Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
												· · · · ·	
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2011	27	20	7	10	7	8	5	1	0	0	7	0
3.	2012	19		6		9	5	3			0		1
-													
4.	2013	32	23	9	0	0	0	0	0	0	0	0	0
5.	2014	45	32	13	9	6	3	2	1	0	0	5	0
6.	2015	53		15	0	0	1	1	0	0	0	0	0
7.	2016	53		15	3	2	2	1	0	0	0	3	0
8.	2017				0	0		0	2	1	0	1	4
9.	2018			15	6	4		1	3	0	0		7
10	0040	49	35	14	٥	0	٥	٥	0	0	0	0	0
10.	2019	49		14	0	0	0	0	0	0	0	0	2
11.	2020	19	14	6	0	0	0	0	0	0	0	0	0
12.	Totals	XXX	XXX	XXX	41	28	21	13	10	2	0	29	XXX

												23	24	25
		Case		Unpaid Bulk +	IBNR		e and Cost C Basis		Unpaid + IBNR		ng and Unpaid			
		13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand- ing Direct and Assumed
<u> </u>		Assumed	Cedeu	Assumed	Ceded	Assumed	Cedeu	Assumed	Cedeu	Assumed	Cedeu	Anticipated	Unpaid	Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	1	0	0	0	0	0	0	0	0	0	0
5.	2014	0	0	2	1	0	0	1	1	0	0	0	1	0
6.	2015	0	0	5	4	0	0	2	2	0	0	0	3	0
7.	2016	8	5	3	2	3	2	1	1	0	0	0	5	0
8.	2017	1	1	13	9	0	0	6	4	1	0	0	7	0
9.	2018	23	16	9	7	8	6	4	3	1	0	0	14	0
10.	2019	5	4	26	18	0	0	11	8	2	0	0	14	0
11.	2020	0	0	12	9	0	0	5	4	1	0	0	6	0
12.	Totals	37	26	72	51	11	8	31	22	6	0	0	50	1

1			Total			oss Expense F				34		nce Sheet
			Loss Expense			d /Premiums E		Nontabula			Reserves After Discount	
		26	27	28	29	30	31	32	33	Inter- Company	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	xxx		XXX	XXX	XXX	XXX	0	0	xxx	0	0
2.	2011			7				0	0	0.0	0	0
3.	2012			8				0	0	0.0	0	0
4.	2013	1	1	0	3.3	3.0	3.9	0	0	0.0	0	0
5.	2014		11	6				0	0	0.0	1	0
6.	2015	9	6	3				0	0	0.0	2	1
7.	2016	20		7				0	0	0.0	3	2
8.	2017	23		8				0	0	0.0	4	3
9.	2018					<u>9</u> 6.8		0	0	0.0	9	5
10.	2019	44		14				0	0	0.0	9	5
11.	2020	19	13	6	95.9	90.6	109.2	0	0	0.0	4	2
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	32	19

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE (\$000 OMITTED)

						(จบบ	JOMITIED)					
		Pre	emiums Earne	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
v	Vhich				Loss Pa	ayments	Containmer	t Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and		Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx		XXX		35	0	0	7	5	0	18	xxx
2.	2011	1,057				79		67		5	0	80	7
3.	2012			241				153		13	0	242	9
4.	2013			226		269		117		6	0		8
5.	2014			203		65		84	18	4	0	77	8
6.	2015			241		356		201	24	3	0	261	13
7.	2016							143		9	0		10
8.	2017	1,001								16	0		12
9.	2018	1,562	1, 113						56	16	0		27
10.	2019	1, 186						131	41	12	0	214	19
11.	2020	1,236	885	351	76	53	25	17	21	1	0	50	16
12.	Totals	XXX	XXX	XXX	3,999	2,809	1,892	1,325	319	90	0	1,985	XXX

												23	24	25
		Case		Unpaid Bulk +	IBNR	Defens Case	e and Cost (Basis		Unpaid · IBNR	Adjusti Other I				
		13	14	15	16	17	18	19	20	21	22	Salvage	Total Net	Number of Claims
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	and Subrog- ation Anticipated	Losses and Expenses Unpaid	Outstand- ing Direct and Assumed
1.	Prior	5	4	5	4	6	4	2	2	1	0	0	7	0
2.	2011	0	0	1	1	0	0	0	0	0	0	0	0	0
3.	2012	0	0	1	1	0	0	0	0	0	0	0	1	0
4.	2013	0	0	1	0	0	0	0	0	0	0	0	0	0
5.	2014	0	0	1	1	0	0	1	0	0	0	0	1	0
6.	2015	58	40	10	7	23	16	4	3	3	0	0	31	0
7.	2016	27	19	34	24	11	8	15	10	3	0	0	30	0
8.	2017	94	65	48		26	18	20	15	9	2	0	62	1
9.	2018		412	40		207	145	17	12	25	2	0	279	5
10.	2019	667	467	101	70	168	117	43		41	9	0		4
11.	2020	263	184	427	311	120	84	183	133	43	2	0	321	6
12.	Totals	1,702	1,191	669	482	560	392	287	207	126	15	0	1,057	17

[Total			oss Expense F				34		nce Sheet
			Loss Expense			ed /Premiums E		Nontabula			Reserves At	
		26	27	28	29	30	31	32	33	Inter- Company	35	36
		Direct and			Direct and				Loss	Pooling Participation	Losses	Loss Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	xxx	0	0	xxx	3	3
2.	2011			80			27.1	0	0	0.0	0	0
3.	2012						100.7	0	0	0.0	0	0
4.	2013							0	0	0.0	0	0
5.	2014						<u>3</u> 8.4	0	0	0.0	0	0
6.	2015						121.0	0	0	0.0	20	11
7.	2016							0	0	0.0	19	11
8.	2017	1,253						0	0	0.0	41	21
9.	2018	1,897					135.4	0	0	0.0		
10.	2019	1,681	1, 142		141.8			0	0	0.0		
11.	2020	1,157	786	371	93.6	88.8	105.6	0	0	0.0	194	126
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	698	359

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

		Pr	emiums Earne	ed	4 5 6 7 8 9 Total Net Salvage and Assumed Total Net Paid Cols F Direct and Assumed Direct and Assumed Direct and Ceded Direct and Assumed Direct and Ceded Salvage and Subrogation (4 - 5 + 6 - 7) + 8 - 9) F 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
	ears in	1	2	3							10	11	
	Vhich				Loss Pa	yments	Containmer	t Payments					Number of
	ums Were				4	5	6	7	8	9			Claims
	ned and	.					<u>.</u>						Reported
	es Were	Direct and	Orded			Orded		Orded		Orded			
ine	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2011	0	0	0	0	0	0	0	0	0	0	0	XXX
3.	2012	0	0	0	0	0	0	0	0	0	0	0	XXX
4.	2013	0	0	0	0	0	0	0	0	0	0	0	XXX
5.	2014	7	6	1	0	0	0	0	0	0	0	0	XXX
6.	2015	7	7	0	1	1	0	0	0	0	0	0	XXX
7.	2016	7	8	(1)	6	6	0	0	0	0	0	0	XXX
8.	2017	13	13	0	1	1	0	0	0	0	0	0	XXX
9.	2018	14	14	0	0	0	0	0	0	0	0	0	XXX
10.	2019			0	0	0	0	0	0	0	0	0	XXX
11.	2020	583	567	16	5	4	0	0	0	0	0	0	XXX
12.	Totals	XXX	XXX	XXX	13	13	0	0	0	0	0	0	XXX

1						5.6						23	24	25
		Case		Unpaid Bulk +	IBNR	Defens Case	e and Cost C Basis		Unpaid IBNR	Adjusti Other I				
		13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand- ing Direct and Assumed
		Assumed	Cedeu	Assumed	Ceueu	Assumed	Cedeu	Assumed	Cedeu	Assumed	Ceded	Anticipateu	Ulipaiu	Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2014	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2015	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2016	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	2017	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2018	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	2019	0	0	13	13	0	0	2	2	0	0	0	0	0
11.	2020	1	1	237	231	0	0	42	41	0	0	0	7	1
12.	Totals	1	1	251	244	0	0	44	43	0	0	0	7	1

T			Total			oss Expense F				34	Net Balar	
			d Loss Expense			d /Premiums E		Nontabula				ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
												Onpula
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2011	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2012	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2013	0	0	0	0.0		0.0	0	0	0.0	0	0
5.	2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	2015	1	1	0			0.0	0	0	0.0	0	0
7.	2016	6	6	0			0.0	0	0	0.0	0	0
8.	2017	1	1	0			0.0	0	0	0.0	0	0
9.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	2019	16	16	0			0.0	0	0	0.0	0	0
11.	2020	285	277	8	48.9	48.9	47.3	0	0	0.0	6	1
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	6	1

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE (\$000 OMITTED)

						(\$00	<u>0 OMITTED</u>	/					
		Pr	emiums Earne	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
v	Vhich				Loss Pa	yments	Containmer	t Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ean	ned and										Salvage and	Paid Cols	Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior		XXX		67	44	24		44	4	0	64	XXX
2.	2011	5,690	4,390	1,300	2,746	2,296				117	17		76
3.	2012	7,470	5,872	1,598	3,530	2,764	1,458	1,076	431		3	1,385	85
4.	2013	9,430	7,384	2,046	2,840	2, 174	1,095		419	138	8	1,276	145
5.	2014	11,788	9, 133	2,655	4,600	3,753	1,804	1,316	546	235	1	1,646	162
6.	2015	13,513	10,359	3, 154	3,213	2,368	1,585	1 , 123	1,055	651	9	1,710	197
7.	2016	15,535	11,978	3,557	6,365	5,201	1,591	1 , 163				1,975	
8.	2017		14,430	3,952	5,975	5, 121	921		518	204	22	1,419	
9.	2018	20,794	16,421	4,373	4,019	3,414				157	5	1 , 186	
10.	2019		23,833	6,265	1,370		204	153	543	96	8		
11.	2020	44,346	36,175	8,171	798	696	11	9	311	35	2	380	239
12.	Totals	XXX	XXX	XXX	35,524	28,816	10,143	7,337	5,379	2,135	105	12,757	XXX

												23	24	25
		Case		Unpaid Bulk +		Defens Case	e and Cost (Unpaid - IBNR	Adjusti Other	ng and			
		13	14	15	16	17	18	19	20	21	22	-		Number
												Salvage	Total Net	of Claims
		Discot		Direct		Direct		Discot		Direct		and	Losses	Outstand-
		Direct and		Direct and		Direct and		Direct and		Direct and		Subrog- ation	and Expenses	ing Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	51			141		21	61			7	0		12
2.	2011	1	1	116	97	5	3	25	19	6	0	0		0
3.	2012			155	136	23	17		23	21	5	0	77	2
4.	2013		141							23	5	0		3
5.	2014				411	97	68	67	60		7	0	204	5
6.	2015	1,058	859	277	236		135	61	50	117	52	0		10
7.	2016	1,505	1, 142				243	177	149	115	28	0	673	25
8.	2017	2,262	1,754	1,916	1,616						23	0	1 , 193	
9.	2018	2,968	2,365	3,869	3, 189	645			729		26	0	1,949	45
10.	2019	3,303	2,678	10,494	8,628			2,452	1,881		19	0	3,831	67
11.	2020	1,727	1,332	19,434	16,284	217	154	4,280	3,336	1,001	17	0	5,537	93
12.	Totals	13,860	10,961	38,165	31,813	2,660	1,910	8,555	6,641	2,462	188	0	14,189	296

1			Total		Loss and L	.oss Expense F	Percentage			34	Net Balar	nce Sheet
			d Loss Expense			ed /Premiums E		Nontabula				ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	xxx	XXX	XXX	XXX	XXX	xxx	0	0	xxx		81
2.	2011	3,872						0	0	0.0	20	13
3.	2012	6,069	4,606	1,463				0	0	0.0	49	29
4.	2013	4,887	3,486	1,402	51.8			0	0	0.0	85	41
5.	2014	7,963	6,113	1,850		<u>66.9</u>		0	0	0.0	136	68
6.	2015	7,548	5,476	2,072				0	0	0.0	239	
7.	2016	11,757	9 , 109					0	0	0.0		204
8.	2017	12,676	10,064	2,612				0	0	0.0	808	
9.	2018	14,042	10,907	3, 135	<u></u> 67.5			0	0	0.0	1,284	
10.	2019		14,869	4,714				0	0	0.0	2,492	1,339
11.	2020	27,781	21,863	5,918	62.6	60.4	72.4	0	0	0.0	3,545	1,992
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	9,250	4,939

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE (\$000 OMITTED)

						(\$000	D OMITTED)					
		Pr	emiums Earn	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	Vhich				Loss Pa	yments	Containmer	t Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ear	ned and										Salvage and		Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
In	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	(6)	(4)	0	0	1	0	0	(1)	xxx
2.	2011	2,098	1,555						53	16	0	239	21
3.	2012	1,951	1,457					194		48	0		19
4.	2013	2,000	1,484						90		0		
5.	2014	2,004	1,483					177	52	24	1	175	14
6.	2015	2,205	1,613					76	52	19	4	184	
7.	2016	2, 165	1,628		610			195	65	28	0		21
8.	2017	2,318	1,728						75	41	0	202	
9.	2018	2,819	2,091	728	211		74	56	40	18	8	99	22
10.	2019	2,623	1,973	650	56	41	70	49	29	7	0	58	
11.	2020	3,249	2,460	789	9	7	2	1	20	2	0	21	15
12.	Totals	XXX	XXX	XXX	3,392	2,284	2,077	1,435	585	233	13	2,102	XXX

												23	24	25
		Case		Unpaid Bulk +	IDNID	Defens Case	e and Cost C		Unpaid · IBNR	Adjusti Other I				
		13	14	15	16	17	18	19	20	21	22			Number
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	of Claims Outstand- ing Direct and Assumed
1.	Prior	0	0	7	4	0	0	3	2	1	0	0	5	1
2.	2011	0	0	3	2	0	0	1	1	0	0	0	2	0
3.	2012	84		3	2	7	5	1	1	3	0	0	32	0
4.	2013	0	0	26	25	0	0	6	5	1	(1)	0	5	0
5.	2014	2	1	22	16	1	0	9	6	3	1	0	11	0
6.	2015			19	16	2	1	6	5	2	0	0	10	0
7.	2016	93	65	42		17	12	14	11	6	1	0	51	1
8.	2017			101		62	44	27	22	14	4	0	87	1
9.	2018					47		54	44	14	0	0	101	2
10.	2019	111	80		231	63	44	101	78	24	1	0	154	2
11.	2020	79	56	841	658	26	18	315	240	62	3	0	348	4
12.	Totals	650	464	1,541	1,234	224	158	537	414	129	9	0	803	11

[Total			oss Expense F				34	Net Balar	
			Loss Expense			ed /Premiums E	/	Nontabula			Reserves Af	
		26	27	28	29	30	31	32	33	Inter- Company	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior							0	0			
2.	2011							0	0	0.0	1	1
3.	2012							0	0	0.0	26	5
4.	2013	1, 154				40.8		0	0	0.0	1	3
5.	2014						<u>3</u> 5.7	0	0	0.0	6	5
6.	2015							0	0	0.0	6	3
7.	2016	1 , 122						0	0	0.0		14
8.	2017	1,005						0	0	0.0	53	
9.	2018							0	0	0.0	63	
10.	2019			211				0	0	0.0	89	64
11.	2020	1,355	986	369	41.7	40.1	46.8	0	0	0.0	206	141
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	493	310

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT) (\$000 OMITTED)

						(400		')					
		Pr	emiums Earn	ed			Los	s and Loss E>	kpense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	Vhich				Loss Pa	ayments	Containmer	nt Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ear	ned and										Salvage and	Paid Cols	Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
In	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
	D. i.e.	2004	2004	2004	(17)	(11)	0	0	13	44	0	(0)	2004
1.	Prior	XXX	XXX	XXX	(17)	(11)	0	0	13		0	(3)	XXX
2.	2019	2,571	2,588	(18)			3	3	8	7	0	5	XXX
		4 570	4 450	445	100	477	7	7		50			1001
3.	2020	4,573	4,458	115	186	177	1	1	61	50	0	20	XXX
4.	Totals	XXX	XXX	XXX	335	329	10	9	83	68	0	22	XXX

												23	24	25
			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjust	ng and			
		Case	Basis	Bulk +	BNR	Case	Basis	Bulk +	+ IBNR	Other	Unpaid			
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage	Total Net	of Claims
												and	Losses	Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	ing
		and		and		and		and		and		ation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	0	0	118	110	0	0			44	33	0	22	1
2.	2019	6	5	68	65	0	0	21	20	4	0	0	8	1
3.	2020	1,039	977	1,306	1,238	11	11	415	393	22	1	0	174	10
4.	Totals	1,045	983	1,492	1,412	11	11	475	449	70	35	0	204	12

			Total			oss Expense F				34		nce Sheet
		Losses and	d Loss Expense	es Incurred	(Incurre	ed /Premiums E	Earned)	Nontabula	r Discount		Reserves Af	fter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
										Company		
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	xxx		XXX	XXX		XXX	0	0		8	14
2.	2019							0	0	0.0	3	5
3.	2020	3,048	2,855	194	66.7	64.0	168.3	0	0	0.0	130	44
4.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	142	62

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

						(\$00	0 OMITTED						
		Pr	emiums Earn	ed			Los	s and Loss Ex	kpense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	Vhich				Loss Pa	ayments	Containmer	nt Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ear	ned and										Salvage and		Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
In	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	XXX	xxx	1	1	2	2	0	0	8	0	XXX
2.	2019			26				28		32	32	15	68
3.	2020	1,225	1,177	48	497	477	23	22	52	50	26	23	94
4.	Totals	XXX	XXX	xxx	821	788	53	51	85	82	66	39	XXX

												23	24	25
			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid		ng and			
		Case	Basis	Bulk +	BNR	Case	Basis	Bulk -	+ IBNR	Other	Unpaid			
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage	Total Net	of Claims
												and	Losses	Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	ing
		and		and		and		and		and		ation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	0	1	6	5	0	0	1	1	0	0	0	0	1
2.	2019	5	5	91	89	3	3	15	14	0	0	0	3	2
3.	2020	111	105	297	285	5	5	51	48	0	0	0	21	23
4.	Totals	116	111	394	379	9	9	66	64	0	0	0	23	25

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	ice Sheet
		Losses and	d Loss Expense	es Incurred	(Incurre	ed /Premiums E	Earned)	Nontabula	r Discount		Reserves Af	ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
										Company		
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	xxx	xxx	xxx	xxx	xxx	xxx	0	0	xxx	0	0
2.	2019			19				0	0	0.0	3	0
3.	2020	1,035	992	44	84.5	84.2	91.2	0	0	0.0	18	2
4.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	21	3

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1K - FIDELITY/SURETY

					(\$00	0 OMITTED)					
	Pre	emiums Earn	ed			Los	s and Loss Ex	pense Payme	ents			12
Years in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
Which				Loss Pa	yments	Containmer	t Payments	Payn	nents			Number of
Premiums Were				4	5	6	7	8	9		Total Net	Claims
Earned and										Salvage and		Reported
Losses Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
Incurred	Assumed	Ceded	Net (1 - 2)	sume	9	ssun	Ced	d	Ceded	Received	+ 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2019												xxx
3. 2020												xxx
4. Totals	XXX	XXX	xxx									xxx

												23	24	25
			Losses	Unpaid		Defens	e and Cost C	Containment	Unpaid	Adjusti	ng and			
		Case	Basis	Bulk +	IBNR	Case	Basis	Bulk +	BNR	Other	ng and Jnpaid			
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage	Total Net	of Claims
					_							and	Losses	Outstand-
		Direct		Direct		Direct		rect		rect		Subrog-	and	ing
		and		and		and				and		ation	Expenses	Direct and
		Assumed	Ceded	Assumed		sur	Cede	be ed	Ce	umed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior													
2.	2019													
3.	2020													
4.	Totals													

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense	es Incurred	(Incurre	ed /Premiums E	Earned)	Nontabula	r Discount		Reserves At	fter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
										Company		
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	x	XXX				XXX		
2.	2019											
3.	2020								_			
4.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

						(\$00		')					
Γ		Pre	emiums Earn	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	Vhich				Loss Pa	iyments	Containmer	nt Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ear	ned and										Salvage and	Paid Cols	Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
In	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	xxx	XXX	xxx	0	0	0	0	0	0	0	0	xxx
2.	2019	0	0	0	0	0	0	0	0	0	0	0	XXX
3.	2020	39	39	0	22	22	1	1	0	0	0	0	XXX
4.	Totals	XXX	XXX	XXX	22	22	1	1	0	0	0	0	XXX

			1 00000	Unpaid		Defense	e and Cost (Containmont	Unnoid	Adjucti	ng and	23	24	25
		Case	Basis		BNR		Basis		+ IBNR		Unpaid			
		13	14	15	16	17	18	19	20	21	22			Number
												Salvage	Total Net	of Claims Outstand-
		Direct		Direct		Direct		Direct		Direct		and Subrog-	Losses and	ing
		and		and		and		and		and		ation	Expenses	Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2020	2	2	31	29	0	0	6	5	0	0	0	3	2
4.	Totals	2	2	31	29	0	0	6	5	0	0	0	3	2

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense	es Incurred	(Incurre	ed /Premiums E	Earned)	Nontabula	r Discount		Reserves Af	fter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
										Company		
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	xxx	XXX	xxx	XXX	xxx	xxx	0	0	xxx	0	0
2.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2020	62	59	3	160.1	153.0	0.0	0	0	0.0	2	0
4.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	2	0

Schedule P - Part 1M - International

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Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property **NONE**

Schedule P - Part 10 - Reinsurance - Nonproportional Assumed Liability **NONE**

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines **NONE**

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE (\$000 OMITTED)

						(\$00	<u>0 OMITTED</u>	/					
		Pr	emiums Earne	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
V	Vhich				Loss Pa	ayments	Containmer	t Payments	Payn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ean	ned and										Salvage and	Paid Cols	Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and		Subrogation	(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX			0		15	2	3	63	
2.	2011	2,081	1,468								4		
3.	2012	2,786	1,970		1,222			658		59	9		40
4.	2013	3,306	2,330		1,915						14		42
5.	2014	4,346	3,062	1,284	1,032	736	640		145	62	8		34
6.	2015	4,416	3, 108	1,308	1, 152						7	619	40
7.	2016	4,487	3, 176	1,311						61	1		44
8.	2017	4,573	3,228	1,345				146			5		44
9.	2018	4,606	3,258	1,348	173	121		155					86
10.	2019	5,424	3,861	1,563	167	117	51	35	113	14	0	165	
11.	2020	6,610	4,679	1,931	19	13	0	0	49	3	0	52	38
12.	Totals	xxx	XXX	XXX	7,625	5,436	4,145	2,930	1,392	496	51	4,300	XXX

												23	24	25
		Case		Unpaid Bulk +		Defens Case	e and Cost (Containment Bulk +		Adjusti Other I				
		13	14	15	16	17	18	19	20	21	22			Number
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	of Claims Outstand- ing Direct and Assumed
1.	Prior		83	137		65	42	74	31	22	3	0	209	3
2.	2011	6	4	65	45	15	10	35	24	6	0	0	42	1
3.	2012	207	145	43		58	41	23	19	16	4	0	103	2
4.	2013	146					54	67	51	25	7	0	121	5
5.	2014					47		173	124	36	4	0	235	3
6.	2015					291		84	58	83		0		6
7.	2016	221		515			62			55	5	0		6
8.	2017	400				114	80				7	0	608	8
9.	2018			1 , 136		238	167	611		115	8	0	814	9
10.	2019	247		1,884	1,339		62	1,014	720	157	3	0	1,094	8
11.	2020	181	127	2,559	1,812	31	21	1,377	975	212	7	0	1,417	8
12.	Totals	2,641	1,876	7,783	5,490	1,113	775	4,189	2,954	814	84	0	5,361	60

			Total			oss Expense F				34	Net Balar	
			Loss Expense			ed /Premiums E		Nontabula				ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	xxx	XXX	XXX	XXX	XXX	xxx	0	0	xxx		85
2.	2011	1,556	1,037					0	0	0.0	21	21
3.	2012		1,817				102.8	0	0	0.0	70	
4.	2013	2,990	2, 149					0	0	0.0	64	57
5.	2014	2,582	1,776					0	0	0.0		95
6.	2015							0	0	0.0		
7.	2016	2,519	1,686					0	0	0.0	219	
8.	2017	2,551	1,710					0	0	0.0		
9.	2018			1,022				0				
10.	2019	3,722		1,259				0		0.0		
11.	2020	4,426	2,958	1,469	67.0	63.2	76.1	0	0	0.0	801	616
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	xxx	3,059	2,303

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 1R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE (\$000 OMITTED)

						(\$00)	<u>D OMITTED</u>	/					
		Pr	emiums Earne	ed			Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
v	Vhich				Loss Pa	ayments	Containmer	t Payments	Pavn	nents			Number of
Premi	ums Were				4	5	6	7	8	9		Total Net	Claims
Ean	ned and										Salvage and	Paid Cols	Reported
Loss	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
	D :	2004	2004					0					2004
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2011										0		6
		005	000	0.40						-			
3.	2012			243	23	17		16	14	5	0	21	21
4.	2013				40					19	0	76	27
5.	2014				60	42		17	17	7	0		7
6.	2015	949	671						11	2	0		7
0.							-						
7.	2016			275	92	65		23	6	2	0	40	2
8.	2017	1,003				25	8	6	7	3	0	15	3
9.	2018	1, 170			15	11	8	5	12	6	0	13	3
10.	2019	1,482	1,230		0	0	2	1	6	2	0	5	2
11.	2020	2,063	1,633	430	0	0	0	0	4	1	0	4	3
12.	Totals	XXX	XXX	XXX	521	382	399	282	151	63	0	344	XXX

												23	24	25
		Case		Unpaid Bulk +	IBNR	Defens Case	e and Cost (Basis		Unpaid · IBNR	Adjusti Other I				
		13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22	Salvage and Subrog- ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand- ing Direct and Assumed
1.	Prior	0	0	4	2	0	0	3	2	0	0	0	3	0
2.	2011	0	0	5	4	0	0	3		0	0	0	1	0
3.	2012	0	0	1	1	0	0	1	1	0	0	0	1	0
4.	2013	13	9	4	3	5	3	3	2	1	0	0	8	0
5.	2014	0	0	4	2	0	0	2	2	0	0	0	2	0
6.	2015	0	0	3	2	0	0	2	1	0	0	0	2	0
7.	2016	0	0	15	11	1	0	10	7	1	0	0	9	0
8.	2017	0	0	25		0	0	17	12	2	0	0	15	0
9.	2018	15	11	55	41	0	0		27	5	0	0	32	0
10.	2019	15	10	130		6	4	87	71	13	1	0	59	1
11.	2020	24	17	283	228	8	5	188	153	25	0	0	123	2
12.	Totals	66	46	530	419	19	13	353	280	48	1	0	255	3

[Total			oss Expense F				34	Net Balar	
			Loss Expense			ed /Premiums E	/	Nontabula			Reserves At	
		26	27	28	29	30	31	32	33	Inter- Company	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	2	2
2.	2011							0	0	0.0	1	1
3.	2012	61	40		7.1	6.4	9.0	0	0	0.0	0	0
4.	2013			84				0	0	0.0	5	3
5.	2014		70					0	0	0.0	1	1
6.	2015			51		23.1		0	0	0.0	1	1
7.	2016	157						0	0	0.0	5	5
8.	2017	94	64		9.4	9.0	10.1	0	0	0.0	8	7
9.	2018	147						0	0	0.0	18	14
10.	2019			63				0	0	0.0	29	
11.	2020	532	405	127	25.8	24.8	29.5	0	0	0.0	61	62
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	130	126

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

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Schedule P - Part 1T - Warranty

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Ye	ears in	INCURRED	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPO	RTED AT YEA	AR END (\$00	0 OMITTED)	DEVELO	PMENT
Whic	h Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	One Year	Two Year
1.	Prior												
2.	2011												
3.	2012	XXX											
4.	2013	XXX	XXX										
5.	2014	XXX	XXX	XXX									
6.	2015	XXX	XXX	XXX	. X.								
7.	2016	XXX	XXX	XXX	X	XX							
8.	2017	XXX	XXX	XXX	XXX		XXX						
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											10 T 1 1		

12. Totals

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011			85	85		85	85	85	85	85	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	1	1	3	1	1	1	0	0
6.	2015	XXX	XXX	XXX	XXX	0	0	0	1	0	(2)	(2)	<u>(</u> 3)
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	5	5	5
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	2	2	2
9.	2018	XXX	21	21	11	(10)	(10)						
10.	2019	XXX			<u>(</u> 15)	XXX							
11.	2020	XXX	118	XXX	XXX								
											12. Totals	(19)	(5)

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	7	7	7	7	7	7	7	7	7	7	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX			46	41	41		40	1	(1)
6.	2015	XXX	XXX	XXX	XXX	71	97	100	95	84	77	(7)	(18)
7.	2016	XXX	XXX	XXX	XXX	XXX	217	291		290		5	2
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX					26	91
9.	2018	XXX				(17)	(19)						
10.	2019	XXX		173	36	XXX							
11.	2020	XXX	210	XXX	XXX								
											12. Totals	43	55

SCHEDULE P - PART 2D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

1.	Prior	1,569	1,462	1,438	1,250	1,238	1, 179	1 , 153	1, 120	1, 108	1,083	(25)	(37)
2.	2011	1,091	1,200	1 , 163	1, 133	1,114	1,089	1,065	1,064	1,064	1,024	(40)	(40)
3.	2012	XXX										(15)	(15)
4.	2013	XXX	XXX						314			(10)	(12)
5.	2014	XXX	XXX	XXX		509						(7)	(10)
6.	2015	XXX	XXX	XXX	XXX	724				647	613	(34)	(72)
7.	2016	XXX	XXX	XXX	XXX	XXX			701	606	544	(62)	(157)
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	1, 147	1,072			(29)	(102)
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				(10)	
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			43	XXX
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	804	XXX	XXX
											12. Totals	(189)	(396)

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0			0		0	0	0	0	0	0
3.	2012	XXX	0	0		0		0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	3	3	2	3	5	5	5	0	0
6.	2015	XXX	XXX	XXX	XXX	7	7	5	6	6	5	(1)	(1)
7.	2016	XXX	XXX	XXX	XXX	XXX	2	2	10	11	14	3	4
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	5	6	9	8	(1)	2
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX		2	2	2	0	0
10.	2019	XXX	(30)	0		XXX							
11.	2020	XXX	0	XXX	XXX								
											10 - 1 - 1		-

12. Totals 31 5

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Ye	ears in	INCURRED	NET LOSSES	AND DEFEN	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END (\$00	OMITTED)	DEVELO	PMENT
Whic	h Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	One Year	Two Year
1.	Prior	16	15	12	9	6	6	5	5	5	5	0	0
2.	2011	5	5	6	5	5	6	6	6	6	6	0	0
3.	2012	XXX	4	5	7	6	7	6	6	6	6	0	0
4.	2013	XXX	XXX	7	7	5	3	1	1	0	0	0	(1)
5.	2014	XXX	XXX	XXX	10	9	7	7	5	5	5	0	0
6.	2015	XXX	XXX	XXX	XXX	12	9	7	3	2	2	0	(1)
7.	2016	XXX	XXX	XXX	XXX	XXX	11	9	6	6	7	1	1
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	11	10	8	6	(2)	(4)
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	12	15	3	3
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	12	0	XXX
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	XXX	XXX
											12. Totals	2	(2)

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1.	Prior											16	16
2.	2011					61	63		62		62	0	0
3.	2012	XXX	151	239				219	218	218	217	(1)	(1)
4.	2013	XXX	XXX	135		170		171	166	166	166	0	0
5.	2014	XXX	XXX	XXX		111		70	68	65	64	(1)	(4)
6.	2015	XXX	XXX	XXX	XXX							6	11
7.	2016	XXX	XXX	XXX	XXX	XXX		202		208	209	1	10
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX					0	44
9.	2018	XXX			545	86							
10.	2019	XXX				XXX							
11.	2020	XXX	310	XXX	XXX								
											12. Totals	283	283

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), **BOILER AND MACHINERY)**

1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0		0	٥	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2015	XXX	XXX	XXX	XXX	0	0			•	0	0	0
7.	2016	XXX	XXX	XXX	XXX	XXX				0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2018	XXX	0	0	0	0	0						
10.	2019	XXX	0	0	0	XXX							
11.	2020	XXX	8	XXX	XXX								

12. Totals 0 0

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1.	Prior	5,346	5,217	4,318	3,530	3,511	3,535			3,694	3,654	(40)	(152)
2.	2011											(8)	(17)
3.	2012	XXX	1,085	1,085	1,026	1,086	1 , 108	1, 131	1, 140	1, 157	1,209	52	69
4.	2013	XXX	XXX	1,362	1,347	1, 171	1, 114	1, 149	1, 136	1 , 107	1,101	(6)	(35)
5.	2014	XXX	XXX	XXX	1,690	1,529	1,272	1,209	1,324	1,462	1,507	45	
6.	2015	XXX	XXX	XXX	XXX		1,727	1,561	1,516	1,532	1,604	72	
7.	2016	XXX	XXX	XXX	XXX	XXX		2, 108	2, 141	2, 163	2,176	13	35
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	2,401	2,202	2,201	2,142	(59)	(60)
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,835	2,664	2,491	(173)	(344)
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,991	3,663	(328)	XXX
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,657	XXX	XXX
											12. Totals	(432)	(233)

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1.	Prior	1,779	1,269									(2)	(19)
2.	2011				241					204	204	0	2
3.	2012	XXX										0	3
4.	2013	XXX	XXX									(1)	(5)
5.	2014	XXX	XXX	XXX			211				157	0	(4)
6.	2015	XXX	XXX	XXX	xxx							(12)	(20)
7.	2016	XXX	XXX	XXX	xxx	XXX						(20)	10
8.	2017	XXX	XXX	XXX	xxx	XXX	XXX						24
9.	2018	XXX			xxx						163	(72)	(168)
10.	2019	XXX	XXX	XXX		XXX	XXX	XXX			167	(126)	xxx
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	292	XXX	XXX

12. Totals (201) (177)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

					, -	-	,		/			
Years in	INCURRED	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPO	RTED AT YEA	AR END (\$00	0 OMITTED)	DEVELO	PMENT
Which Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	One Year	Two Year
									10	10	(0)	(00)
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36		10	(8)	(26)
2. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31	7	(24)	XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	162	XXX	XXX
											(0)	(00)
										 Totals 	(31)	(26)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

2. 2019	149				xxx	XXX			xxx			Prior	1.
	170		1/		xxx		xxx	xxx	XXX		xxx	2019	2.
3. 2020 XXX XXX XXX XXX XXX XXX XXX XXX XX	42 XXX	42	xxx	2020	3.								

4. Totals 9 (6)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1.	Prior	XXX	XXX	xxx	XXX.		.XX0	X					
2.	2019	xxx	xxx		X	xx	\sim	x					
3.	2020	XXX	XXX	xxx	×	κx	xxx		XXX	XXX		xxx	xxx
											4. Totals		

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1.	Prior	xxx		XXX					0	0	0	0	0
2.	2019		XXX						xxx	0	0	0	
3.	2020	xxx	3	xxx	xxx								
											4. Totals	0	0

Totals

SCHEDULE P - PART 2M - INTERNATIONAL 1. Prior.... 2. 2011.. 2012.... .XXX. 3. 4. 2013 XXX XXX 2014... .XXX. XXX. 5. .XXX... 6. 2015... XXX XXX. XXX 2016.... XXX XXX 7. XXX. 8. 2017.. XXX XXX XXX XX XXX.XXX..... 2018... XXX XXX XXX 9. XXX 10. 2019.. XXX. XXX. XXX XXX XXX XXX XXX XXX .XXX. XXX 2020 XXX XXX XXX XXX XXX XXX XXX 11 XXX XXX XXX 12. Totals

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property **NONE**

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability **NONE**

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines $N\ O\ N\ E$

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

	•	SCHED		FARI 4	- 3EV			00013	LIADIL	11-00			
Ye	ars in	INCURRED	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END (\$00	0 OMITTED)	DEVELC	PMENT
-	Losses	1 2011	2 2012	3 2013	4 2014	5 2015	6 2016	7 2017	8 2018	9 2019	10 2020	11 One Year	12 Two Year
1.	Prior	2,243	2,110	1,730	1,731	1,737	1,740	1,901	2, 124	1,988	1,885	(103)	(239)
2.	2011											(15)	(44)
3.	2012	XXX						616				46	76
4.	2013	XXX	XXX				612			720		1	1
5.	2014	XXX	XXX	XXX								2	17
6.	2015	XXX	XXX	XXX	XXX			675		735		76	
7.	2016	XXX	XXX	XXX	XXX	XXX				705		<u>(</u> 14)	(29)
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	859				(126)	(126)
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				(74)	(137)
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1 , 159	1,005	(154)	XXX
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,218	XXX	XXX
											12. Totals	(363)	(376)

SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1.	Prior				115							0	(67)
2.	2011			99	83	73	70	69	68	67	68	1	0
3.	2012	XXX			87		13	14	13	13	13	0	0
4.	2013	XXX	XXX	164			84	69	60	63	64	1	4
5.	2014	XXX	XXX	xxx			82	45			27	0	(1)
6.	2015	XXX	XXX	xxx	xxx				62	53	41	(12)	(21)
7.	2016	XXX	XXX	xxx	xxx	XXX			69		44	(8)	(25)
8.	2017	XXX	XXX	XXX	xxx	XXX	XXX		78		24	(24)	(54)
9.	2018	XXX		75	35	(40)							
10.	2019	XXX	91	47	(44)	XXX							
11.	2020	XXX	99	XXX	XXX								
											12. Totals	(126)	(234)

SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

	1.	Prior	XXX	XXX	xxx	XXX.			x					
	2	2019	xxx	XXX	xxx		XX			~~~				XXX
	2.	2020	XXX		XXX		~~	~~~~		XXX	XXX		XXX	
L	Э.	2020	~~~	~~~	~~~					~~~~	~~~			XXX
												4. Totals		

SCHEDULE P - PART 2T - WARRANTY

							/						
1.	Prior	XXX	XXX	XXX	XXX.								
2.	2019	xxx	XXX	xxx	x	xx	\sim		~~~~				
3	2020	XXX	XXX	XXX	XX	xx	xx	×	XXX	XXX		XXX	XXX
	2020	7000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7000					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7001	4 Totals	7000	7000

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

		-											
		CUMUL	ATIVE PAID	NET LOSSES	AND DEFEN	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YE	AR END	11	12
						(\$000 OI	MITTED)					Number of	Number of
Ye	ears in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
v	Vhich											Closed	Closed
Lo	osses											With	Without
V	Nere											Loss	Loss
Inc	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1.	Prior	000											
2.	2011												
3.	2012	xxx											
4.	2013	XXX	XXX										
5.	2014	XXX	XXX	XXX			N						
6.	2015	XXX	XXX	XXX	x								
7.	2016		XXX										
8.	2017	XXX	XXX	XXX		XXX							
9.	2018	xxx	XXX		XXX		XXX	XXX					
10.	2019	XXX	XXX	XXX	XXX		XXX	XXX	xxx				
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1.	Prior		0	0	0	0	0	0	0	0	0	2	0
2.	2011	85	85		85							14	16
3.	2012	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	0	1	1	1	1	1	15	5
6.	2015	XXX	XXX	XXX	XXX	0	0	0	0	0	0		7
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2018	XXX	1	6	9		68						
10.	2019	XXX	14	44	144								
11.	2020	XXX	19	90	90								

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1.	Prior		0	0	0	0	0	0	0	0	0	0	0
2.	2011	7	7	7	7	7	7	7	7	7	7	1	1
3.	2012	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	2	4
5.	2014	XXX	XXX	XXX	2	2	19					166	
6.	2015	XXX	XXX	XXX	XXX	11	34	56	67	65	70		
7.	2016	XXX	XXX	XXX	XXX	XXX	35		161				5,972
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	42	132	240			295
9.	2018	XXX		140	231		270						
10.	2019	XXX		59	93	88							
11.	2020	XXX	21	42	48								

SCHEDULE P - PART 3D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

1.	Prior	000										0	0
2.	2011								1,008	1,008	1,010		53
3.	2012	XXX			705							102	35
4.	2013	XXX	XXX									41	14
5.	2014	XXX	XXX	XXX								73	
6.	2015	XXX	XXX	XXX	XXX							91	52
7.	2016	XXX	XXX	XXX	XXX	XXX						115	53
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX						
9.	2018	XXX					45						
10.	2019	XXX											
11.	2020	XXX	XXX	183	146	8							

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1.	Prior		0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	1	1	3	3	5	5	2	2
6.	2015	XXX	XXX	XXX	XXX	2	3	4	5	6	5	8	8
7.	2016	XXX	XXX	XXX	XXX	XXX	1	2	5	6	5	16	11
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	2	4	6	5	25	14
9.	2018	XXX	0	0	0	12	10						
10.	2019	XXX	0	0	15	11							
11.	2020	XXX	0	6	12								

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

0			FARIJ								\cdots		
		CUMULA	ATIVE PAID N	NET LOSSES	AND DEFEN			MENT EXPE	NSES REPOF	RTED AT YEA	AR END	11	12
						(\$000 ON	AITTED)					Number of	Number of
	ears in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
v	Vhich											Closed	Closed
	osses											With	Without
	Nere											Loss	Loss
In	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1.	Prior		0	5	5	5	5	5	5	5	5	0	0
2.	2011	0	0	1	1	2	5	5	5	5	6	0	0
3.	2012	xxx	0	1	1	6	6	6	6	6	6	1	0
4.	2013	xxx	XXX	0	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	0	0	1	1	1	4	0	0
6.	2015	xxx	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2016	xxx	XXX	XXX	XXX	XXX	0	0	1	1	2	0	0
8.	2017	xxx	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	4
9.	2018		XXX	XXX	XXX	XXX	XXX	XXX	0	0	2	0	6
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	1
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1.	Prior			114								4	0
2.	2011	21		49	51		61	62	62	62	62	2	5
3.	2012	XXX										2	7
4.	2013	XXX	XXX	3	65		146					3	5
5.	2014	XXX	XXX	XXX	6				63	64	63	1	7
6.	2015	XXX	XXX	XXX	XXX	6						3	10
7.	2016	XXX	XXX	XXX	XXX	XXX	4	71				3	6
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX					4	7
9.	2018	XXX				4							
10.	2019	XXX	55		3	12							
11.	2020	XXX	30	1	10								

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1													
1.	Prior	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2.	2011	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3.	2012	XXX	0	0	0	0	0	0	0	0	0	XXX	XXX
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	XXX	XXX
5.	2014	XXX	XXX	XXX	0	0	0	0	0	0	0	XXX	XXX
6.	2015	XXX	XXX	XXX	XXX	0	0	0	0	0	0	XXX	XXX
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	XXX	XXX
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	XXX	XXX
9.	2018	XXX	0	0	0	XXX	XXX						
10.	2019	XXX	0	0	XXX	XXX							
11.	2020	XXX	0	XXX	XXX								

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1.	Prior		1 , 190	1,609	1,940		2,613	3, 151	3,374	3,453			0
2.	2011											22	54
3.	2012	XXX								1,093	1,148		55
4.	2013												110
5.	2014	XXX	XXX	XXX						1,253	1,335		117
6.	2015	XXX	XXX	XXX	XXX					1, 130	1,307	40	147
7.	2016	XXX	XXX	XXX	XXX	XXX				1,220	1,591	52	
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX				1, 105	46	
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	73		55	247
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	104	13	132

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

		-	-			-	-				-		
1.	Prior	000										17	0
2.	2011												16
3.	2012	XXX	21	104	175	202						5	14
4.	2013	XXX	XXX	20	42							5	13
5.	2014	XXX	XXX	XXX	16	104		131		146	148	4	10
6.	2015	XXX	XXX	XXX	XXX	17	72				151	6	12
7.	2016	XXX	XXX	XXX	XXX	XXX	9		140	230	251	6	14
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	16	51	95	168	5	16
9.	2018	XXX	10	45	76	4	16						
10.	2019	XXX	3		2	13							
11.	2020	XXX	3	2	9								

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

	CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOF	RTED AT YEA	R END	11	12
					(\$000 OI	MITTED)					Number of	Number of
Years in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
Which										Closed	Closed	
Losses	Losses									With	Without	
Were											Loss	Loss
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1. Prior	xxx	xxx	XXX	XXX	XXX	XXX			5	(1)		XXX
2. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	3	XXX	XXX
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	10	XXX	xxx

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1.	Prior									14	14	0	0
2.	2019	xxx	xxx						xxx	8	14		
3.	2020	XXX	21	58	13								

SCHEDULE P - PART 3K - FIDELITY/SURETY

1.	Prior	XXX	XXX	XXX	XX	 X	xxx	i x	000		 XXX	XXX
2.	2019	XXX	XXX	XXX		 xx	\sim				 XXX	XXX
3.	2020	XXX	XXX	XXX	XXX		XXX	x		XXX	XXX	XXX

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior			.xxx	XX.	X	XXX		x	000		 	xxx
2. 2019		xxx	xxx		xx	∞		x			 	xxx
3. 2020	xxx	XXX	XXX	XXX		XXX	V	x	~~~~	XXX	XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

1.	Prior	000									 XXX	
2.	2011										 xxx	xxx
3.	2012	XXX									 XXX	xxx
4.	2013	XXX	XXX								 XXX	xxx
5.	2014	xxx	XXX	xxx							 xxx	xxx
6.	2015	xxx	XXX	xxx							 XXX	xxx
7.	2016	xxx	xxx			xx					 xxx	
8.	2017	xxx	xxx	xxx	xxx						 xxx	XXX
9.						XXX	xxx				XXX	XXX
10.		XXX					XXX				XXX	XXX
11.		XXX	XXX									

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property **NONE**

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability **NONE**

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines **NONE**

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

	•	SCHEDI	JLC F -	FARIS	0R - 3EU	> TIUN 1	- PRUI	00013	LIADILI	11-00			
		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN	ISE AND COS (\$000 ON		MENT EXPE	NSES REPOF	RTED AT YEA	R END	11 Number of	12 Number of
V Lo	ears in Vhich osses Vere	1	2	3	4	5	6	7	8	9	10	Claims Closed With Loss	Claims Closed Without Loss
In	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Payment	Payment
1.	Prior	000					1, 164	1,466	1,540	1,645	1,695	22	0
2.	2011	4		90								7	
3.	2012	xxx	3									9	29
4.	2013	xxx	XXX	9	23							11	26
5.	2014	xxx	XXX	XXX	13							8	23
6.	2015	xxx	XXX	XXX	XXX	12		85	245			10	24
7.	2016	XXX	XXX	XXX	XXX	XXX	5	46	96			10	28
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX		67			7	
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16			13	64
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	65	14	72
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	4	26

SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1.	Prior					80						0	0
2.	2011	1	8	51	53	55	63	66	66	66	67	1	5
3.	2012	XXX	2	11		12	12	12	12	12	12	1	20
4.	2013	XXX	XXX	3		43	45	54	54	55	56	1	
5.	2014	XXX	XXX	XXX	0	8	10	25	25	25	25	1	6
6.	2015	XXX	XXX	XXX	XXX	1	48	55	40	41	40	0	7
7.	2016	XXX	xxx	XXX	xxx	XXX	2	12				0	2
8.	2017	xxx	xxx	xxx	xxx	XXX	XXX	1	11	11	12	0	3
9.	2018	XXX	1	4	8	0	3						
10.	2019	xxx	0	1	0	2							
11.	2020	xxx	0	0	2								

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

	1.	Prior	XXX	XXX	XXX	XXX.	Y	.xx	þ	 K			 xxx	XXX
	2.	2019	xxx		xxx	X		\sum_{x}		x	~~~		xxx	XXX
	3.	2020	XXX	XXX	XXX	X	xx			x	XXX	XXX	XXX	XXX
L	0.	2020	,,,,,	,,,,,	,						7001	,,,,,	,	,000

SCHEDULE P - PART 3T - WARRANTY

1. Prior	xxx	
2. 2019XXXXXXXXX	x x	
3. 2020 XXX XXX XXX		XXX XXX

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

		BULK AND I	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COS		IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
V Lo	ears in Vhich osses Vere	1	2	3	4	5	6	7	8	9	10
Inc	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior										
2.	2011										
3.	2012	xxx									
4.	2013	xxx	XXX								
5.	2014		XXX	XX							
6.	2015		XXX	XX	XX						
7.	2016	xxx		XX	XXX	XXX					
8.	2017		XXX	xxx							
9.	2018	xxx	XXX	XXX	XXX	XXX	xxx	xxx			
10.	2019	xxx	XXX	XXX		XXX	XXX	xxx	XXX		
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	0	0	2	0	0	0
6.	2015	XXX	XXX	XXX	XXX	0	0	0	0	0	(2)
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	2
9.	2018	XXX	17	11	(2)						
10.	2019	XXX									
11.	2020	XXX	80								

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX			9	2	1	1	2
6.	2015	XXX	XXX	XXX	XXX			15	12	3	4
7.	2016	XXX	XXX	XXX	XXX	XXX					
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	118		61	
9.	2018	XXX	181	51	(20)						
10.	2019	XXX									
11.	2020	XXX	151								

SCHEDULE P - PART 4D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

1.	Prior										
2.	2011							47			
3.	2012	XXX									
4.	2013	XXX	XXX					17	17		
5.	2014	XXX	XXX	XXX					21		12
6.	2015	XXX	XXX	XXX	XXX						
7.	2016	XXX	XXX	XXX	XXX	XXX					
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2018	XXX	XXX	XXX	XXX		XXX	XXX	421		
10.	2019	XXX									
11.	2020	XXX	215								

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	2	1	1	0	0	0	0
6.	2015	XXX	XXX	XXX	XXX	1	2	0	0	0	0
7.	2016	XXX	XXX	XXX	XXX	XXX	1	0	5	5	9
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	2	1	2	2
9.	2018	XXX	1	1	2						
10.	2019	XXX	(30)	0							
11.	2020	XXX	0								

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

										00001	
		BULK AND I	BNR RESERVE	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
V Lo	ears in Vhich osses Vere	1	2	3	4	5	6	7	8	9	10
	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior		14	6	4	1	0	0	0	0	0
2.	2011		4	3	2	0	1	1	0	0	0
3.	2012		2	3	1	1	1	1	1	0	0
4.	2013	xxx	XXX	7	7	5	3	1	1	0	0
5.	2014		XXX	xxx		7	5		0	0	1
6.	2015		XXX	xxx	XXX	11	9		3	2	2
7.	2016			xxx	XXX	XXX	10	8	5	2	1
8.	2017		xxx	xxx	XXX	XXX	XXX	10	10	8	6
9.	2018		xxx	xxx	XXX	XXX	XXX	XXX	9		3
10.	2019		xxx	xxx	XXX	XXX	XXX	XXX	XXX		
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1.	Prior		239	100			7		1	1	2
2.	2011		123		21		1	1	0	0	0
3.	2012	XXX		45			6	2	1	0	0
4.	2013	XXX	XXX				16	4	0	0	0
5.	2014	XXX	XXX	XXX			25		1	1	1
6.	2015	XXX	XXX	XXX	XXX			13	7	5	4
7.	2016	XXX	XXX	XXX	XXX	XXX	117			14	15
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX				19
9.	2018	XXX		13	17						
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX		XXX	25	43
11.	2020	XXX	165								

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012		0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2015	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2018	XXX	0	0	0						
10.	2019	XXX	0	0							
11.	2020	XXX	7								

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1.	Prior	4,293		2, 125	1,211						142
2.	2011							45			
3.	2012	XXX									
4.	2013	XXX	XXX	1, 150				177			
5.	2014	XXX	XXX	XXX	1,482	1,087				47	
6.	2015	XXX	XXX	XXX	XXX	1,784	1, 191	670			
7.	2016	XXX	XXX	XXX	XXX	XXX		1,311			133
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	2,078	1,339		
9.	2018	XXX		XXX	XXX			XXX	2,369	1,646	
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,413	2,438
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,094

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

		-	-		-				-		
1.	Prior	1,379						14	10		4
2.	2011						14		0	1	1
3.	2012	XXX		136	61			10	6	2	1
4.	2013	XXX	XXX					19	11	4	2
5.	2014	XXX	XXX	XXX					15	8	8
6.	2015										5
7.	2016			XXX				116			13
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX		104		
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2019		XXX								
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	258

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

	BULK AND I	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COS	CONTAINMEN	T EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
Years in	1	2	3	4	5	6	7	8	9	10
Which										
Losses										
Were										
Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior		xxx			xxx				11	11
2. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30	4
2. 2010										
3. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	90

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1.	Prior		XXX							1	0
2.	2019	xxx	8	3							
3.	2020	xxx	15								

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior. .XXX .XXX .XXX .XXX .XXX											
2. 2019	1. Prior	XXX		XX	XXX	XXX	X.	X			
		VVV	~~~~	xx	xx				***		
				~~							
	3. 2020	~~~	~~~					~~~	~~~	~~~	

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1.	Prior	xxx	xxx	xxx			xxx		0	0	0
2.		XXX		XXX	xxx		XXX	xxx		0	0
3.	2020	XXX	3								

SCHEDULE P - PART 4M - INTERNATIONAL

1.	Prior										
2.	2011										
3.	2012	XXX									
4.	2013	XXX	XXX								
5.	2014	xxx	xxx								
6.	2015	xxx	xxx	XX	XX						
7.	2016	xxx	xxx	XX	xx	x					
8.	2017	xxx	xxx	XX	xxx	XXX.	x				
9.	2018	xxx	xxx					xxx			
10.	2019	xxx			xxx	xxx	xxx	xxx	XXX		
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property **NONE**

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability **NONE**

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines **NONE**

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

				$\mathbf{u} \mathbf{v} \mathbf{i} \mathbf{\tau} \mathbf{i} \mathbf{v} \mathbf{v} \mathbf{v}$					-0000		
		BULK AND IE	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
v	ears in Vhich	1	2	3	4	5	6	7	8	9	10
	osses Vere										
Inc	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	1,974	1,384				401	345		195	
2.	2011						142	103		40	
3.	2012	XXX	451				149	122		22	12
4.	2013	xxx	xxx					177		80	
5.	2014	xxx	XXX	XXX							
6.	2015	xxx	XXX	xxx	XXX		638	451		74	
7.	2016	XXX	XXX	XXX	XXX	XXX		614			
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX				
9.	2018	xxx	XXX	XXX	XXX	XXX	XXX	xxx			
10.	2019	xxx		xxx		xxx	xxx	xxx		1, 102	
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,149

SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1.	Prior						4	4	3		
2.	2011		65	44		13	5	3	2	2	1
3.	2012	xxx		116		18	1	2	1	1	1
4.	2013	XXX	xxx	116				13	5	2	2
5.	2014	XXX	xxx	XXX				19	3	2	2
6.	2015	xxx	xxx	xxx	xxx				21		1
7.	2016	XXX	xxx	xxx	XXX	XXX	105				8
8.	2017	XXX	xxx	XXX	XXX	XXX	XXX		67		13
9.	2018		xxx	XXX		xxx	XXX	xxx			
10.	2019	XXX		xxx	XXX	xxx	XXX		XXX		41
11.	2020	XXX	90								

SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

	1.	Prior	XXX			XXX	XXX.	x	x			
		2019	XXX	xxx	~~	VV	X.		×xx	XXX		
	3	2020	XXX	XXX	XX	xx	x		XXX	XXX	xxx	
L	0.	2020	7000	7001	70				7001	7000	7001	I

SCHEDULE P - PART 4T - WARRANTY

2. 2019				X	X	X	XXX	XXX		xx	x	xxx	xxx	Prior	1.
		xx		¥XX	X	x	x	xx	N	XX .	x		xxx	2019	2.
3. 2020 XXX XXX XX XX XXX XXX XXX XXX	xxx	xxx xxx	XXX	XXX	x	X	kx	xx		xx	x	XXX	XXX	2020	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS SECTION 1

							-				
			CUMULA	ATIVE NUMBER	OF CLAIMS C	LOSED WITH LO	DSS PAYMENT	DIRECT AND A	SSUMED AT YE	EAR END	
Years	in Which	1	2	3	4	5	6	7	8	9	10
Pre	miums										
	e Earned										
	Losses										
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1	Prior										
	1 1101										
2.	2011										
		2007									
3.	2012	XXX									
4.	2013	XXX	XXX								
5.	2014	XXX	XXX	XX	N		· · · · · · · · · · · · · · · · · · ·				
6.	2015			XX	xxx						
0.	2015			······							
7.	2016	XXX	XXX	XXX	XXX						
_			1001	10.04	10.04	1001	10.04				
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX				
9	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
υ.	2010									-	
10.	2019	XXX	XXX	XXX	XXX		XXX		XXX		
44	2020	~~~~	VVV	VVV	VVV	VVV	VVV	VVV	~~~~	VVV	
- 11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 2

					0						
				NUMBER	R OF CLAIMS O	UTSTANDING [DIRECT AND AS	SSUMED AT YE	AR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0
4.	2013	xxx	XXX	0	0	0	0	0	0	0	0
5.	2014	xxx	xxx	XXX	0	0	0	0	0	0	0
6.	2015	xxx	XXX	XXX	XXX	0	0	0	0	0	0
7.	2016	xxx	XXX	xxx	XXX	xxx	0	0	0	0	0
8.	2017	xxx	xxx	XXX		XXX	XXX	0	0	0	0
9.	2018	xxx	XXX	xxx	XXX	xxx	XXX	xxx	0	0	0
10.	2019	xxx	XXX	XXX	XXX	xxx	XXX	xxx	xxx	0	0
11.	2020	xxx	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTI	ON 3	
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					0		<u> </u>				
				CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT AI	ND ASSUMED A	T YEAR END		
Prei Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0
4.	2013	xxx	XXX	0	0	0	0	0	0	0	0
5.	2014	xxx	XXX	XXX	0	0	0	0	0	0	0
6.	2015	xxx	XXX	xxx	XXX	0	0	0	0	0	0
7.	2016	xxx	xxx	xxx	xxx	XXX	0	0	0	0	0
8.	2017	xxx		xxx	XXX	XXX	XXX	0	0	0	0
9.	2018						XXX	xxx	0	0	0
10.	2019	XXX					XXX	xxx	XXX	0	0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL SECTION 1

		CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT	DIRECT AND AS	SUMED AT YE	AR END	
Years in Which	า 1	2	3	4	5	6	7	8	9	10
Premiums Were Earned and Losses										
Were Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior		2	0	0	0	0	0	0	0	0
2. 2011		14		14	14	14	14	14	14	14
3. 2012	xxx	0	0	0	0	0	0	0	0	0
4. 2013	xxx	xxx	0	0	0	0	0	0	0	0
5. 2014	xxx	XXX	XXX	6	14		15		15	15
6. 2015	xxx	xxx	XXX	XXX	13				18	
7. 2016		XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2017		XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2018		XXX	XXX	XXX	XXX	XXX	XXX	8	18	46
10. 2019		XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	144
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	90

SECTION 2

					L L		4				
				NUMBEI	R OF CLAIMS (OUTSTANDING	DIRECT AND A	SSUMED AT YE	AR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior										
2.	2011										
3.	2012	XXX									
4.	2013	XXX	xxx								
5.	2014	XXX	xxx	XX							
6.	2015	XXX		XX	. xxx						
7.	2016	XXX	xxx								
8.	2017	XXX	xxx	XXX	XXX						
9.	2018	XXX	xxx	XXX	XXX						
10.	2019	xxx	xxx	xxx	XXX		xxx	xxx	xxx		
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

					3	ECHON	3				
				CUMULATIVE	NUMBER OF	CLAIMS REPOR	RTED DIRECT A	ND ASSUMED	AT YEAR END		
Prer Were	in Which niums Earned Losses	1	2	3	4	5	6	7	8	9	10
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior										
2.	2011										
3.	2012	XXX									
4.	2013	xxx	XXX								
5.	2014	xxx	XXX	XX				· ·····			
6.	2015	xxx	xxx	XX	xxx						
7.	2016	xxx	XXX	xxx							
8.	2017	xxx	XXX	XXX	XXX		xxx				
9.	2018	xxx	XXX	XXX	xxx		xxx	xxx			
10.	2019	xxx	XXX	XXX	xxx		xxx	xxx	xxx		
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1 **NONE**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2 **NONE**

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3 **NONE**

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION) SECTION 1

			CUMULA	TIVE NUMBER	OF CLAIMS C	LOSED WITH LO	OSS PAYMENT	DIRECT AND A	SSUMED AT Y	EAR END	
Years in Premin Were Ea and Lo	ums arned	1	2	3	4	5	6	7	8	9	10
Were Inc	curred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. P	rior										
2. 2	011										
3. 2	012	XXX									
4. 2	013	xxx	xxx				\				
5. 2	014		xxx	XX							
6. 2	015	xxx	XXX	XX	. xxx						
7. 2	016		xxx	xxx							
8. 2	017		xxx	XXX	xxx		xxx				
9. 2	018	xxx	XXX	XXX	XXX			xxx			
10. 20	019	xxx	XXX	XXX	XXX		xxx	xxx			
11. 2	020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

				NUMBEI	R OF CLAIMS (DUTSTANDING	DIRECT AND AS	SSUMED AT YE	AR END		
Prei Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior										
2.	2011										
3.	2012	xxx									
4.	2013	xxx									
5.	2014	xxx		XX							
6.	2015			XX	xxx						
7.	2016				XXX	xxx					
8.	2017				xxx	xxx					
9.	2018	XXX			xxx		xxx				
10.	2019										
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

					0						
				CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT A	ND ASSUMED A	T YEAR END		
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	e Earned Losses										
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior		6	4	0	0	0	0	0	0	1
2.	2011										
3.	2012	XXX									
4.	2013							55			
5.	2014	xxx	xxx	xxx			101	101	101	101	
6.	2015	xxx	xxx	xxx	xxx			134			
7.	2016	xxx	xxx	xxx	XXX	XXX		154			
8.	2017	xxx	xxx	xxx	xxx	XXX	XXX				
9.	2018	xxx	xxx	xxx	xxx	XXX	xxx	xxx			
10.	2019	XXX	xxx	xxx	XXX	XXX	XXX	XXX	XXX		
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	328

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL SECTION 1

			CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT I	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
Were	miums Earned Losses										
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0
4.	2013	xxx	XXX	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	1	1	1	2	2	2
6.	2015	xxx	XXX	XXX	xxx	4	6	7	7	8	8
7.	2016	xxx	XXX	XXX	xxx	xxx	5	9	13	14	16
8.	2017	xxx	XXX	XXX	XXX	xxx	xxx	7		21	25
9.	2018	xxx	XXX	XXX	xxx	xxx	xxx	xxx	6	12	12
10.	2019	xxx	XXX	XXX		xxx	xxx	xxx	XXX	6	15
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6

SECTION 2

					U						
				NUMBEF	R OF CLAIMS O	UTSTANDING E	DIRECT AND AS	SUMED AT YE	AR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	xxx	0	0	0	0	0	0	0	0	0
4.	2013	xxx	xxx	0	0	0	0	0	0	0	0
5.	2014	xxx	xxx	XXX	1	1	1	0	0	0	0
6.	2015	xxx	xxx	XXX	XXX		2	1	1	0	0
7.	2016	xxx	xxx	xxx	XXX	XXX	6	2	2	1	1
8.	2017	xxx	xxx	XXX	XXX	XXX	XXX	9	5	3	3
9.	2018	xxx	xxx	xxx	xxx	XXX	XXX	XXX	8	4	4
10.	2019	xxx	XXX	xxx	XXX	XXX	XXX	XXX	xxx		7
11.	2020	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

					3	ECTION	3				
				CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT AI	ND ASSUMED A	T YEAR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	2	2	3	3	3	3	4
6.	2015	XXX	XXX	XXX	XXX	12	12	13	14	14	16
7.	2016	XXX	XXX	XXX	XXX	XXX	15	18			
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	21			
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19		
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34

SECTION 3

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE SECTION 1A

Yea	ars in		CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
Were	niums Earned Losses										
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	1	1	1	1	1
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2015	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

							A				
Ye	ears in			NUMBEF	R OF CLAIMS O	UTSTANDING [DIRECT AND AS	SUMED AT YE	AR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	1	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	1	0	0	0	0	0	0	0	0
4.	2013	xxx	xxx	0	0	0	0	0	0	0	0
5.	2014	xxx	xxx	xxx	0	0	0	0	0	0	0
6.	2015	xxx	xxx	xxx	XXX	0	0	0	0	0	0
7.	2016	xxx	XXX		XXX	XXX		0	0	0	0
8.	2017	xxx		xxx		xxx		2	0	0	0
9.	2018	xxx	XXX	XXX	XXX	XXX	xxx	xxx	0	1	0
10.	2019	xxx	XXX			xxx	xxx	xxx	xxx	1	0
11.	2020	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION	3A
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					•						
Ye	ars in			CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT A	ND ASSUMED A	T YEAR END		
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	Earned										
	Losses	0011	0010	0010	0011	0045	0010	0017	0010	0040	0000
vvere	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	1	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0
3.	2012	xxx	1	1	1	1	1	1	1	1	1
4.	2013	xxx		0	0	0	0	0	0	0	0
5.	2014	xxx	XXX		0	0	0	1	1	1	0
6.	2015	xxx				0	0	0	0	0	0
7.	2016	xxx			XXX		0	0	0	0	0
8.	2017	xxx			XXX		XXX	4	4	4	4
9.	2018	xxx					XXX	xxx	6	6	7
10.	2019						XXX		XXX	2	2
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5F - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE SECTION 1B

Ye	ars in		CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
Were	miums Earned Losses										
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior		1	2	0	0	0	1	0	0	0
2.	2011	0	1	1	1	1	1	2	2	2	2
3.	2012	XXX	0	1	1	2	2	2	2	2	2
4.	2013	XXX	XXX	0	0	1	2	2	3	3	3
5.	2014	XXX	XXX		0	0	1	1	1	1	1
6.	2015	XXX	XXX	XXX	XXX	0	0	2	2	3	3
7.	2016	XXX	XXX	xxx	XXX	xxx	0			3	3
8.	2017	XXX	XXX	xxx	XXX	XXX	XXX	0	2	3	4
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	2	4
10.	2019	XXX	XXX	xxx	XXX	XXX	XXX	xxx	XXX	1	
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SECTION 2B

Ye	ears in			NUMBER	R OF CLAIMS O	UTSTANDING [DIRECT AND AS	SSUMED AT YE	AR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	7	4	2		2	2	0	0	0	0
2.	2011	5	3	1	1	1	1	0	0	0	0
3.	2012	xxx	6	3	2	1	0	0	0	0	0
4.	2013	xxx	XXX			2	1	0	0	0	0
5.	2014	xxx	XXX	XXX	5	2	1	0	0	0	0
6.	2015	xxx	XXX	XXX	XXX	7	4	2	1	0	0
7.	2016	xxx	XXX	XXX	XXX	xxx	6	3	2	1	0
8.	2017	xxx	XXX	XXX	XXX	xxx	XXX	6	4	2	1
9.	2018	XXX	XXX	XXX	XXX	xxx	XXX	xxx	8	6	5
10.	2019	xxx	XXX	XXX	XXX	xxx	xxx	xxx	xxx	7	4
11.	2020	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6

SECTION 3B

					•						
Ye	ars in			CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT A	ND ASSUMED A	AT YEAR END		
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	Earned										
	Losses	0011	0040	0010	0011	0045	0010	0047	0010	0040	0000
vvere	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	1	0	0	0	0	0	0	0	0	0
2.	2011	7	7	7			7	7	7	7	7
3.	2012		9	9	9	9	9	9	9	9	9
4.	2013	XXX	XXX			7	7	7	7	7	8
5.	2014		xxx		8	8	8	8	8		
6.	2015		xxx			13	13	13	13		13
7.	2016		XXX		XXX		9	9	9	9	10
8.	2017	XXX	XXX		XXX	xxx	XXX				
9.	2018		xxx			xxx	xxx	xxx	24		
10.	2019		XXX			xxx	XXX		xxx		19
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE SECTION 1A

	ears in		CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LO	SS PAYMENT I	DIRECT AND AS	SUMED AT YE	AR END	
Years	in Which	1	2	3	4	5	6	7	8	9	10
Pre	miums										
Were	e Earned										
and	Losses										
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
			-								
1.	Prior			11			10	4	1	0	1
2.	2011			12		15	19		21	21	
3.	2012	XXX		10	13	15					
		1001	1001								
4.	2013	XXX	XXX	2	6	11					
-	0044	2004	2007	2004	3	9	19	27	33	37	20
5.	2014	XXX	XXX	XXX	s	9					
6.	2015	xxx	XXX	XXX	XXX	1	14	23	31	36	40
0.	2015						14				
7.	2016	XXX	XXX	XXX	XXX	XXX	8	26	35	45	52
1.	2010										
8.	2017	XXX	XXX		XXX	XXX	XXX	12	25	37	46
0.	2017										
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	38	55
.											
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13

SECTION 2A

							~				
Ye	ears in			NUMBEF	R OF CLAIMS O	UTSTANDING D	DIRECT AND AS	SUMED AT YE	AR END		
Years in Which Premiums Were Earned and Losses		1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior										
2.	2011	21	18	15	13	10	4	2	2	1	0
3.	2012	XXX		21				6		3	2
4.	2013	XXX	XXX					9	6		3
5.	2014	xxx	XXX	XXX						8	5
6.	2015	XXX	XXX	XXX	XXX					16	10
7.	2016	xxx	XXX	xxx	xxx						25
8.	2017	xxx	XXX	XXX	xxx	xxx	XXX				
9.	2018	xxx	xxx	xxx	xxx	xxx	xxx	xxx			
10.	2019	xxx	xxx	xxx	xxx	xxx		xxx	XXX		
11.	2020	xxx	XXX	xxx	XXX	XXX	XXX	XXX	XXX	XXX	93

SECTION	3A
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Ye	ears in		CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END										
Years in Which		1	2	3	4	5	6	7	8	9	10		
	emiums												
	e Earned												
	Losses Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020		
were	Incurred	2011	2012	2013	2014	2015	2016	2017	2016	2019	2020		
1.	Prior			21		6	2	5	2	4	9		
2.	2011												
3.	2012	xxx											
4.	2013	xxx	xxx					131		141	145		
5.	2014	xxx	xxx	XXX									
6.	2015	xxx		xxx									
7.	2016	xxx		xxx									
8.	2017	xxx	xxx	xxx			XXX						
9.	2018	xxx		xxx			XXX	xxx					
10.	2019	xxx					XXX	XXX	XXX				
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	239		

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE SECTION 1B

						-				
Years	in	CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LO	SS PAYMENT D	DIRECT AND AS	SSUMED AT YE	AR END	
Years in V	Which 1	2	3	4	5	6	7	8	9	10
Premiu	ims									
Were Ea	arned									
and Los	sses									
Were Inc	curred 2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
				-						
1. Pri	ior5	6	2	5	1	3	0	0	0	0
2. 20)11	2	3	1	1	1	5	5	5	5
2. 20	/ 1	·····4						J	J	
3. 20)12XXX	1		4						
4. 20)13XXX	XXX	2	3	3	4	5	5	5	5
		2004	2004		0			4		
5. 20)14XXX	XXX	XXX	I	2	4	4	4	4	4
6. 20)15 XXX	XXX	XXX	XXX	3	5	6	6	6	6
0. 20	/10									
7. 20	016XXX		XXX	XXX	XXX	2		4	5	6
							_			_
8. 20)17XXX	XXX	XXX	XXX	XXX	XXX	2	4	4	5
9. 20)18 XXX	xxx	xxx	XXX	xxx	XXX	XXX	2	2	1
9. 20	/10XXX							2		
10. 20)19XXX	XXX		XXX	XXX	XXX	XXX	XXX		2
11. 20)20 XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

SECTION 2B

Ye	ears in			NUMBEF	R OF CLAIMS O	UTSTANDING [DIRECT AND AS	SSUMED AT YE	AR END		
Years in Which Premiums Were Earned and Losses		1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	26	17	15	7	6	2	1	1	0	1
2.	2011	8	4	2	2	1	0	0	0	0	0
3.	2012	xxx	10	6	4	3	1	1	0	0	0
4.	2013	xxx	XXX	7		3	2	1	0	0	0
5.	2014	xxx	XXX	xxx	7	3	2		1	0	0
6.	2015	xxx	XXX	xxx	XXX	8	3	1	0	0	0
7.	2016	xxx	XXX	xxx	XXX	XXX		3	2	1	1
8.	2017	xxx	XXX	xxx	XXX	XXX	XXX	8	3	2	1
9.	2018	xxx	XXX	XXX	XXX	XXX	XXX	xxx	5	2	2
10.	2019	xxx	XXX	XXX	XXX	XXX	XXX	xxx	xxx	5	2
11.	2020	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

SECTION 3B

Years in Years in Which Premiums Were Earned and Losses				CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END										
		1	2	3	4	5	6	7	8	9	10			
and Losses Were Incurred		2011	2012	2013	2014	2015	2016	2017	2018	2019	2020			
1.	Prior	2	0	1	0	2	0	0	0	0	1			
2.	2011					21	21							
3.	2012			19		19	19	19		19	19			
4.	2013	xxx	xxx	17										
5.	2014	xxx	xxx		14	14	14		14	14	14			
6.	2015	xxx	xxx	xxx		18								
7.	2016		xxx	xxx		xxx	19				21			
8.	2017		xxx	xxx		xxx	XXX							
9.	2018	xxx	xxx	xxx		xxx	XXX			21				
10.	2019		XXX	XXX			XXX		XXX	16				
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15			

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE SECTION 1A

-											
Ye	ars in CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND A									AR END	
Years	in Which	1	2	3	4	5	6	7	8	9	10
Pre	miums										
Were	e Earned										
and	Losses										
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	4		3	5	2	3	3	0	0	1
2.	2011	0	1	1	2	4	5	7	7	7	7
3.	2012	XXX	0	2	2	3	6	7	7	8	9
4.	2013	xxx	xxx	1	2	3	6	8	9	10	11
5.	2014	xxx	XXX	XXX	0	1	3	5	6	7	8
6.	2015	xxx	xxx	XXX	XXX	1	2	4	6	8	10
7.	2016	xxx	xxx	XXX	XXX	xxx	1	3	4	7	10
8.	2017	xxx		XXX	xxx	XXX	XXX	2	4	5	7
9.	2018	xxx	6	11	13						
10.	2019	xxx		xxx	XXX	xxx	XXX	xxx	XXX	10	14
11.	2020	XXX	4								

SECTION 2A

							~				
Ye	Years in NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END vars in Which 1 2 3 4 5 6 7 8 9										
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	25		17	11		9	4	4	5	3
2.	2011	11	9	6	6	4	3	2	1	1	1
3.	2012	XXX	6	5	6	7	5	4	4	3	2
4.	2013	xxx	XXX		9	11	8	5	5	5	5
5.	2014	xxx	XXX	XXX	7	9	8	5	5	4	3
6.	2015	xxx	XXX	XXX	XXX	8	9	7	8	7	6
7.	2016	xxx	XXX	XXX	XXX	XXX	11	10	11	9	6
8.	2017	xxx	XXX	XXX	XXX	XXX	XXX	8	9	10	8
9.	2018	xxx	17	9	9						
10.	2019	xxx	16	8							
11.	2020	XXX	8								

SECTION 3A

Years in CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END											
Ye	ears in			CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT AI	ND ASSUMED A	T YEAR END		
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	e Earned										
	Losses										
Were	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior			10		6	4	2	2	1	2
2.	2011	13									
3.	2012	xxx	9	17	21	25					40
4.	2013	xxx	XXX			23	27				
5.	2014	xxx	XXX	XXX			24	27		33	
6.	2015	xxx	XXX	XXX	XXX	12	23				40
7.	2016	xxx	XXX	XXX	XXX	XXX	14	27		41	
8.	2017	xxx	XXX	XXX	XXX	xxx	XXX	20			44
9.	2018	xxx	XXX	XXX	XXX	xxx	XXX	xxx			
10.	2019	xxx	XXX		XXX	xxx	XXX	xxx	XXX		
11.	2020	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 5R - PRODUCTS LIABILITY - CLAIMS-MADE SECTION 1B

				=						
Years in		CUMULA	TIVE NUMBER	OF CLAIMS CL	OSED WITH LO	SS PAYMENT [DIRECT AND AS	SSUMED AT YE	AR END	
Years in Which	h 1	2	3	4	5	6	7	8	9	10
Premiums Were Earned and Losses	1									
Were Incurred	d 2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1. Prior	0	0 .	0	0	0	0	0	0	0	0
2. 2011	0	0	1	1	1	1	1	1	1	1
3. 2012		0	0	0	0	1	1	1	1	1
4. 2013		xxx	0	0	0	0	1	1	1	1
5. 2014		XXX	xxx	0	0	1	1	1	1	1
6. 2015		XXX	xxx	XXX	0	0	0	0	0	0
7. 2016		xxx	xxx	XXX	xxx	0	0	0	0	0
8. 2017		xxx	xxx	XXX	xxx	XXX	0	0	0	0
9. 2018		xxx	xxx	xxx	XXX	XXX	XXX	0	0	0
10. 2019		xxx	xxx	XXX	xxx		xxx	xxx	0	0
11. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2B

Ye	Years in NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END Years in Which 1 2 3 4 5 6 7 8										
Pre Were	emiums e Earned	1	2	3	4	5	6	7	8	9	10
	Losses	0011	0010	0040	0014	0045	0010	0047	0040	0040	0000
vvere	Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	2	2	1	0	0	0	0	0	0	0
2.	2011	4	1	1	1	0	0	0	0	0	0
3.	2012	XXX		1	0	0	0	0	0	0	0
4.	2013	XXX	XXX	4	1	1	1	0	0	0	0
5.	2014	XXX	XXX	XXX		1	0	0	0	0	0
6.	2015	XXX	XXX	XXX	XXX	1	0	0	0	0	0
7.	2016	XXX	XXX	XXX	XXX	xxx	1	0	0	0	0
8.	2017	xxx	XXX	XXX	XXX	xxx		1	0	0	0
9.	2018	XXX	1	0	0						
10.	2019	XXX	1	1							
11.	2020	XXX	2								

SECT	ON	3B
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							D				
Ye	ears in			CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT AN	ND ASSUMED A	T YEAR END		
Pre Were	in Which miums Earned	1	2	3	4	5	6	7	8	9	10
	Losses Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
1.	Prior	1	0	0	0	0	0	0	0	0	0
2.	2011	6	6	6	6	6	6	6	6	6	6
3.	2012	XXX				21	21	21	21	21	21
4.	2013	xxx	XXX				27			27	27
5.	2014	xxx	xxx	xxx	6	6	6	6	7	7	7
6.	2015	xxx	xxx	xxx	xxx	7	8	8	8	8	7
7.	2016	XXX	xxx	xxx	XXX	XXX	3		3	3	2
8.	2017	xxx	xxx	xxx	xxx	xxx	XXX		3	3	3
9.	2018	xxx.	xxx	xxx	xxx	xxx	xxx		3	3	3
10.	2019	XXX	xxx	xxx	xxx	XXX	XXX		XXX	2	2
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

Schedule P - Part 5T - Warranty - Section 1

ΝΟΝΕ

Schedule P - Part 5T - Warranty - Section 2

Schedule P - Part 5T - Warranty - Section 3 **NONE**

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL SECTION 1

Ye	ears in Which		CUMU	LATIVE PREM	/IUMS EARNE	ED DIRECT A	ND ASSUMED	AT YEAR EN	ID (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
N	Vere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2011	10	10	10	10	10	10	10	10	10	10	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX									0
6.	2015		XXX	XXX	XXX	1,548	1,548	1,548	1,548			0
7.	2016	XXX		XXX	XXX	XXX				4,346		0
8.	2017.	XXX	XXX	XXX	XXX	XXX	XXX	6,278				0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,207			0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,916	4,916	0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6.138
13.	Earned Premiums											, .
	(Sch P-Pt. 1)	10	0	0	492	1,548	4,346	6,278	6,119	4,916	6,138	XXX

SECTION 2 Years in Which CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED) 11 Current Year 2 10 Premiums 1 3 4 5 6 8 9 Were Earned and Losses Premiums Were Incurred 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 Earned 1 Prior. 0 0 0 0 0 0 0 0 .0 0 0 .0 2. 2011 1 .1 .1 . 1 .1 .1 .1 .1 .1 .1 3. 2012 .0 .0 .0 .0 .0 .0 .0 .0 ..0 .0 XXX 4. 2013 XXX ххх ..0 ..0 0 0 0 .0 .0 0 0 0 .457 .457 457 457 457 457 457 5. 2014 XXX XXX XXX XXX 1,438 1,438 .1,438 1,438 .0 6. 2015. XXX XXX ..1,438 .1,438 XXX 7. 2016 ххх XXX XXX XXX XXX. .4,040 4,040 4,040 .4,040 4,040 .0 XXX XXX XXX XXX XXX XXX XXX XXX .5.837 .5,837 5.837 5.920 0 8. 2017. XXX XXX 5,818 5,818 XXX XXX 5,818 9. 2018 XXX ..0 10. 2019 XXX. XXX XXX XXX. XXX XXX. XXX.... 4,697 4,697 .0 XXX. 11. 2020 XXX. XXX XXX. XXX XXX. XXX XXX XXX XXX. 5.938 5 938 5.938 ххх ххх ххх 12. Totals XXX XXX XXX XXX XXX XXX XXX 13. Earned Premiums (Sch P-Pt. 1) 1 0 0 457 1,438 4,040 5,920 5,736 4,697 5,938 XXX

SCHEDULE P - PART 6D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

SE	СТІ	ON	1

Ye	ears in Which		CUMU	LATIVE PREM	/IUMS EARNE	ED DIRECT A	ND ASSUMED) AT YEAR EN	1D (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
	Vere Earned											Year
	and Losses											Premiums
W	ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	(15)	0	3	0	0	0	1	0	0	0
2.	2011	3,843									3,932	0
3.	2012	XXX										0
4.	2013	XXX	XXX	1,968		2,031						0
5.	2014	XXX	XXX	XXX								0
6.	2015	XXX	XXX	XXX	XXX		4,613					0
7.	2016	XXX	XXX	XXX	XXX	XXX	6,972	7, 111		7,097	7,097	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX					0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	3,841	3,508	2,025	3,007	4,523	7,173	22,862	25,966	20,723	19,620	XXX

SECTION 2

Ye	ears in Which			CUMULATI	/E PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
	Vere Earned											Year
	and Losses											Premiums
N	/ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	(9)	12	(5)	1	0	0	0	0	0	0	0
2.	2011	2,710	2,786		2,772	2,772	2,772	2,773		2,773	2,773	0
3.	2012	XXX	2,469		2,533		2,534	2,534		2,534	2,534	0
4.	2013	XXX	XXX	1,446	1,486	1,491	1,492	1,492	1,492	1,492	1,492	0
5.	2014	XXX	XXX	XXX	2,161							0
6.	2015	XXX	XXX	XXX	XXX		3,445	3,431				0
7.	2016			XXX	XXX	XXX	5,717					0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX					0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10.	2019	XXX		XXX	XXX	XXX	XXX	XXX	XXX			0
11.	2020	XXX	XXX	XXX			XXX	XXX		XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sch P-Pt. 1)	2,702	2,556	1,484	2,210	3,380	5,862	21,032	24,515	19,342	18,245	XXX

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL SECTION 1

V	ears in Which		CUMU					O AT YEAR EN				11
	Premiums	1	2	3		5	6			9	10	Current
		1	2	3	4	5	0	1	0	9	10	
	Vere Earned											Year
	and Losses	0011	0040	0040	0014	0045	0040	0047	0040	0040	0000	Premiums
V	/ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2011	0	0	0	0	0	0	0	0	0	0	0
3.	2012	XXX	0	0	0	0	0	0	0	0	0	0
4.	2013	XXX	XXX	0	0	0	0	0	0	0	0	0
5.	2014	XXX	XXX	XXX	213							0
6.	2015	XXX	XXX	XXX	XXX							0
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8.	2017	XXX			XXX	XXX	XXX	1,487	1,471	1,471	1,471	0
9.	2018				XXX	XXX	XXX	XXX				0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,889	
12.	Totals				XXX		XXX	XXX				
13.	Earned											,
	Premiums											
	(Sch P-Pt. 1)	0	0	0	213	692	1,118	1,487	1,369	3,176	3,889	XXX

SECTION 2 Years in Which CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED) 11 Current Year 2 9 10 Premiums 1 3 4 5 6 8 Were Earned and Losses Premiums Were Incurred 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 Earned 1 Prior. 0 0 0 0 0 0 0 0 0 0 0 0 0 ..0 0 ..0 0 0 .0 2. .0 ..0 ..0 2011 3. 2012 XXX .0 .0 .0 ..0 .0 .0 .0 .0 ..0 .00 .207 ...0 ...0 4. 2013 XXX ххх ..0 ..0 0 .0 0 .0 0 .207 .207 207 207 207 207 5. XXX XXX 2014 XXX 6. 7. XXX. .681 .0 2015. XXX XXX .681 .681 .681 .681 .681 XXX 2016. XXX XXX XXX XXX XXX ..0 0 .0 .0 0 .0 XXX XXX XXX XXX XXX XXX XXX XXX 1.463 8. 1.479 1,463 1.463 0 2017. XXX XXX XXX .xxx .1,384 1,384 1,384 9. 2018 XXX ..0 10. 2019 XXX. XXX. XXX XXX XXX XXX XXX. .xxx.... .3,176 3,176 .0 11. 2020 XXX. XXX XXX. XXX XXX. XXX XXX XXX XXX. 3,883 3 883 ххх ххх ххх 3.883 12. Totals XXX XXX XXX XXX XXX XXX XXX 13. Earned Premiums (Sch P-Pt. 1) 0 0 0 207 681 1,110 1,479 1,368 3,176 3,883 XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE SECTION 1A

					U							
Ye	ears in Which		CUMU	LATIVE PREM	JIUMS EARNE	ED DIRECT A	ND ASSUMED) AT YEAR EN	D (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
;	and Losses											Premiums
N	/ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2011											0
3.	2012	XXX										0
4.	2013		XXX	9,430	9,430		9,430	9,430	9,430	9,430	9,430	0
5.	2014	XXX	XXX		11,788		11,788	11,788		11,788		0
6.	2015	XXX	XXX	XXX	XXX							0
7.	2016		XXX	XXX		XXX	0	0	0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX					0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.30,098	0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13.	Earned											,
	Premiums											
	(Sch P-Pt. 1)	5,690	7,470	9,430	11,788	13,513	15,535	18,382	20,794	30,098	44,346	XXX

SECTION 2A

Ye	ears in Which			CUMULATI	/E PREMIUM	S EARNED C	EDED AT YEA	R END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
W	ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2011											0
3.	2012	XXX				5,872	5,872			5,872		0
4.	2013	XXX	XXX									0
5.	2014		XXX	XXX				9,133				0
6.	2015	XXX	XXX	XXX	XXX							0
7.	2016	XXX		XXX	XXX	XXX	0	0	0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	14,430	14,478	14,478	14,478	0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Totals	XXX	XXX		XXX	XXX	XXX					
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	4,390	5,872	7,384	9,133	10,359	11,978	14,430	16,421	23,833	36,175	XXX

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE SECTION 1B

Ye	ears in Which		CUMU	LATIVE PREM	/IUMS EARN	ED DIRECT A	ND ASSUMED	O AT YEAR EN	D (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
	Vere Earned											Year
	and Losses											Premiums
N	/ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2011		2,098				2,098	2,098	2,098	2,098		0
3.	2012	XXX	1,951	1,951	1,951	1,951	1,951	1,951	1,951	1,951	1,951	0
4.	2013	XXX	XXX		2,000	2,000	2,000	2,000	2,000	2,000	2,000	0
5.	2014	XXX		XXX	2,004	2,004	2,004	2,004	2,004	2,004		0
6.	2015			XXX								0
7.	2016	XXX	XXX	XXX		XXX	0	0	0	0	0	0
8.	2017	XXX		XXX			XXX	2,318	2,319	2,319	2,319	0
9.	2018					XXX	XXX	XXX				0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,623		0
11.	2020	XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12.	Totals		XXX		XXX	XXX	XXX	XXX		XXX		
13.	Earned											,
	Premiums											
	(Sch P-Pt. 1)	2,098	1,951	2,000	2,004	2,205	2,165	2,318	2,819	2,623	3,249	XXX

SECTION 2B

Ye	ears in Which			CUMULATI	E PREMIUM	S EARNED CI	EDED AT YEA	AR END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
	Vere Earned											Year
	and Losses											Premiums
N	ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2011	1,555	1,555	1,555	1,555	1,555	1,555	1,555		1,555		0
3.	2012	XXX	1,457	1,457	1,457	1,457	1,457	1,457	1,457	1,457	1,457	0
4.	2013	XXX	XXX	1,484	1,484	1,484	1,484	1,484	1,484	1,484	1,484	0
5.	2014	XXX		XXX	1,483	1,483		1,483				0
6.	2015	XXX	XXX	XXX	XXX	1,613		1,613		1,613		0
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	1,728		1,730		0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10.	2019		XXX	XXX	XXX	XXX			XXX			0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		2,460
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,460
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	1,555	1,457	1,484	1,483	1,613	1,628	1,728	2,091	1,973	2,460	XXX

SCHEDULE P - PART 6M - INTERNATIONAL SECTION 1

					•							
Ye	ears in Which		CUML	JLATIVE PREM	/IUMS EARNI	ED DIRECT A	ND ASSUME	D AT YEAR EN	ND (\$000 OM	ITTED)		11
V	Premiums Vere Earned and Losses	1	2	3	4	5	6	7	8	9	10	Current Year Premiums
W	/ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior											
2.	2011											
3.	2012	XXX										
4.	2013	XXX	XXX	·····								
5.	2014	XXX	XXX									
6.	2015	XXX	XXX		XXI							
7.	2016	XXX	XXX			X						
8.	2017	XXX	XXX		XX.	У						
9.	2018	XXX	XXX		XXX.	×	X					
10.	2019	XXX	XXX	xxx		XXX	XXX	XXX	XXX			
11.	2020	XXX	XXX	XXX	XXX		XXX					
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)											XXX

SECTION 2

Y	ears in Which			CUMULATI	/E PREMIUM	IS EARNED C	EDED AT YE	AR END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
	Vere Earned and Losses											Year Premiums
V	Vere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior											
2.	2011											
3.	2012	XXX										
4.	2013	XXX	XXX									
5.	2014	XXX	XXX									
6.	2015	XXX	XXX		XX							
7.	2016		XXX		XX	X						
8.	2017	XXX	XXX		XX.	У						
9.	2018	XXX			XXX	×	XX					
10.	2019	XXX	XXX			XXX	XXX	XXX	XXX			
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX		
12.	Totals				XXX			XXX	XXX	XXX	XXX	
13.	Earned Premiums (Sch P-Pt. 1)											xxx

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1 **NONE**

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2 **NONE**

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1 **NONE**

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2 **NONE**

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE SECTION 1A

Ye	ears in Which		CUMUL	ATIVE PREM	IUMS EARNE	ED DIRECT A	ND ASSUMED) AT YEAR EN	D (\$000 OMI	TTED)		11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
	Vere Earned											Year
	and Losses											Premiums
N	Vere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2011	2,081		2,081	2,081	2,081	2,081	2,081	2,081	2,081	2,081	0
3.	2012	XXX		2,786		2,786	2,786	2,786		2,786	2,786	0
4.	2013	XXX	XXX									0
5.	2014		XXX	XXX						4,346		0
6.	2015	XXX	XXX	XXX	XXX	4,416	4,416	4,416	4,416	4,416	4,416	0
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX					0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		5,424	0
11.	2020		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,610	6,610
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,610
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	2,081	2,786	3,306	4,346	4,416	4,487	4,573	4,606	5,424	6,610	XXX

SECTION 2A Years in Which CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED) 11 Current Year 2 Premiums 1 3 4 5 6 8 9 10 Were Earned and Losses Premiums Were Incurred 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 Earned 1 Prior. 0 0 0 0 0 0 0 0 0 0 0 .1,468 1,468 1,468 1,468 1,468 1,468 1,468 1,468 1,468 1,468 .0 2. 2011 3. 2012 .1,970 .1,970 1,970 .1,970 .1,970 1,970 .1,970 1,970 .1,970 .0 XXX. .2,330 4. 2013 XXX XXX .2,330 .2.330 2.330 2.330 2.330 2.330 2.330 0 .3,062 .3,062 3,062 3,062 3,062 0 3.062 5. ххх XXX 2014 XXX .3, 108 .0 6. 2015. XXX XXX. XXX .3, 108 .3,108 3,108 3,108 3,108 XXX 7. 2016 ххх XXX XXX XXX XXX. ..0 0 ..0 .0 0 .0 3,231 XXX XXX XXX XXX 3.228 3.231 3.231 0 8. 2017. XXX XXX XXX XXX XXX XXX XXX XXX .3,254 3,254 3,254 9. 2018 XXX ..0 10. 2019 XXX XXX XXX XXX. XXX XXX. XXX.... 3,861 3,861 0. XXX. 11. 2020 XXX XXX XXX. XXX XXX. XXX XXX XXX XXX. 4,679 4.679 ххх ххх 4.679 12. Totals XXX XXX XXX XXX XXX XXX XXX XXX 13. Earned Premiums (Sch P-Pt. 1) 1,468 1,970 2,330 3,062 3,108 3,176 3,228 3,258 3,861 4,679 XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE SECTION 1B

			CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)													
Ye	ears in Which		CUMU	LATIVE PREM	/IUMS EARN	ED DIRECT A	ND ASSUMED	D AT YEAR EN	ND (\$000 OMI	TTED)		11				
	Premiums	1	2	3	4	5	6	7	8	9	10	Current				
V	Vere Earned											Year				
	and Losses											Premiums				
V	ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned				
1.	Prior	0	0	0	0	0	0	0	0	0	0	0				
2.	2011	678	678	678	678	678	678	678	678	678	678	0				
3.	2012	XXX										0				
4.	2013	XXX	XXX									0				
5.	2014	XXX	XXX	XXX								0				
6.	2015.	XXX	XXX	XXX	XXX	.949		.949	.949		.949	0				
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0				
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX	1.003	1.003	1.003		0				
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,170	1,170	1, 170	0				
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,482	1,482	0				
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2.063	2.063				
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,063				
13.	Earned															
10.	Premiums															
	(Sch P-Pt. 1)	678	865	991	984	949	968	1,003	1,170	1,482	2,063	XXX				

SECTION 2B

Ye	ears in Which			CUMULATI	VE PREMIUM	S EARNED C	EDED AT YEA	AR END (\$000	OMITTED)			11
	Premiums	1	2	3	4	5	6	7	8	9	10	Current
V	Vere Earned											Year
	and Losses											Premiums
W	ere Incurred	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	Earned
1.	Prior	0	0	0	0	0	0	0	0	0	0	0
2.	2011											0
3.	2012	XXX			622	622						0
4.	2013	XXX	XXX									0
5.	2014		XXX	XXX								0
6.	2015	XXX	XXX	XXX	XXX	671	671	671	671	671	671	0
7.	2016	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8.	2017	XXX	XXX	XXX	XXX	XXX	XXX		706	706	706	0
9.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0
10.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,230	1,230	0
11.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,633	1,633
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	1,633
13.	Earned											
	Premiums											
	(Sch P-Pt. 1)	487	622	706	698	671	693	706	867	1,230	1,633	XXX

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts **NONE**

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts **NONE**

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts **NONE**

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts **NONE**

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Interrogatories

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

·			-		States and T					
		1	Gross Premiu Policy and Men	nbership Fees,	4	5	6	7	8	9 Direct Premiums
			Less Return F Premiums on Tak	Policies Not	Dividends Paid or	Direct			Finance and	Written for Federal
		Active	2 Direct	3 Direct	Credited to Policyholders	Losses Paid	Direct	Direct	Service Charges Not	Purchasing Groups
		Status	Premiums	Premiums	on Direct	(Deducting	Losses	Losses	Included in	(Included in
1.	States, Etc. AlabamaAL	(a) L	Written	Earned 1,382,441	Business 0	Salvage) 778,529	Incurred 1,296,080	Unpaid 1,942,624	Premiums 	Column 2) 0
2.	Alaska	L	, ,		0				00, 120	0
3.	ArizonaAZ	L	3,098,499	2,767,362	0	1,183,916	2,847,575	2,799,815		0
4.	ArkansasAR	L			0				0	0
5.	CaliforniaCA	E		8,767,181	0	2,182,680	5,160,018	8,404,992	0	0
6. 7.	ColoradoCO ConnecticutCT	L.			0					0
8.	DelawareDE	L		2, 199,512	0 0					0
9.	District of Columbia DC	L		0	0			229	0	0
10.	FloridaFL	L			0		5,814,365			0
11.	GeorgiaGA	L		13,562,188	0	6,182,856	10,092,525	8,531,404		0
12.		L			0	0			0	0
13.	IdahoID	L		450,215	0	70,392	(209,383)		0	0
14.	IllinoisIL	L		3, 191,270	0		1,666,935	2,665,522	2,166	0
15. 16.	IndianaIN	L		1,275,448 1,821,196	0 0	312,878 237,411		901,034		0
10.	KansasKS			1,821,196	0		1, 187,728 	1,046,495	0 0	0
17.	KentuckyKY	E			0					0
19.	LouisianaLA	L		1,105,911	0				0	0
20.	Maine ME	L		0	0	0	0	0	0	0
21.	MarylandMD	L		1,918,556	0		2,351,382	3,022,554		0
22.	Massachusetts MA	L		2, 193,259	0		1,427,666	2,719,692		0
23.	MichiganMI	L			0	5,708,721	12,710,708	29,667,932	3,757,407	0
24.	MinnesotaMN	L			0				0	0
25. 26.	MississippiMS MissouriMO	L			0	(8,610) 291,044	(18,239)		80	0
20. 27.	MontanaMT			2,770,663 	0 0		1,546,320 15,113	15,113	0 0	0
28.	NebraskaNE	L			0		(166,085)		0	0
29.	NevadaNV	L		1,695,886	0			1,434,983		0
30.	New HampshireNH				0		(368,648)		0	0
31.	New JerseyNJ	L		8,124,613	0	5,055,912	8,022,367			0
32.	New MexicoNM	L			0	240,742	(263,094)	2, 107, 289	0	0
33.	New YorkNY	L		18,251,801	0	7,561,111	10,939,696	42,181,698		0
34.	North CarolinaNC	L		2,581,433	0		1,368,992	1,362,299	1,634	0
35. 36.	North DakotaND OhioOH	L	, .		0 0	0 		63,853	0 320	0 0
30. 37.	OklahomaOK	E L			0			1,583,896		0
38.	OregonOR	⊢ 			0				0	0
39.	PennsylvaniaPA	L			0	4,553,367	8,199,720	9,713,987	7, 150	0
40.	Rhode IslandRI	L	2,085,097	2,091,979	0			1,995,055		0
41.	South CarolinaSC	L		1, 138, 112	0		1,048,081		7,585	0
42.	South DakotaSD	L			0	0			0	0
43.	TennesseeTN	L			0					0
44. 45.	TexasTX UtahUT	L	, ,	13, 126, 575	0 0	4,191,280	6,968,877	13,049,816	5,830 0	0 0
46.	VermontVT	L	556,915 	607,927 	0	80,815 0		219,108 11,714	0	0
40.	VirginiaVA	ь. L		3.794.988	0	1.247.779	1,912,521			0 N
48.	WashingtonWA	L			0					0
49.	West VirginiaWV	L		1,517,890	0			1, 155, 409	0	0
50.	WisconsinWI	L	, ,	2,207,350	0		1,032,130		0	0
51.	WyomingWY	L			0	0			0	0
52.	American SamoaAS	N		0	0	0	0	0	0	0
53. 54.	GuamGU Puerto RicoPR	N N		0	0	0	0	0	0 0	0
54. 55.	U.S. Virgin IslandsVI	N N		0 0	0 .0	0 0	0 .0	0 0	0 0	U
56.	Northern Mariana IslandsMP	N	0	0		0	0	0	0	0
57.	Canada CAN	N	0	0	0	0	0	0	0	0
58.	Aggregate other alien OT	XXX	0	0	0	0	0	0	0	0
59.	Totals	XXX	183,964,023	163,705,260	0	53,527,993	95,776,719	171,810,034	4,361,722	0
500	DETAILS OF WRITE-INS									
58001. 58002.		XXX XXX								
58002. 58003.		XXX								
	Summary of remaining write-ins for Line 58 from									
58999	overflow page Totals (Lines 58001 through	XXX	0	0	0	0	0	0	0	0
	58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0
(-) A -4	ve Status Counts:	////	5	0	5	5	5	5	. 0	0

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG...

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

.......50 R - Registered - Non-domiciled RRGs....

0

.6

Q - Qualified - Qualified or accredited reinsurer.0

N - None of the above - Not allowed to write business in the state

D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile. (b) Explanation of basis of allocation of premiums by states, etc.

Premiums are allocated to jurisdication based on location of risk

...1

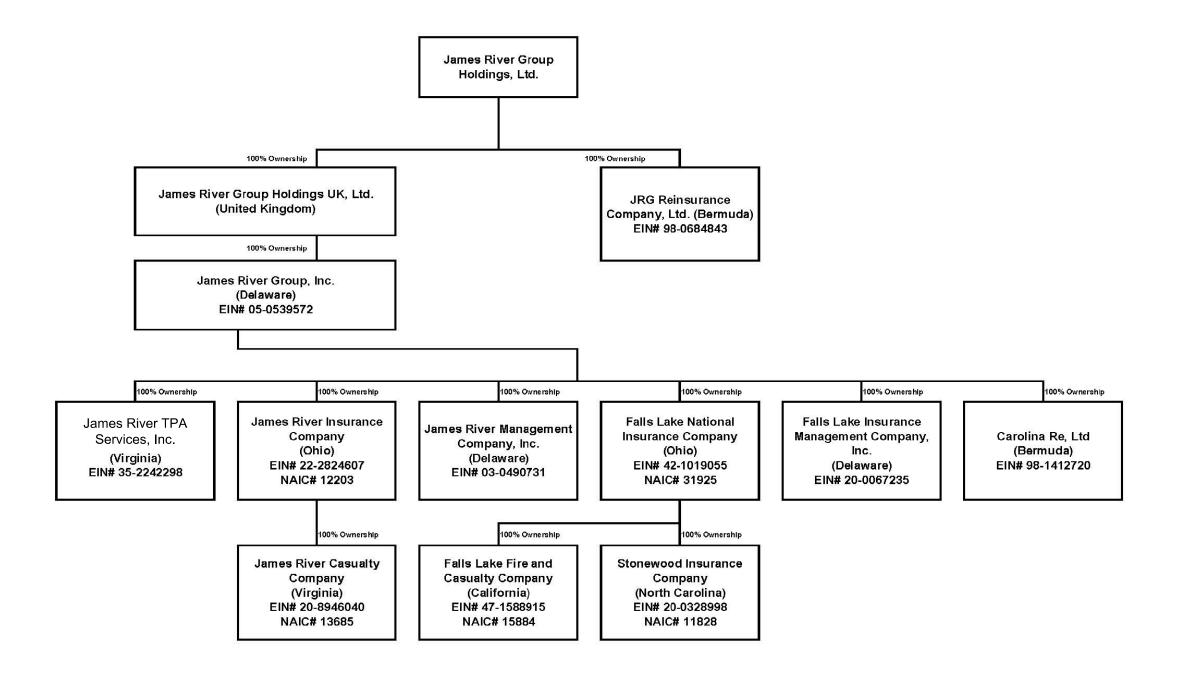
0

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		/ incodicd by (States and Territ	Direct Bus	iness Only		
	States Etc.	1 Life (Group and Individual)	2 Annuities (Group and	3 Disability Income (Group and	4 Long-Term Care (Group and	5 Deposit-Type Contracts	6 Totals
1.	States, Etc. Alabama	maiviaual)	Individual)	Individual)	Individual)	CONTRACTS	Totals
1. 2.	Alabama AL Alaska AK						
3.	Arizona						
4.	Arkansas AR						
5.	California CA						
6.	Colorado CO						
7.	Connecticut CT						
8.	Delaware DE						
9.	District of Columbia DC						
10.	Florida FL						
11.	Georgia GA						
12.	Hawaii HI						
13.	Idaho ID						
14.	Illinois IL						
15.	Indiana IN						
16.	lowa IA						
17. 18.	Kansas KS Kentucky KY						
18.	Louisiana						
20.	Maine ME						
21.	Maryland MD						
22.	Massachusetts MA						
23.	Michigan MI						
24.	Minnesota MN						
25.	Mississippi MS						
26.	Missouri MO						
27.	Montana						
28.	Nebraska						
29.	NevadaN						
30.	New Hampshire NH						
31.	New Jersey John NJ						
32.	New Mexico NM						
33. 34.	New York NY North Carolina NC						
34. 35.	North Dakota						
36.	Ohio OH						
37.	Oklahoma OK						
38.	Oregon OR						
39.	Pennsylvania PA						
40.	Rhode Island RI						
41.	South Carolina SC						
42.	South Dakota SD						
43.	Tennessee TN						
44.	Texas TX						
45.	Utah UT						
46.	Vermont						
47.	Virginia VA						
48.	Washington WA						
49. 50	West Virginia WV						
50. 51.	Wisconsin WI Wyoming WY						
51. 52.	American Samoa AS						
52.	Guam						
53. 54.	Puerto Rico PR						
55.	U.S. Virgin Islands						
56.	Northern Mariana Islands MP						
57.	Canada CAI	N					
58.	Aggregate Other Alien OT						
59.	Total						



SCHEDULE Y PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Туре	lf			· ·
											of Control	Control			· ·
											(Ownership,	is		ls an	· ·
						Name of Securities			Relation-		Board,	Owner-		SCA	· ·
						Exchange		Domi-	ship		Management,	ship		Filing	'
		NAIC				if Publicly Traded	Names of	ciliarv	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0000			98-0585280	0	1620459	NASDAQ	James River Group Holdings, Ltd	BMU	UIP			0.000		N	0
				0	0		James River Group Holdings UK, Ltd	GBR	UIP	James River Group Holdings, Ltd	Ownership	100.000	James River Group Holdings, Ltd	N	0
			05-0539572	0	0		James River Group, Inc	DE	UDP	James River Group Holdings UK, Ltd	Ownership		James River Group Holdings, Ltd	N	Ō
			98-0684843	0	0		JRG Reinsurance Company, Ltd	BMU	IA	James River Group Holdings, Ltd	Ownership		James River Group Holdings, Ltd	N.	0
			35-2242298	0	0		James River TPA Services, Inc	VA	NIA	James River Group, Inc	Ownership		James River Group Holdings, Ltd	N	0
	James River Insurance Group		22-2824607	0	0		James River Insurance Company	0H	IA	James River Group, Inc	Ownership		James River Group Holdings, Ltd	N	0
			03-0490731	0	0		James River Management Company, Inc	DE	NIA	James River Group, Inc	Ownership		James River Group Holdings, Ltd	N	0
	James River Insurance Group		20-8946040	0	0		James River Casualty Company	VA	IA	James River Insurance Company	Ownership		James River Group Holdings, Ltd	N	0
	James River Insurance Group		42-1019055	0	0		Falls Lake National Insurance Company	0H	RE	James River Group, Inc	Ownership		James River Group Holdings, Ltd	N	0
							Falls Lake Insurance Management Company, Inc								
			20-0067235	0	0			DE		James River Group, Inc	Ownership		James River Group Holdings, Ltd	N	0
	James River Insurance Group		47-1588915	0	0		Falls Lake Fire and Casualty Company	CA		Falls Lake National Insurance Company	Ownership		James River Group Holdings, Ltd	N	0
	James River Insurance Group		20-0328998	0	0		Stonewood Insurance Company	NC		Falls Lake National Insurance Company	Ownership		James River Group Holdings, Ltd	N	0
			98-1412720	0	0		Carolina Re, Ltd	BMU	IA	James River Group Inc.	Ownership		James River Group Holdings, Ltd	N	0
•••••								•••••							
														. [
6		1							1			1		1	

Asterisk	Explanation	

SCHEDULE Y PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
						Income/ (Disbursements)						
					Purchases, Sales	Incurred in						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
					Loans, Securities,	Guarantees or		(Disbursements)		Activity Not in the		(Payable) on
NAIC					Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or
Company	ID	Names of Insurers and Parent,	Shareholder	Capital	Mortgage Loans or	the Benefit of any	Agreements and	Reinsurance		the Insurer's	T () (Reserve Credit
Code	Number	Subsidiaries or Affiliates	Dividends	Contributions	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
	05-0539572	James River Group, Inc.	0	0	3,485,906	0	0					
	98-0684843	JRG Reinsurance Company, Ltd.	0	0	0	0	0	(32,633,909)			(32,633,909)	
	98-1412720	Carolina Re, Ltd	0	0	0	0						
	22-2824607	James River Insurance Company	0	0	1,514,094	0			*			
	03-0490731	James River Management Company, Inc.	0	0	0	0		0				0
	20-8946040	James River Casualty Company	0	0	0	0	(951,536)	(1,479,479)	*	0	(2,431,015)	(10,570,134)
	42-1019055	Falls Lake National Insurance Company	0	0	(5,000,000)	0	(8,012,169)		*	(89,100)	(12,291,072)	(25,310,691)
	20-0067235	Falls Lake Insurance Management Company, .	0	0	0	0	24,431,646	0			24,431,646	0
		Stonewood Insurance Company	0	0	0	0	(13,212,411)		*		(17,901,968)	(31,894,536)
15884	47-1588915	Falls Lake Fire and Casualty Company	0	0	0	0	(3,207,066)		*		(2,492,933)	(24,044,491)
9999999 Cor	ntrol Totals		0	0	0	0	0	0	XXX	0	0	0

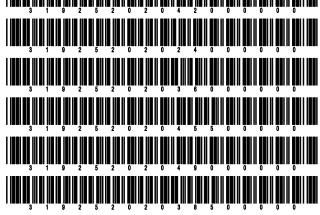
ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** 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.

	MARCH FILING	Responses
1.	Will an actuarial opinion be filed by March 1?	VES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	
2. 3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	
	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	
4.	APRIL FILING	YES
-	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	1/50
5. 6.	Will Management's Discussion and Analysis be filed by April 1?	
0. 7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	
7.	Win the Supplemental investment Kisk interrogationes be need by Apin 12 FILING	TES
0	Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	VEO
8.		
9.	JUNE FILING Will an audited financial report be filed by June 1?	VES
9. 10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES YES
10.	win Accountant's Letter of Qualifications be ned with the state of donicite and electronicany with the NAIC by June 1?	TES
	AUGUST FILING	
11.	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?	YES
	owing supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business or 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	
	n in the event that your company does not transact the type of business for which the special report intest be med, your response of Not for the printed below. If the supplement is required of your company but is not being filed f	
	VATION and provide an explanation following the interrogatory guestions.	
	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	
23. 24.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	
24. 25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed	NU
25.	electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed	
	electronically with the NAIC by March 1?	NO
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the	
	NAIC by March 12	NO
28.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile	
	and the NAIC by March 1?	NO
	APRIL FILING	
29.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	
30.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	
31. 32.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	
33.	Will the coppletential relate of a standard and the state of a standard and the state of and the state of domicile and the NAIC by Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by	110
00.	April 12	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	
35.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC	
	by April 1?	NO
36.	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the	
07	state of domicile and the NAIC by April 1?	
37.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
38.	AUGUST FILING Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
50.	Win waragements Report of methal Control Over Pinancial Reporting be ned with the state of donicile by August 11	NO
10	The data for this supplement is not required to be filed.	
12. 13.	The data for this supplement is not required to be filed.	
14.	The data for this supplement is not required to be filed.	
14.	The data for this supplement is not required to be filed.	
16.	The data for this supplement is not required to be filed.	
17.	The data for this supplement is not required to be filed.	
17.	The data for this supplement is not required to be filed.	
10.		
22.	The data for this supplement is not required to be filed.	
23.	The data for this supplement is not required to be filed.	
23.	The data for this supplement is not required to be filed.	
25.	The data for this supplement is not required to be filed.	
26.	The data for this supplement is not required to be filed.	
27.	The data for this supplement is not required to be filed.	
28.	The data for this supplement is not required to be filed.	
29.	The data for this supplement is not required to be filed.	
30.	The data for this supplement is not required to be filed.	
31.	The data for this supplement is not required to be filed.	
32.	The data for this supplement is not required to be filed.	
33.	The data for this supplement is not required to be filed.	
34	The data for this supplement is not required to be filed.	
35.	The data for this supplement is not required to be filed.	
36.	The data for this supplement is not required to be filed.	
37.	The data for this supplement is not required to be filed.	
38.	The data for this supplement is not required to be filed.	
	Bar Codes:	
12.	SIS Stockholder Information Supplement [Document Identifier 420]	
	SIS Stockholder Information Supplement [Document Identifier 420]	
13.	Financial Guaranty Insurance Exhibit [Document Identifier 240]	
15.		
		0 0 0
14.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
15.	Supplement A to Schedule T [Document Identifier 455]	

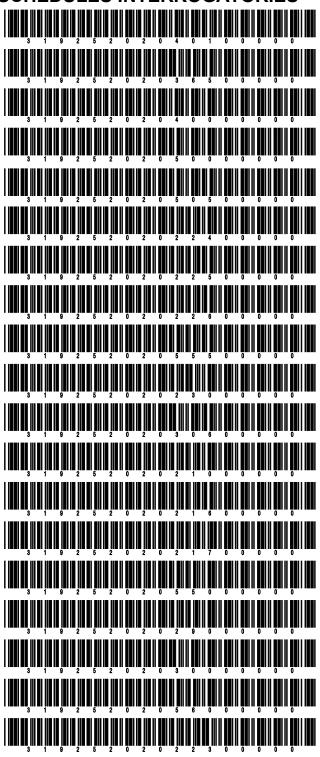
16. Trusteed Surplus Statement [Document Identifier 490]

17. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 18. Reinsurance Summary Supplemental Filing [Document Identifier 401]
- 19. Medicare Part D Coverage Supplement [Document Identifier 365]
- 22. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]
- 23. Bail Bond Supplement [Document Identifier 500]
- 24. Director and Officer Insurance Coverage Supplement [Document Identifier 505]
- 25. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 26. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 27. Relief from the Requirements for Audit Committees [Document Identifier 226]
- Reinsurance Counterparty Reporting Exception Asbestos and Pollution Contracts [Document Identifier 555]
- 29. Credit Insurance Experience Exhibit [Document Identifier 230]
- 30. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 31. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 32. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]
- 35. Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 290]
- Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 300]
- 37. Private Flood Insurance Supplement [Document Identifier 560]
- Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company **OVERFLOW PAGE FOR WRITE-INS**

Addition	al Write-ins for Liabilities Line 25		
		1	2
		Current Year	Prior Year
2504.	Other liabilities		0
2505.	Deferred ceding commission	0	
2597.	Summary of remaining write-ins for Line 25 from overflow page	205,952	40,659

Addition	al Write-ins for Underwriting and Investment Exhibit Part 3 Line 24				
		1	2	3	4
		Loss Adjustment	Other Underwriting	Investment	
		Expenses	Expenses	Expenses	Total
2404.	Outside Consulting				
2405.	Service Fee	(194,666)	0		(194,666)
2497.	Summary of remaining write-ins for Line 24 from overflow page	(97,604)	295.121	22.459	219,976

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SUMMARY INVESTMENT SCHEDUI F

	SUMMARY INVI			ILDOL	Admitted Asset	s as Poported	
		Gross Investm	ent Holdings		in the Annua		
		1	2 Percentage of	3	4 Securities Lending Reinvested Collateral	5 Total (Col. 3 + 4)	6 Percentage of Column 5
	Investment Categories	Amount	Column 1 Line 13	Amount	Amount	Amount	Line 13
1.	Long-Term Bonds (Schedule D, Part 1):						
	1.01 U.S. governments	1,657,005		1,657,005	0	1,657,005	
	1.02 All other governments				0	0	0.000
	1.03 U.S. states, territories and possessions, etc. guaranteed			0	0	0	0.000
	1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed						
	1.05 U.S. special revenue and special assessment obligations, etc. non- guaranteed						
	1.06 Industrial and miscellaneous		0.125		0		0.125
	1.07 Hybrid securities	0	0.000	0	0	0	0.000
	1.08 Parent, subsidiaries and affiliates	0	0.000	0	0	0	0.000
	1.09 SVO identified funds	0	0.000			0	0.000
	1.10 Unaffiliated Bank loans	0	0.000			0	0.000
	1.11 Total long-term bonds	4,357,015				4,357,015	
2.	Preferred stocks (Schedule D, Part 2, Section 1):						
	2.01 Industrial and miscellaneous (Unaffiliated)	215,400	0.173		0		0.173
	2.02 Parent, subsidiaries and affiliates						
	2.03 Total preferred stocks						
3.	Common stocks (Schedule D, Part 2, Section 2):			·····			
0.	3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)	0	0.000	0	0	0	0 000
	3.02 Industrial and miscellaneous Other (Unaffiliated)						
	3.03 Parent, subsidiaries and affiliates Publicly traded						
	3.04 Parent, subsidiaries and affiliates Publicly Iraded						
	3.05 Mutual funds		0.000	0		0	0.000
				0			
	3.07 Closed-end funds			0		0	
	3.08 Total common stocks			94,354,687	0	94,354,687	
4.	Mortgage loans (Schedule B):						
	4.01 Farm mortgages					0	
	4.02 Residential mortgages				0		0.000
	4.03 Commercial mortgages	0	0.000	0	0	0	0.000
	4.04 Mezzanine real estate loans		0.000	0	0	0	0.000
	4.05 Total valuation allowance	0	0.000	0	0	0	0.000
	4.06 Total mortgage loans	0	0.000	0	0	0	0.000
5.	Real estate (Schedule A):						
	5.01 Properties occupied by company	0	0.000	0	0	0	0.000
	5.02 Properties held for production of income	0	0.000	0	0	0	0.000
	5.03 Properties held for sale		0.000	0	0	0	0.000
	5.04 Total real estate		0.000	0	0	0	0.000
6.	Cash, cash equivalents and short-term investments:						
	6.01 Cash (Schedule E, Part 1)				0		
	6.02 Cash equivalents (Schedule E, Part 2)			3,967,665	0		
	6.03 Short-term investments (Schedule DA)		.0.201		0		
	6.04 Total cash, cash equivalents and short-term investments				0		
7.	Contract loans				0		
7. 8.	Derivatives (Schedule DB)		0.000		0		0.000
o. 9.	Other invested assets (Schedule BA)		0.000	0 0	0		0.000
			0.000	0	0		
10.	Receivables for securities						0.000
11.	Securities Lending (Schedule DL, Part 1)		0.000	0	XXX		XXX
12.	Other invested assets (Page 2, Line 11)		0.000	0	0		0.000
13.	Total invested assets	124,304,471	100.000	124,304,471	0	124,304,471	100.000

Schedule A - Verification - Real Estate

ΝΟΝΕ

Schedule B - Verification - Mortgage Loans

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year
2.	Cost of acquired:
	2.1 Actual cost at time of acquisition (Part 2, Column 8)
	2.2 Additional investment made after acquisition (Part 2, Column 9)
3.	Capitalized deferred interest and other:
	3.1 Totals, Part 1, Column 16
	3.2 Totals, Part 3, Column 12
4.	Accrual of discount
5.	Unrealized valuation increase (decrease):
	5.1 Totals, Part 1, Column 13
	5.2 Totals, Part 3, Column 9
6.	Total gain (loss) on disposals, Part 3, Column 19
7.	Deduct amounts received on disposals, Part 3, Cordmn 16
8.	Deduct amortization of premium and depreciation
9.	Total foreign exchange change in book/adjusted carrying value:
	9.1 Totals, Part 1, Column 17
	9.2 Totals, Part 3, Column 14
10.	Deduct current year's other than temporary impairment recognized:
	10.1 Totals, Part 1, Column 15
	10.2 Totals, Part 3, Column 11
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)
12.	Deduct total nonadmitted amounts
13.	Statement value at end of current period (Line 11 minus Line 12)

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

		00 100 005
1.	Book/adjusted carrying value, December 31 of prior year	
2.	Cost of bonds and stocks acquired, Part 3, Column 7	
3.	Accrual of discount	3, 124
4.	Unrealized valuation increase (decrease):	
	4.1. Part 1, Column 120	
	4.2. Part 2, Section 1, Column 15	
	4.3. Part 2, Section 2, Column 13	
	4.4. Part 4, Column 11	
5.	Total gain (loss) on disposals, Part 4, Column 19	(3,963)
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	3,591,381
7.	Deduct amortization of premium	
8.	Total foreign exchange change in book/adjusted carrying value:	
	8.1. Part 1, Column 150	
	8.2. Part 2, Section 1, Column 190	
	8.3. Part 2, Section 2, Column 160	
	8.4. Part 4, Column 150	0
9.	Deduct current year's other than temporary impairment recognized:	
	9.1. Part 1, Column 140	
	9.2. Part 2, Section 1, Column 170	
	9.3. Part 2, Section 2, Column 140	
	9.4. Part 4, Column 130	0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	
12.	Deduct total nonadmitted amounts	0
13.	Statement value at end of current period (Line 11 minus Line 12)	

SCHEDULE D - SUMMARY BY COUNTRY Long-Term Bonds and Stocks OWNED December 31 of Current Year

		Long-Term Bonds and Sto	ocks OWNED December 3	1 of Current Year		
			1 Deels/Adjusted	2	3	4
Π	escriptio	on	Book/Adjusted Carrving Value	Fair Value	Actual Cost	Par Value of Bonds
BONDS		United States				1.660.000
Governments	2.	Canada				0
(Including all obligations guaranteed	3.	Other Countries	0	0	0	0
by governments)	-	Totals	1,657,005	1,680,416	1,647,797	1,660,000
U.S. States, Territories and Possessions				, ,	, , -	, ,
(Direct and guaranteed)	5.	Totals	0	0	0	0
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6.	Totals	149,271	159,485	148,701	150,000
U.S. Special Revenue and Special Assessment Obligations and all Non- Guaranteed Obligations of Agencies and Authorities of Governments and			0.005.404	0.004.040	0 554 507	0.005.000
their Political Subdivisions		Totals	2,395,121	2,624,313	2,551,527	2,225,220
Industrial and Miscellaneous, SVO	8.	United States				
Identified Funds, Unaffiliated Bank	9.	Canada		0	0	0
Loans and Hybrid Securities (unaffiliated)	10.	Other Countries	÷	171.405	•	155,000
(, , , , , , , , , , , , , , , , , , ,	11.	Totals	155,618	171,405	156,163	155,000
Parent, Subsidiaries and Affiliates	12.	Totals	0	0	0	0
	13.	Total Bonds	4,357,015	4,635,619	4,504,188	4,190,220
PREFERRED STOCKS	14.	United States				
Industrial and Miscellaneous (unaffiliated)	15.	Canada		0	0	
(unannated)	16.	Other Countries	0	0	100 705	
	17.	Totals	215,400	215,400	199,725	
Parent, Subsidiaries and Affiliates	18.	Totals	015 400	015 400	v	
	19.	Total Preferred Stocks		215,400	199,725	
COMMON STOCKS	20.	United States			0	
Industrial and Miscellaneous (unaffiliated)	21.	Canada			0	
(unumiated)	22.	Other Countries	0	0	0	
Derent Cubaidiarias and Affiliates	23.	Totals	94.354.687	94.354.687	73,262,851	
Parent, Subsidiaries and Affiliates	24.	Totals	- , ,		, ,	
	25.	Total Common Stocks	94,354,687	94,354,687	73,262,851	
	26.	Total Stocks	94,570,087 98,927,102	94,570,087	73,462,576	
	27.	Total Bonds and Stocks	98,927,102	99,205,706	77,966,764	

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

		2	3		5			8		10	11	12
NAIC Designation	' 1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	' Total Current Year	Col. 7 as a % of Line 11.7	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed (a)
1. U.S. Governments	1 1041 01 2000	initiagine reale	Through to touro	rinough zo routo	01012010010	Bato	Total outfold Fou	Enterna		1 1101 1 000		1 10000 (0)
1.1 NAIC 1			0	0	0	XXX	1,906,998				1,906,998	
1.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
1.3 NAIC 3	0	0	0	0	0		0	0.0	0	0.0	0	
1.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
1.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
1.6 NAIC 6	0	0	0	0	0		0	0.0	0	0.0	0	
1.7 Totals	1,173,853	733,145	0	0	0	XXX	1,906,998	41.4	2,609,182	50.8	1,906,998	
2. All Other Governments	, , ,						, - ,		, -,		, , , , , , , , , , , , , , , , , , , ,	
2.1 NAIC 1	0	0	0	0	0		0	0.0	0	0.0	0	
2.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
2.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
2.4 NAIC 4	0	0	0		0	XXX	0	0.0	0	0.0	0	
2.5 NAIC 5	0	0	0		.0	XXX		0.0	0	0.0	0	
2.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
2.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
3. U.S. States, Territories and Possessions etc.,												
Guaranteed												
3.1 NAIC 1	0	0	0	0	0		0	0.0	0	0.0	0	
3.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
3.3 NAIC 3	0	0	0	0	0		0	0.0	0	0.0	0	
3.4 NAIC 4	0	0	0	0	0		0	0.0	0	0.0	0	
3.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
3.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
3.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
4. U.S. Political Subdivisions of States, Territories and												
Possessions, Guaranteed												
4.1 NAIC 1	0	149,271	0	0	0	XXX				2.9		
4.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
4.3 NAIC 3	0	0	0	0	0		0	0.0	0	0.0	0	
4.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
4.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
4.6 NAIC 6	. 0	0	0	0	0	,	0	0.0	0	0.0	0	
4.7 Totals	0	149,271	0	0	0	XXX	149,271	3.2	149,088	2.9	149,271	
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1		2,076,423				XXX	2,395,121					
5.2 NAIC 2	0			0	.0		0	0.0	0	0.0	0	
5.3 NAIC 3	0	0	0				0	0.0	0	0.0	0	
5.4 NAIC 4	0	0	0	0	0		0	0.0	0	0.0	0	
5.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
5.6 NAIC 6	0	0	0	0	0		0	0.0	0	0.0	0	
5.7 Totals	17.945	2.076.423	279.530	19.872	1.351		2.395.121	52.0	2.226.177	43.3	2.395.121	1

SCHEDULE D - PART 1A - SECTION 1 (Continued) Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	1	2					es by Major Types	8		10	11	12
NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 11.7	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)												
6.1 NAIC 1	0	0	0	0	0	XXX	0				0	
6.2 NAIC 2		0		0	0	XXX		3.4	0	0.0		
6.3 NAIC 3	0	0		0	0	XXX	0	0.0	0	0.0	0	
6.4 NAIC 4	0	0	0	0	0	XXX		0.0	0	0.0	0	
6.5 NAIC 5	0	0		0	0	XXX		.0.0	0	0.0	.0	
6.6 NAIC 6	0	0	0	0	0		0	0.0	0	0.0	0	
6.7 Totals	0	0	155,618	0	0	XXX	155,618	3.4	155,725	3.0	155,618	(
7. Hybrid Securities			, i i i i i i i i i i i i i i i i i i i				ĺ í		,		,	
7.1 NAIC 1	0	0	0	0	0	XXX	0		0	0.0	0	
7.2 NAIC 2	0	0	0	0	0	XXX	.0	0.0	0	0.0	0	
7.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
7.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
7.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
7.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	(
7.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	(
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
8.2 NAIC 2	0	0	0	0	0		0		0	0.0	0	
8.3 NAIC 3	0	0	0	0	0		0	0.0	0	0.0	0	
8.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
8.5 NAIC 5	0	0	0	0	0		0	0.0	0	0.0	0	
8.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	(
8.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	(
9. SVO Identified Funds												
9.1 NAIC 1				XXX	XXX	0	0	0.0	0	0.0	0	
9.2 NAIC 2	XXX	XXX			XXX	0	0		0	0.0	0	
9.3 NAIC 3					XXX	0	0	0.0	0	0.0	0	
9.4 NAIC 4	XXX		XXX	XXX	XXX	0	0	0.0	0	0.0	0	
9.5 NAIC 5	XXX		XXX	XXX	XXX	0	0	0.0	0	0.0	0	
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	(
9.7 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	(
10. Unaffiliated Bank Loans												
10.1 NAIC 1	0	0	0	0	0		0	0.0	0	0.0	0	
10.2 NAIC 2	0	0	0	0	0		0		0	0.0	0	
10.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
10.4 NAIC 4	0	0	0	0	0	XXX	0		0	0.0	0	
10.5 NAIC 5	0	0	0	0	0		0		0	0.0	0	
10.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
10.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	1	2	3	4	5	6	7	8	9 Tatal from 0.1 7	10 0/ Energy Call 0	11 Tatal Dublish	12 Tatal Driveta
NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 11.7	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privatel Placed (a)
1. Total Bonds Current Year												
11.1 NAIC 1	(d)1, 191, 798					0				XXX		
11.2 NAIC 2	(d)0	0		0	0	0			XXX	XXX	155,618	
11.3 NAIC 3	(d)0	0	0	0	0	0	0		XXX	XXX	0	
11.4 NAIC 4	(d)0	0	0	0	0	0	0		XXX	XXX	0	
11.5 NAIC 5	(d)0	0	0	0	0	0	(c)0				0	
11.6 NAIC 6	(d) 0	0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	
11.7 Totals						0	(b)4,607,008		XXX	XXX		
11.8 Line 11.7 as a % of Col. 7	25.9	64.2	9.4		0.0	0.0	100.0	XXX	XXX	XXX	100.0	
2. Total Bonds Prior Year												
12.1 NAIC 1	.876.626	2.319.013				0	XXX.	XXX	5.140.172	.100.0	.5.140.172	
12.2 NAIC 2	0	0	0	0	0	0	XXX	XXX	0	0.0	0	
12.3 NAIC 3	0	0	0	0	0	0	XXX	XXX	0	0.0	0	
12.4 NAIC 4	0	0	0	0	0	0	XXX	XXX	0	0.0		
12.5 NAIC 5	0	0		0	0	0	XXX	XXX	(c) 0	0.0	.0	
12.6 NAIC 6	0	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	
12.7 Totals				.267.702	0	0	XXX	XXX	(b)5, 140, 172	100.0		
12.8 Line 12.7 as a % of Col. 9	17.1	45.1	32.6	5.2	0.0	0.0	XXX	XXX	100.0	XXX	100.0	
3. Total Publicly Traded Bonds												
13.1 NAIC 1	1, 191, 798	2,958,839	279.530	19.872		0	4,451,390	96.6	5.140.172	100.0		XXX
13.2 NAIC 2	0	0	155,618		0	0	155,618		0	0.0	155.618	XXX
13.3 NAIC 3	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
13.4 NAIC 4	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
13.5 NAIC 5	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
13.6 NAIC 6	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
13.7 Totals	1, 191, 798	2,958,839		19.872	1,351	0		100.0	5,140,172	100.0	4,607,008	XXX
13.8 Line 13.7 as a % of Col. 7	25.9	64.2	9.4		0.0	0.0		XXX	XXX	XXX	100.0	XXX
13.9 Line 13.7 as a % of Line 11.7, Col. 7,												
Section 11	25.9	64.2	9.4	0.4	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
4. Total Privately Placed Bonds												
14.1 NAIC 1	0	0	0	0	0	0	0	0.0	0	0.0		
14.2 NAIC 2	0	0	0	0	0	0	0		0	0.0	XXX	
14.3 NAIC 3	0	0	0	0	0	0	0	0.0	0	0.0	XXX	
14.4 NAIC 4	0	0	0	0	0	0	0	0.0	0	0.0	XXX	
14.5 NAIC 5	0	0	0	0	0	0	0		0	0.0	XXX	
14.6 NAIC 6	. 0	0	0	0	0	0	0	0.0	0	0.0	XXX	
14.7 Totals	0	0	0	0	0	0	0		0	0.0	XXX	
14.8 Line 14.7 as a % of Col. 7	0.0	0.0		0.0	0.0	0.0	0.0				XXX	
14.9 Line 14.7 as a % of Line 11.7, Col. 7, Section 11	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	

(c) Includes \$0 current year, \$0 prior year of bonds with 5GI designations and \$0 prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

				4	5 5				9	40	44	40
	1	2 Over 1 Year	3 Over 5 Years	4 Over 10 Years	5	6 No Maturity	1	8 Col. 7 as a % of	9 Total from Col. 7	10 % From Col. 8	11 Total Publicly	12 Total Privately
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Date	Total Current Year	Line 11.08	Prior Year	Prior Year	Traded	Placed
1. U.S. Governments	1 1001 01 2000	rineugire reale	initedgir to route	rineugr ze reale		2410		2.110 1 1100	- Hor Foul	The Foul		1 14004
1.01 Issuer Obligations	1, 173, 853		0	0	0				2,609,182	50.8	1,906,998	0
1.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.05 Totals	1,173,853	733,145	0	0	0	XXX	1,906,998	41.4	2,609,182	50.8	1,906,998	0
2. All Other Governments	, ,	,					, ,					
2.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.02 Residential Mortgage-Backed Securities		0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	.0.0	0	0.0	0	0
2.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations	0	0	0	0	0	XXX	0		0	0.0	0	0
3.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4. U.S. Political Subdivisions of States, Territories and												
Possessions, Guaranteed	-											-
4.01 Issuer Obligations	0	149,271	0	0	0	XXX	149,271		149,088			0
4.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.04 Other Loan-Backed and Structured Securities 4.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0		0
	0	149,271	0	0	0	XXX	149,271	3.2	149,088	2.9	149,271	0
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed												
5.01 Issuer Obligations	0	1,967,247		0	0	XXX		.47.6		43.3		0
5.02 Residential Mortgage-Backed Securities	17.945			19.872	1.351	XXX		4.4	2,220,117	0.0		0
5.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.05 Totals	17,945	2,076,423	279,530	19,872	1,351	XXX	2,395,121	52.0	2,226,177	43.3	2,395,121	0
6. Industrial and Miscellaneous	,		,	,	,		, ,					
6.01 Issuer Obligations	0	0		0	0	XXX	155.618			3.0	155,618	0
6.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	.0.0	0	0.0	0	0
6.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	.0.0	0		0	0
6.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0		0
6.05 Totals	0	0	155,618	0	0	XXX	155,618	3.4	155,725	3.0	155,618	0
7. Hybrid Securities												
7.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0		0
7.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates												1
8.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	ļ0
8.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	
8.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	·····.
8.05 Affiliated Bank Loans - Issued	0	0	0	0	0	XXX	0	0.0	0	0.0	0	C
8.06 Affiliated Bank Loans - Acquired	0	0	0	0	0	XXX	0	0.0	0	0.0		(
8.07 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	<u> </u>

SCHEDULE D - PART 1A - SECTION 2 (Continued) Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

	เพลเน						by Major Type and					
	1	2	3	4	5	6	7	8	9	10	11	12
		Over 1 Year	Over 5 Years	Over 10 Years		No Maturity		Col. 7 as a % of	Total from Col. 7	% From Col. 8	Total Publicly	Total Privately
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Date	Total Current Year	Line 11.08	Prior Year	Prior Year	Traded	Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.02 Bond Mutual Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.03 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.02 Unaffiliated Bank Loans - Acquired	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.03 Totals	0	0	0	0	0		0	0.0	0	0.0	0	0
	U	0	0	0	0	~~~~	0	0.0	0	0.0	U	0
11. Total Bonds Current Year	4 470 050	0.040.000	000 550		•	1001	4 400 074	05.0	10.04	1001	4 400 074	
11.01 Issuer Obligations	1, 173,853	2,849,663		0	0	XXX	4,406,074		XXX	XXX	4,406,074	0
11.02 Residential Mortgage-Backed Securities	17,945				1,351	XXX			XXX	XXX		0
11.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
11.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
11.08 Totals	1, 191, 798				1,351	0	4,607,008		XXX	XXX		0
11.09 Line 11.08 as a % of Col. 7	25.9	64.2	9.4	0.4	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
12. Total Bonds Prior Year												
12.01 Issuer Obligations	876.626		1,676,831		0	XXX	XXX	XXX		100.0		0
12.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
12.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	XXX	XXX	0	0.0	0	0
12.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	XXX		0	0.0	0	0
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		XXX		0	0.0	0	0
12.06 Affiliated Bank Loans				0		XXX	XXX	XXX	0	0.0	0	0
12.07 Unaffiliated Bank Loans	0	0	0	0	0		XXX		0	0.0	0	0
12.08 Totals	876.626	2,319,013	1.676.831	267.702	0		XXX	XXX	5, 140, 172		5, 140, 172	0
12.09 Line 12.08 as a % of Col. 9	,		, , .			0.0						0.0
	17.1	45.1	32.6	5.2	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
13. Total Publicly Traded Bonds	4 470 050	0.040.000	000 550			1001	4 400 074	05.0	5 440 470	100.0	4 400 074	10.04
13.01 Issuer Obligations	1, 173,853	2,849,663		0	0	XXX	4,406,074		5, 140, 172		4,406,074	XXX
13.02 Residential Mortgage-Backed Securities					1,351	XXX			0	0.0		XXX
13.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
13.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	XXX
13.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
13.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
13.08 Totals	1, 191, 798					0	4,607,008		5, 140, 172		4,607,008	XXX
13.09 Line 13.08 as a % of Col. 7				0.4	0.0	0.0		XXX	XXX	XXX		XXX
13.10 Line 13.08 as a % of Line 11.08, Col. 7,												
Section 11	25.9	64.2	9.4	0.4	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
14. Total Privately Placed Bonds												
14.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0		0		XXX	0
14.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	.0.0	0	0.0	XXX	
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	XXX	0
14.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
14.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0		0
14.08 Totals	0	0	0	-			0	0.0	0	0.0	XXX	0
14.09 Line 14.08 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	0.0	0.0		XXX	XXX	XXX	0.0
14.09 Line 14.08 as a % of Line 11.08, Col. 7,												
Section 11	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	~~~	~~~	~~~	~~~	0.0

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4 Other Short-term	5 Investments in Parent,
	Total	Bonds	Mortgage Loans	Investment Assets (a)	Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year	0	0	0	0	0
2. Cost of short-term investments acquired			0	0	0
3. Accrual of discount	60	60	0	0	0
4. Unrealized valuation increase (decrease)	0	0	0	0	0
5. Total gain (loss) on disposals	0	0	0	0	0
6. Deduct consideration received on disposals			0	0	0
7. Deduct amortization of premium	0	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0	0	0	0
9. Deduct current year's other than temporary impairment recognized	0	0	0	0	0
10. Book adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)			0	0	0
11. Deduct total nonadmitted amounts	0	0	0	0	c
12. Statement value at end of current period (Line 10 minus Line 11)	249,993	249,993	0	0	o

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards **NONE**

Schedule DB - Part B - Verification - Futures Contracts

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open **NONE**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE**

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

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ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDUI F F - PART 2 - VERIFICATION BETWEEN YEARS

		1	2	3 Money Market	4
		Total	Bonds	Mutual funds	Other (a)
1.	Book/adjusted carrying value, December 31 of prior year	3,201,857	0	3,201,857	
2.	Cost of cash equivalents acquired	1,803,658	0	1,803,658	
3.	Accrual of discount	0	0	0	(
4.	Unrealized valuation increase (decrease)	0	0	0	(
5.	Total gain (loss) on disposals	0	0	0	
6.	Deduct consideration received on disposals	1,037,851	0	1,037,851	(
7.	Deduct amortization of premium	0	0	0	(
8.	Total foreign exchange change in book/adjusted carrying value	0	0	0	(
9.	Deduct current year's other than temporary impairment recognized	0	0	0	(
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6- 7+8-9)	3,967,665	0	3,967,665	
11.	Deduct total nonadmitted amounts	0	0	0	
12.	Statement value at end of current period (Line 10 minus Line 11)	3,967,665	0	3,967,665	C

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:

Schedule A - Part 1 - Real Estate Owned

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Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **NONE**

Schedule B - Part 1 - Mortgage Loans Owned **NONE**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made **NONE**

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid **NONE**

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned

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Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made **NONE**

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid **NONE**

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	C	odes		6	7		air Value	10	11			usted Carrying				In	terest		Dr	ates
I	Z	3 4		=	0	1	8		10	11	12	13	14	15	16	17	18	19	20	21	22
		3 4	. 5	-			0	9			12	15	14	15	10	17	10	19	20	21	22
					NAIC																
					Desig-																
					nation,									-							
					NAIC									Total							
		_			Desig-									Foreign							
		F			nation								Current	Exchange							
		0		M	lodifier								Year's	Change							
		r			and		Rate					Current	Other-	in							
		C e			SVO		Used to			Book/	Unrealized	Year's	Than-	Book/				Admitted			Stated
		o i		A	dmini-		Obtain			Adjusted	Valuation	(Amor-	Temporary	Adjusted		Effective		Amount	Amount		Contractual
CUSIP		d g	Bo	ond st	trative	Actual	Fair	Fair	Par	Carrying	Increase/	tization)	Impairment	Carrying	Rate	Rate	When	Due and	Received		Maturity
Identification	Description	e n	Ch	nar S	ymbol	Cost	Value	Value	Value	Value	(Decrease)	Accretion	Recognized	Value	of	of	Paid	Accrued	During Year	Acquired	Date
912828-SF-8	UNITED STATES TREASURY	SD			1.A		. 102.0938				0	1,686	0	0	2.000	2.560				02/15/2018	02/15/2022
912828-U6-5	UNITED STATES TREASURY	SD				744,641	101.4688				0	1, 104	0	0	1.750	1.901		1, 154		12/13/2016	11/30/2021
912828-YT-1	UNITED STATES TREASURY						101.2656				0		0	0	1.500	1.576			2,625	12/04/2019	11/30/2021
91282C-AZ-4	UNITED STATES TREASURY						100 . 1406				0	(1)			0.375	0.371			0	12/16/2020	11/30/2025
	btotal - Bonds - U.S. Governments - Issue	er Obligat	lons			1,647,797		1,680,416	1,660,000	1,657,005	0	2,919	0	0	XXX	XXX	XXX	3,903	22,050	XXX	XXX
	al - U.S. Government Bonds					1,647,797		1,680,416	1,660,000	1,657,005	0	2,919	0	0	XXX	XXX	XXX	3,903	22,050	XXX	XXX
	al - All Other Government Bonds					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
	al - U.S. States, Territories and Possessi	ions Bond	ls			0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
64966M-QH-5	NEW YORK N Y	SD	1	1	1.C FE	148,701	106.3230				0		0	۵	2.520	2.657	AO			10/16/2017	10/01/2024
1899999. Su	btotal - Bonds - U.S. Political Subdivisions	s - Issuer	Obliga	ations		148,701	XXX	159,485	150,000	149,271	0	183	0	0	XXX	XXX	XXX	945	3,780	XXX	XXX
2499999. To	al - U.S. Political Subdivisions Bonds					148,701	XXX	159,485	150,000	149,271	0	183	0	0	XXX	XXX	XXX	945	3,780	XXX	XXX
052414-PJ-2	AUSTIN TEX ELEC UTIL SYS REV	SD	2	1	1.C FE		122.0580				0	(2,441)	0	0	5.000	3.070	MN			05/13/2015	11/15/2027
240523-YV-6	DEKALB CNTY GA WTR & SEW REV	SD	2		1.D FE		117.9840				0	(3,619)	0	0	5.000	3.270				11/10/2015	10/01/2032
45203H-2A-9	ILLINOIS FIN AUTH REV	SD			1.B FE		130.6230				0	(2,966)	0	0	5.000	3.070			10,000	05/13/2015	12/01/2028
575896-PS-8	MASSACHUSETTS ST PORT AUTH REV	SD	2		1.C FE		116.0400				0	(4,598)	0	0	5.000	3.190				07/09/2015	07/01/2032
592647-BC-4 65887P-RU-1	METROPOLITAN WASH D C ARPTS AUTH ARPT SY NORTH DAKOTA PUB FIN AUTH	SD	2		1.D FE 1.A FE		116.2140 117.1760				0	(2,940) (7,464)	0	U	5.000	3.570				07/01/2015 07/10/2015	10/01/2030 10/01/2029
663903-FH-0	NORTHEAST OHIO REGL SWR DIST WASTEWTR RE		2		1.8 FE						D	(3,401)	ر ۱	0						05/12/2015	
762197-SK-8	RHODE ISLAND HEALTH & EDL BLDG CORP HIGH	SD			1.E FE		121.0860				0 0	(4,561)	0 0	0	5.000	2.710					
	btotal - Bonds - U.S. Special Revenues -		ligatio			2.350.389		2,421,492	2.030.000	2, 194, 187	0	(31,990)	0	0	XXX	XXX	XXX	25.525	101.500	XXX	XXX
	FH SD8090 - RMBS		4		.1.A		. 103.8931	202.820	195,220		0	(01,000)	0	0	2.000	1.346			976		09/01/2050
	btotal - Bonds - U.S. Special Revenues - I	Residenti	ial Mor																		
	cked Securities	Residenti		igage		201,138	XXX	202,820	195,220	200,934	0	(204)	0	0	XXX	XXX	XXX	325	976	XXX	XXX
	al - U.S. Special Revenues Bonds					2,551,527		2.624.313	2,225,220	2.395.121	0	(32, 194)	0	0	XXX	XXX	XXX	25.850	102.476	XXX	XXX
25468P-DK-9	TWDC ENTERPRISES 18 CORP	SD	4	0	2.A FE						0	(32, 194)	0	0		2.916				01/20/2016	
	btotal - Bonds - Industrial and Miscellaned		filiatod				110.3041	1/ 1,405			y		y			2.910	14			01/20/2010	
	ligations	ous (Onai	mateu	i) - 155u		156.163	~~~	171.405	155.000	155.618	0	(107)	0	0	XXX	XXX	XXX	1.783	4.650	XXX	XXX
		atad) Dan	da				XXX	, .	,		ů	,	ů	0	XXX	XXX	XXX		1.	XXX	XXX
	al - Industrial and Miscellaneous (Unaffilia	aled) Bor	lus					171,405	155,000	155,618	0	(107)	0	v				1,783	4,650		
	tal - Hybrid Securities						XXX	0	0	0	0	0		0	XXX	XXX	XXX	0	0	XXX	XXX
	al - Parent, Subsidiaries and Affiliates Bo	onds					XXX	0	0	0	0	0		0	XXX	XXX	XXX	0	0	XXX	XXX
	btotal - SVO Identified Funds						XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
6599999. Su	btotal - Unaffiliated Bank Loans					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
7699999. To	al - Issuer Obligations					4,303,050	XXX	4,432,799	3,995,000	4,156,081	0	(28,996)	0	0	XXX	XXX	XXX	32,155	131,980	XXX	XXX
7799999. To	al - Residential Mortgage-Backed Securit	ties				201,138	XXX	202,820	195,220	200,934	0	(204)	0	0	XXX	XXX	XXX	325	976	XXX	XXX
	al - Commercial Mortgage-Backed Secur						XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
	al - Other Loan-Backed and Structured S						XXX	n o	0	0	0	0		0	XXX	XXX	XXX	0	0	XXX	XXX
	al - SVO Identified Funds	200.1000					XXX	0	0	0	0	0		0	XXX	XXX	XXX	0	0	XXX	XXX
	tal - Affiliated Bank Loans						XXX	0	0	0	0	0		0	XXX	XXX	XXX	0	0	XXX	XXX
								0	U -		ů		-	v		XXX		ů	0		
	tal - Unaffiliated Bank Loans					-	XXX	0	0	0	0	0	-	0	XXX		XXX	0	0	XXX	XXX
8399999 - To	DTAI BONDS					4,504,188	XXX	4,635,619	4, 190, 220	4,357,015	0	(29,200)	0	0	XXX	XXX	XXX	32,481	132,956	XXX	XXX

1A\$		1B\$		1C\$		1D\$	
2A\$		2B\$	0	2C\$	0		
3A\$	0	3B\$	0	3C\$	0		
4A\$	0	4B\$	0	4C\$	0		
5A\$	0	5B\$	0	5C\$	0		
6\$	0						

SCHEDULE D - PART 2 - SECTION 1

Showing All PREFERRED STOCKS Owned December 31 of Current Year

		r					v		RRED STOCK					I						
1	2	Coc	des	5	6	7	8	F	air Value	11		Dividends			Change in E	look/Adjusted	Carrying Value		20	21
		3	4					9	10		12	13	14	15	16	17	18	19	NAIC	
																			Desig-	
																			nation,	
																			NAIC	
																			-	
																		Total	Desig-	
								Rate										Foreign	nation	
								Per								Current		Exchange	Modifier	
								Share							Current		Total Change	Change in	and	
					Dee		Deal./										Total Change			
					Par		Book/	Used to						Unrealized	Year's	Other-Than-		Book/	SVO	
CUSIP				Number	Value	Rate	Adjusted	Obtain				Amount	Nonadmitted	Valuation	(Amor-	Temporary	Book/Adjusted		Admini-	
Identi-			For-	of	Per	Per	Carrying	Fair			Declared	Received	Declared But	Increase/	tization)	Impairment	Carrying Value	Carrying	strative	Date
fication	Description	Code	eign	Shares	Share	Share	Value	Value	Fair Value	Actual Cost	but Unpaid	During Year	Unpaid	(Decrease)	Accretion	Recognized	(15 + 16 - 17)	Value	Symbol	Acquired
61761J-40-6				7,500.000									0		0	0		0	2.C FE	03/25/2015
8499999. S	ubtotal - Preferred Stock - Industri	al and N	liscellaneous	s (Unaffiliated)	Perpetual Pr	referred	215,400	XXX	215,400	199,725	2,988	11,953	0	15,675	0	0	15,675	0	XXX	XXX
			.										l				.			
			.																	
			.																	
			.																	
			.																	
			.																	
			.																	
8999999 - T	otal Preferred Stocks						215,400	XXX	215,400	199,725	2,988	11,953	0	15,675	0	0	15,675	0	XXX	XXX

Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

....0 1B...\$.....0 2B...\$..... 0 1C ...\$ 1A.,\$ 0 1D...\$____0 1E...\$____0 1F...\$____0 1G...\$____0

2A..\$215,400

0 3C...\$ 3A..\$. 0 3B...\$0

0 4C..\$ 0 4B...\$ 4A..\$ 0 ..0

0 5B...\$ 0 5C..\$ 5A ..\$ 0

SCHEDULE D - PART 2 - SECTION 2

Showing All COMMON STOCKS Owned December 31 of Current Year

1	2	Cod	68	5	6		ir Value	9		Dividends		Ch	ange in Book/Ag	justed Carrying V	مايام	17	18
	2	3	103	0	0	7	8	0	10	11	12	13	14	15	16		NAIC
		5	4			'	0		10		12	15	14	15	10		_
																	Desig-
																	nation,
																	NAIC
																	Desig-
						Rate											nation
						Per									Total Foreign		Modifier
						Share							Current Year's		Exchange		and
					Book/	Used to						Unrealized	Other-Than-	Total Change in	Change in		SVO
CUSIP				Number	Adjusted	Obtain				Amount	Nonadmitted	Valuation	Temporary	Book/Adjusted	Book/Adjusted		Admini-
Identi-			For-	of	Carrying	Fair			Declared	Received	Declared But	Increase/	Impairment	Carrying Value		Date	strative
fication	Description	Code		Shares	Value	Value	Fair Value	Actual Cost	but Unpaid	During Year	Unpaid	(Decrease)	Recognized	(13 - 14)	Value		Symbol
	Stonewood Insurance Company	0000	o.g.i		,39,256,363	1,962.818			0	0	0		0		0		<i></i>
	Falls Lake Fire and Casualty Company				55,098,324	2,119.166					0	3,879,856	0	3,879,856	0	12/18/2015	
	ubtotal - Common Stock - Parent, Subsidi	aries an	nd Affil	iates Other	94.354.687	XXX	94.354.687	73,262,851	0	0	0	10.786.017	0	10.786.017	0	XXX	XXX
	,									-	-		-				
													+	.+			
0700000 T	atal Oamman Otaala					VVVV	04.054.007	70 000 054				40 700 047		40 700 047		VVV	
	otal Common Stocks				94,354,687	XXX	94,354,687	73,262,851	0	0	0	10,786,017	0	10,786,017	0	XXX	XXX
9899999 - 1	otal Preferred and Common Stocks				94,570,087	XXX	94,570,087	73,462,576	2,988	11,953	0	10,801,692	0	10,801,692	0	XXX	XXX

Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

1A ..\$... __0 1B...\$ _____0 1C...\$...0 1D...\$..... ___0 1E...\$____0 1F...\$____0 1G...\$____0 2A..\$ 0 2B...\$ __0 2C...\$..0 3A..\$ 0 3C ..\$..0 4A ..\$ 0 4B...\$ 0 4C..\$...0 5A..\$. ...0 5C...\$... ...0

6\$0

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

1	2	3	4		6	7	8	9
					-			Paid for Accrued
CUSIP			Date		Number of Shares			Interest and
Identification	Description	Foreign	Acquired	Name of Vendor	of Stock	Actual Cost	Par Value	Dividends
	NITED STATES TREASURY		12/16/2020	BARCLAYS CAPITAL INC.				
	tal - Bonds - U.S. Governments					420,083	420,000	74
3132DV-7B-5 F			08/28/2020	GOLDMAN SACHS				
	tal - Bonds - U.S. Special Revenues					205,407	199,364	144
8399997. Total -	Bonds - Part 3					625,490	619,364	218
8399998. Total ·	Bonds - Part 5					2,019,895	1,943,000	5,737
8399999. Total ·	Bonds					2,645,385	2,562,364	5,954
8999997. Total ·	Preferred Stocks - Part 3					0	XXX	0
8999998. Total -	Preferred Stocks - Part 5					0	XXX	0
8999999. Total -	Preferred Stocks					0	XXX	0
9799997. Total ·	Common Stocks - Part 3					0	XXX	0
9799998. Total -	Common Stocks - Part 5					0	XXX	0
9799999. Total -	Common Stocks					0	XXX	0
9899999. Total -	Preferred and Common Stocks					0	XXX	0
9999999 - Total	8	·		·		2,645,385	XXX	5,954

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1	2	3	4	5		7	8	9	10				Carrying Value		16	17	18	19	20	21
	E .	Ŭ	-	Ū	0	,	0	J	10	11	12	13	14	15	10	17	10	10	20	21
											12	10	17	Total					I	
												Current	Total	Foreign					Bond	
												Year's	Change in	Exchange	Book/				Interest/	
									Prior Year		Current	Other-	Book/	Change in	Adjusted	Foreign			Stock	Stated
									Book/	Unrealized	Year's	Than-	Adjusted	Book/	Carrying	Exchange			Dividends	Con-
CUSIP					Number of				Adjusted	Valuation	(Amor-	Temporary	Carrying	Adjusted	Value at	Gain	Realized	Total Gain	Received	tractual
Identi-		For-	Disposal	Name	Shares of	Con-			Carrying	Increase/		Impairment	Value	Carrying	Disposal	(Loss) on	Gain (Loss)	(Loss) on	During	Maturity
fication	Description	eian		of Purchaser	Stock	sideration	Par Value	Actual Cost	Value	Decrease		Recognized		Value	Date		on Disposal		Year	Date
912828-A8-3	UNITED STATES TREASURY		12/31/2020	Maturity @ 100.00							(1,526)		(1,526)			0	0	0		12/31/2020 .
	UNITED STATES TREASURY			. Maturity @ 100.00					25, 100		(100)	0	(100)	0		0	0	0		
	UNITED STATES TREASURY		01/06/2020 .	Adjustment							21	0	21	0		0	(1,233)			02/28/2021 .
	ubtotal - Bonds - U.S. Governments					1,372,343	1,375,000	1,373,869	1,375,180	0	(1,605)		(1,605)		1,373,575	0	(1,233)	(1,233)	22,618	
	FH SD8090 - RMBS		12/01/2020 .	Paydown		4, 143	4, 143		0	0	(126)		(126)		4, 143	0	0	0		09/01/2050 .
	ubtotal - Bonds - U.S. Special Rever	nues				4,143	4,143	4,269	0	0	(126)	-	(126)		4,143	0	0	0	15	XXX
	otal - Bonds - Part 4					1,376,486	1,379,143	1,378,138	1,375,180	0	(1,730)	0	(1,730)	0	1,377,719	0	(1,233)	(1,233)	22,633	
	otal - Bonds - Part 5					2,019,895	1,943,000	2,019,895	0	0	0	0	0	0	2,019,895	0	0	0	5,737	
8399999. To						3,396,381	3,322,143	3,398,033	1,375,180		(1,730)	0	(1,730)		3,397,613	0	(1,233)		28,370	
	JPMORGAN CHASE & CO			. Call @ 25.00			0.00			(1,794)	0	0	(1,794)	0		0	(2,730)	(2,730)	2,986	<u></u>
	ubtotal - Preferred Stocks - Industria	al and	Miscellaneo	ous (Unaffiliated) P	erpetual		1001												I	
	referred					195,000	XXX	197,730	199,524	() :)		0	(1,794)		197,730	0	(2,730)	() :)	2,986	
	otal - Preferred Stocks - Part 4					195,000	XXX	197,730	199,524	(1,794)	0	0	(1,794)	0	197,730	0	(2,730)	(2,730)	2,986	
	otal - Preferred Stocks - Part 5					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
	otal - Preferred Stocks					195,000	XXX	197,730	199,524	(1,794)	0	0	(1,794)	0	197,730	0	(2,730)	(2,730)	2,986	
	otal - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
	otal - Common Stocks - Part 5					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
	otal - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9899999. To	otal - Preferred and Common Stocks	5				195,000	XXX	197,730	199,524	(1,794)	0	0	(1,794)	0	197,730	0	(2,730)	(2,730)	2,986	XXX
			+							<u>+</u>			······				+			
			+							f'							+			
9999999 - T	otolo					0 504 004	XXX	3.595.763	4 574 704	(4.704)	(1.730)		(0.504)		0 505 040		(3.963)	(3,963)		XXX
<u>aaaaaaaa - I</u>	otais					3,591,381	~~~	3,595,763	1,574,704	(1,794)	(1,730)	0	(3,524)	0	3,595,343	0	(3,963)	(3,963)	31,356	~~~

SCHEDULE D - PART 5

Showing All Long-Term Bonds and Stocks ACQUIRED During Year and Fully DISPOSED OF During Current Year

1	2	3	4	5	6	7	8	9	10	11			ok/Adjusted 0		e	17	18	19	20	21
1	-			J	Ĵ		J J	Ŭ Ŭ			12	13	14	15	16	1	10	.0		
											12	10	14	10	Total					
													Current	Total	Foreign					
							Par Value						Year's	Change in	Exchange				Interest	
										Deek/		Current	Other-			Foreign				Daid for
							(Bonds)			Book/		Current			Change in		Destruct		and	Paid for
							or			Adjusted	Unrealized		Than-	Adjusted	Book/	Exchange	Realized	THEO	Dividends	Accrued
CUSIP		-	. .				Number of		a	Carrying	Valuation	(Amort-	Temporary		Adjusted	Gain	Gain	Total Gain	Received	Interest
Identi-		For-	Date		Disposal	Name of	Shares		Consid-	Value at	Increase/	ization)/	Impairment	\	Carrying	(Loss) on	(Loss) on	(Loss) on	During	and
fication		eign	Acquired	Name of Vendor	Date	Purchaser	(Stock)	Actual Cost	eration	Disposal	(Decrease)	Accretion	Recognized	13 - 14)	Value	Disposal	Disposal	Disposal	Year	Dividends
	UNITED STATES TREASURY		05/28/2020	Various	05/28/2020	Intercompany Transfer					D	0	0	D	0	0	D	٥	2,213	
	Subtotal - Bonds - U.S. Governme	nts		r			300,000	305,859	305,859	305,859	0	0	0	0	0	0	0	0	2,213	
00287Y-AQ-2	ABBVIE INC			Intercompany Transfer	11/24/2020	Intercompany Transfer					0	0	0	0	0	0	0	0		
14314A-AD-1	CARMX 2018-1 A4 - ABS CARMX 2019-2 A3 - ABS		02/25/2020	Intercompany Transfer Intercompany Transfer		Intercompany Transfer Intercompany Transfer		253,910 254,579			0	0	0	0	0	0	0	0		
	SCHLUMBERGER HOLDINGS CORP			Intercompany Transfer		Intercompany Transfer					y				0					
	TOYOTA MOTOR CREDIT CORP			Intercompany Transfer		Intercompany Transfer					D		0	0	0	0	0	D	2 474	
89238B-AE-2	TAOT 2017-A A4 - ABS		02/25/2020	Intercompany Transfer	02/25/2020	Intercompany Transfer			253,751	253,751	0	0	0	0	0	0	0	0		
	WOART 2018-A A4 - ABS			Intercompany Transfer	11/24/2020	Intercompany Transfer					Q	0	0	0	0	0	0	0		
3899999.	Subtotal - Bonds - Industrial and M	liscella	aneous (Un	affiliated)			1,643,000	1,714,035	1,714,035	1,714,035	0	0	0	0	0	0	0	0	3,524	3,524
8399998.	Γotal - Bonds						1,943,000	2,019,895	2,019,895	2,019,895	0	0	0	0	0	0	0	0	5,737	5,737
8999998.	Fotal - Preferred Stocks							0	0	0	0	0	0	0	0	0	0	0	0	0
9799998.	Fotal - Common Stocks							0	0	0	0	0	0	0	0	0	0	0	0	0
9899999.	Fotal - Preferred and Common Sto	ocks						0	0	0	0	0	0	0	0	0	0	0	0	0
					·····			·····			+		+	+	+	+	+		+	+
																+	+			
9999999 -	Totals							0.010.005	0.010.005	0 010 005		•	0	0		•	0	0	5.737	5.737
22233333 -	I Uldis							2,019,895	2,019,895	2,019,895	0	0	0	0	0	0	0	0	5,737	5,737

SCHEDULE D - PART 6 - SECTION 1

Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

r					Controlled of	Annialeu Comp					
1	2	3	4	5	6	7	8	9	10	Stock c	of Such
										Company	Owned by
										Insurer on Sta	
						D. L					
						Do Insurer's				11	12
						Assets Include					
						Intangible					
						Assets					
						Connected with					
	Description,					Holding of					
	Name of Subsidiary,		NAIC		NAIC	Such	Total	Book/			
CUSIP	Controlled		Company	ID	Valuation	Company's	Amount of Such	Adjusted	Nonadmitted	Number	% of
Identification	or Affiliated Company	Foreign	Code	Number	Method	Stock?	Intangible Assets	Carrying Value	Amount	of Shares	Outstanding
0999999. Total P		i orongin	0000		method	0100111		ourrying raido	,ou.i.	XXX	XXX
							0	0	0		
00000-00-0	. Stonewood Insurance Company			20-0328998	881	NO	0		۵		
000000-00-0	Falls Lake Fire and Casualty Company			47-1588915	8B1	NO	0		0		
1199999. Subtota	al - Common Stock - U.S. P&C Insurer		- -				0	94,354,687	0	XXX	XXX
1899999. Total C	Common Stocks						0	94,354,687	0	XXX	XXX
					•••••						
					•••••						
					· · · · · · · · · · · · · · · · · · ·						
1999999 - Totals							0	94,354,687	0	XXX	XXX

1. Amount of insurer's capital and surplus from the prior period's statutory statement reduced by any admitted EDP, goodwill and net deferred tax assets included therein: \$

...0

2.Total amount of intangible assets nonadmitted \$

SCHEDULE D - PART 6 - SECTION 2

1	2	3	4 Total Amount of Intangible Assets Included in	Stock in Lower-Tie Indirectly by Stateme	r Company Owned / Insurer on ent Date 6
CUSIP Identification	Name of Lower-Tier Company	Name of Company Listed in Castian 1 Which Castrola Lawer Tier Company	Amount Shown in		% of
Identification	Name of Lower-Ther Company	Name of Company Listed in Section 1 Which Controls Lower-Tier Company	Column 6, Section 1	Number of Shares	Outstanding
	_				
0399999 - Total				XXX	XXX

SCHEDULE DA - PART 1

Showing All SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1 Codes 4 5 6				7			usted Carrying		12	13			Intere	est		20		
2	3					8	9	10	11			14	15	16	17	18	19	
									Total									
								Current	Foreign			Amount Due						
								Year's	Exchange			and Accrued						
							Current	Other-	Change in			Dec. 31 of						
					Book/	Unrealized	Year's	Than-	Book/			Current Year	Non-				Amount	
	_	.			Adjusted	Valuation	(Amor-	Temporary	Adjusted			on Bond	Admitted		Effective		Received	Paid for
	For-	Date		Maturity	Carrying	Increase/	tization)/	Impairment	Carrying	5		Not	Due and	Rate	Rate	When	During	Accrued
Description Co	de eign	Acquired		Date	Value	(Decrease)	Accretion	Recognized	Value	Par Value	Actual Cost	in Default	Accrued	of	of	Paid	Year	Interest
UNITED STATES TREASURY			GOLDMAN, SACHS & CO	01/12/2021		0		0	0			0	0	0.000 XXX	0.094 XXX	N/A XXX	0	0
0599999. Total - U.S. Government Bonds	- 155u	er Obligatior	15		249,993 249,993	0	60 60	0	0	250,000 250,000	249,933 249,933	0	0	XXX	XXX	XXX	0	0
1099999. Total - All Other Government Bonds	ds				249,393	0	00	0	0	250,000	249,933	0	0	XXX	XXX	XXX	0	0
1799999. Total - U.S. States, Territories and		ions Bonds			0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
2499999. Total - U.S. Political Subdivisions					0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
3199999. Total - U.S. Special Revenues Bo	nds				0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
3899999. Total - Industrial and Miscellaneo	us (Unaffili	iated) Bonds	3		0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
4899999. Total - Hybrid Securities					0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
5599999. Total - Parent, Subsidiaries and A	ffiliates Bo	onds			0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
6099999. Subtotal - SVO Identified Funds					0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
6599999. Subtotal - Unaffiliated Bank Loans	3				0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
7699999. Total - Issuer Obligations					249,993	0	60	0	0	250,000	249,933	0	0	XXX	XXX	XXX	0	0
7799999. Total - Residential Mortgage-Back					0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
7899999. Total - Commercial Mortgage-Bac					0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
7999999. Total - Other Loan-Backed and S	ructured S	Securities			0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
8099999. Total - SVO Identified Funds					0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
8199999. Total - Affiliated Bank Loans			0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0		
8299999. Total - Unaffiliated Bank Loans			0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0		
8399999. Total Bonds				249,993	0	60	0	0	250,000	249,933	0	0	XXX	XXX	XXX	0	0	
8699999. Total - Parent, Subsidiaries and A	ffiliates				0	0	0	0	0	XXX	0	0	0	XXX	XXX	XXX	0	0
9199999 - Totals					249,993	0	60	0	0	XXX	249,933	0	0	XXX	XXX	XXX	0	0

 Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

 1A ..\$
 ...249,993
 1B ...\$
 ...0
 1C ...\$

 2A ..\$
 ...0
 2B ...\$
 ...0
 2C ...\$
 0 1D...\$ _____0 1E...\$_____0 1F...\$_____0 1G...\$_____0 ...0 0 3B...\$ 0 3C...\$ 3A ..\$. 0 0 4B...\$ 0 4C...\$ 4A..\$... ...0 5A ..\$.. ____0 5B...\$ 0 5C \$ 0 6....\$...0

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open **NONE**

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated **NONE**

Schedule DB - Part B - Section 1 - Futures Contracts Open **NONE**

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE**

Schedule DB - Part B - Section 2 - Futures Contracts Terminated **NONE**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open **NONE**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By **NONE**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To **NONE**

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees as of December 31 of Current Year

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Schedule DL - Part 1 - Reinvested Collateral Assets Owned **NONE**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

NONE

1	2	3	4 Amount of Interest	5 Amount of Interest	6	7
		Rate of		Accrued December 31		
Depository	Code	Interest	Year	of Current Year	Balance	*
Key Bank Cleveland OH		0.000	0	0		XXX
JS Bank	SD	0.000	0	0		XXX
Century Trust		0.000	0	0		XXX
Wells Fargo Charlotte, NC	SD	0.000	0	0		XXX.
0199998 Deposits in 0 depositories which do not exceed the						
allowable limit in any one depository (See instructions) - open						
depositories	XXX	XXX	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	21,159,711	XXX
0299998 Deposits in 0 depositories which do not exceed the						
allowable limit in any one depository (See instructions) - suspended						
depositories	XXX	XXX	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	21,159,711	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	XXX
				<u> </u>		
0599999 Total - Cash	XXX	XXX	0	0	21,159,711	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1.	January		4.	April		7.	July		10.	October	
2.	February		5.	May		8.	August		11.	November	
3.	March	13,556,781	6.	June	13,852,096	9.	September	14,789,271	12.	December	21, 159, 711

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

		ments Owne	a December 31 of C		1	P.		
1	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0599999. Tota	I - U.S. Government Bonds					0	0	0
1099999. Tota	I - All Other Government Bonds					0	0	0
1799999. Tota	I - U.S. States, Territories and Possessions Bonds					0	0	0
	I - U.S. Political Subdivisions Bonds					0	0	0
	I - U.S. Special Revenues Bonds					0	0	0
	I - Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
	I - Hybrid Securities					0	0	0
5599999. Tota	I - Parent, Subsidiaries and Affiliates Bonds					0	0	0
	otal - SVO Identified Funds					0	0	0
	otal - Unaffiliated Bank Loans					0	0	0
	- Issuer Obligations					0	0	0
	I - Residential Mortgage-Backed Securities					0		
	I - Commercial Mortgage-Backed Securities					0	<u></u>	0
	- Other Loan-Backed and Structured Securities					0	0	0
	I - SVO Identified Funds					0	0	0
	- Affiliated Bank Loans					0	0	0
	I - Unaffiliated Bank Loans					0	0	0
8399999. Tota						0	0	0
	FIRST AMER:TRS OBG V	SD.		.0.010				
31846V-80-7	FIRST AMER:TRS OBG Y	SD		0.010				
	FEDERATED HRMS TRS INST			0.010			0	
	WELLSFARG0:TRS+ IMI I	SD		0.010			1	
	otal - Exempt Money Market Mutual Funds - as Identified by the SVO			1		3,282,248	15	10,476
	FIRST AMER: GVT OBLG T	SD		0.010			0	0
	WELLSFARGO:GOVT MM I RBS CITIZENS NA CASH SWEEP	SD		0.010				
	otal - All Other Money Market Mutual Funds	SD		0.000			0	3,291
00999999. Subi						685,41/	0	3,291
8899999 - Tota	al Cash Equivalents					3,967,665	15	13,768

2A ..\$ 0 2B...\$ 0 2C..\$...0 0 3B..\$ 3A ..\$ 0 3C...\$..0 4A..\$ 0 4B...\$ 0 4C...\$0 5A..\$.0 5B...\$.0 5C...\$.. 0 6\$... 0

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ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Falls Lake National Insurance Company SCHEDULE E - PART 3 - SPECIAL DEPOSITS

		1	JULE E - PART 3 - SPE 2	Deposit	s For the Policyholders	All Other Spe	cial Deposits
		Turne of		3	4	5	6
	States, Etc.	Type of Deposit	Purpose of Deposit	Book/Adjusted Carrying Value	Fair Value	Book/Adjusted Carrying Value	Fair Value
1.	AlabamaA	L		0	0	0	(
2.	AlaskaAl	<		0	0	0	(
3.	ArizonaA				0	0	
4.	ArkansasAl		COLLATERAL SECURITIES FOR THE AR DOI	155,618	171,405	0	(
5.	CaliforniaCa			0	0	0	(
6.	ColoradoCo			0	0	0	
7.	ConnecticutC DelawareD		COLLATERAL SECURITIES FOR THE DE DOI	0 		0 0	
8. 9.	District of Columbia				0	0	
9. 10.	FloridaF			0	0	0	
10.	GeorgiaG		COLLATERAL SECURITIES FOR THE GA DOI			0	(
	Hawaii					0	(
13.	IdahoII		COLLATERAL SECURITIES FOR THE ID DOI			0	
14.	Illinois			0	0	0	
15.	IndianaII			0	0	0	
16.	lowa			0	0	0	
17.	KansasK	3		0	0	0	(
18.	KentuckyK			0	0	0	
	LouisianaL			0	0	0	(
	MaineM			0	0	0	(
	MarylandMI			0	0	0	(
22.	MassachusettsM		COLLATERAL, SECURITIES FOR THE MA DOI		0		
	MichiganN			0	0	0	(
24. 25	MinnesotaMI			0	0	0	(
25. 26.	MississippiMs MissouriMs			0 0	0	0 0	(
			COLLATERAL SECURITIES FOR THE MT	0	0	0	
27.	MontanaM	ISI	DOI, COLLATERAL SECURITES FOR MT DOI WRK COMP				
						0	(
28.	NebraskaNI	≣		0	0	0	(
29.	NevadaN	/ST	COLLATERAL SECURITIES FOR THE NV DOI			0	
	New HampshireNI		COLLATERAL SECURITIES FOR THE NH DOI			0	(
31.	New JerseyN	J		0	0	0	(
32.	New MexicoN		COLLATERAL SECURITIES FOR THE NM DOI			0	(
33.	New YorkN				0	0	(
	North Carolina		COLLATERAL SECURITIES FOR THE NC DOI			0	(
35.	North DakotaNI			0	0	0	(
36.	OhioOl		COLLATERAL SECURITIES FOR THE OH DOI		4,809,783	0	(
	OklahomaOl				0	0	(
38.	Oregon OI		COLLATERAL SECURITIES FOR THE OR DOI			0	
	PennsylvaniaPr			0	0	0	(
	Rhode Island			0	0	0 0	(
				0 0	0	0	l
42. 43.	South Dakota			0	0	0	
43. 44.	Texas			0	0	0	U
	Utah			0	0	0	
45. 46.	Vermont				0	0	
	Virginia		COLLATERAL SECURITIES FOR THE VA DOI				
	Washington			0		0	(
	West Virginia			0	0	0	(
50.	Wisconsin			0	0	0	(
	WyomingW			0	0	0	(
	American SamoaAs			0	0	0	(
	GuamGl			0	0	0	(
	Puerto RicoPI			0	0	0	(
	U.S. Virgin Islands			0	0	0	(
56.	Northern Mariana IslandsMI			0	0	0	(
57.	CanadaCAI			0	0	0	(
58.	Aggregate Alien and Other	r xxx	XXX	0	0	0	(
59.	Subtotal	XXX	XXX	8,049,465	8,289,035	226,941	261,246
	DETAILS OF WRITE-INS						
5801.							
5802.							
5803.							
5898.	Summary of remaining write-ins for						
	Line 58 from overflow page	XXX	XXX	0	0	0	!
	Totals (Lines 5801 thru 5803 plus						



Designate the type of health care providers reported on this page:

SUPPLEMENT "A" TO SCHEDULE T EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN ALLOCATED BY STATES AND TERRITORIES

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