

QUARTERLY STATEMENT

OF THE

USAble HMO

Of

Little Rock

in the state of AR

to the Insurance Department

of the State of Arkansas

For the Period Ended

June 30, 2020

2020



HEALTH QUARTERLY STATEMENT

As of June 30, 2020
of the Condition and Affairs of the
USable HMO

NAIC Group Code.....876, 876 (Current Period) (Prior Period) NAIC Company Code..... 16751 Employer's ID Number..... 84-4571869

Organized under the Laws of Arkansas State of Domicile or Port of Entry Arkansas Country of Domicile US

Licensed as Business Type Health Maintenance Organization Is HMO Federally Qualified? Yes [X] No []

Incorporated/Organized..... October 19, 2015 Commenced Business..... January 1, 2021

Statutory Home Office 601 S. Gaines .. Little Rock .. AR .. US .. 72201
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 601 S. Gaines .. Little Rock .. AR .. US .. 72201 501-378-2000
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 601 S. Gaines .. Little Rock .. AR .. US .. 72201
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 601 S. Gaines .. Little Rock .. AR .. US .. 72201 501-378-2000
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address N/A

Statutory Statement Contact Scott Bradley Winter 501-399-3951
(Name) (Area Code) (Telephone Number) (Extension)
sbwinter@arkbluecross.com 501-378-3258
(E-Mail Address) (Fax Number)

OFFICERS

| Name | Title | Name | Title |
|--------------------------|-----------|-------------------------|-----------|
| 1. Gray Donald Dillard | President | 2. Scott Bradley Winter | Treasurer |
| 3. Timothy Gerard Gauger | Secretary | 4. | |

OTHER

Calvin Eugene Kellogg

DIRECTORS OR TRUSTEES

Gray Donald Dillard Calvin Eugene Kellogg Scott Bradley Winter

State of..... Arkansas
County of..... Pulaski

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) Gray Donald Dillard _____ 1. (Printed Name) _____ President _____ (Title) | _____ (Signature) Scott Bradley Winter _____ 2. (Printed Name) _____ Treasurer _____ (Title) | _____ (Signature) Timothy Gerard Gauger _____ 3. (Printed Name) _____ Secretary _____ (Title) |
|---|--|---|

Subscribed and sworn to before me
This _____ day of _____

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

ASSETS

| | Current Statement Date | | | 4 Prior Year Net Admitted Assets |
|--|------------------------|----------------------------|--|--|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds..... | 44,794,560 | | 44,794,560 | |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks..... | | | .0 | |
| 2.2 Common stocks..... | | | .0 | |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens..... | | | .0 | |
| 3.2 Other than first liens..... | | | .0 | |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$.....0 encumbrances)..... | | | .0 | |
| 4.2 Properties held for the production of income (less \$.....0 encumbrances)..... | | | .0 | |
| 4.3 Properties held for sale (less \$.....0 encumbrances)..... | | | .0 | |
| 5. Cash (\$.....0), cash equivalents (\$.....1,682,194) and short-term investments (\$.....0)..... | 1,682,194 | | 1,682,194 | |
| 6. Contract loans (including \$.....0 premium notes)..... | | | .0 | |
| 7. Derivatives..... | | | .0 | |
| 8. Other invested assets..... | | | .0 | |
| 9. Receivables for securities..... | | | .0 | |
| 10. Securities lending reinvested collateral assets..... | | | .0 | |
| 11. Aggregate write-ins for invested assets..... | .0 | .0 | .0 | .0 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11)..... | 46,476,754 | .0 | 46,476,754 | .0 |
| 13. Title plants less \$.....0 charged off (for Title insurers only)..... | | | .0 | |
| 14. Investment income due and accrued..... | 129,461 | | 129,461 | |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection..... | | | .0 | |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums)..... | | | .0 | |
| 15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0)..... | | | .0 | |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers..... | | | .0 | |
| 16.2 Funds held by or deposited with reinsured companies..... | | | .0 | |
| 16.3 Other amounts receivable under reinsurance contracts..... | | | .0 | |
| 17. Amounts receivable relating to uninsured plans..... | | | .0 | |
| 18.1 Current federal and foreign income tax recoverable and interest thereon..... | | | .0 | |
| 18.2 Net deferred tax asset..... | | | .0 | |
| 19. Guaranty funds receivable or on deposit..... | | | .0 | |
| 20. Electronic data processing equipment and software..... | | | .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 | |
| 23. Receivables from parent, subsidiaries and affiliates..... | | | .0 | |
| 24. Health care (\$.....0) and other amounts receivable..... | | | .0 | |
| 25. Aggregate write-ins for other than invested assets..... | .0 | .0 | .0 | .0 |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)..... | 46,606,215 | .0 | 46,606,215 | .0 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | | .0 | |
| 28. Total (Lines 26 and 27)..... | 46,606,215 | .0 | 46,606,215 | .0 |

DETAILS OF WRITE-INS

| | | | | |
|--|----|----|----|----|
| 1101..... | | | .0 | |
| 1102..... | | | .0 | |
| 1103..... | | | .0 | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page..... | .0 | .0 | .0 | .0 |
| 1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)..... | .0 | .0 | .0 | .0 |
| 2501..... | | | .0 | |
| 2502..... | | | .0 | |
| 2503..... | | | .0 | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page..... | .0 | .0 | .0 | .0 |
| 2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)..... | .0 | .0 | .0 | .0 |

LIABILITIES, CAPITAL AND SURPLUS

| | Current Period | | | Prior Year |
|--|----------------|----------------|------------|------------|
| | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
| 1. Claims unpaid (less \$.....0 reinsurance ceded)..... | | | .0 | |
| 2. Accrued medical incentive pool and bonus amounts..... | | | .0 | |
| 3. Unpaid claims adjustment expenses..... | | | .0 | |
| 4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act..... | | | .0 | |
| 5. Aggregate life policy reserves..... | | | .0 | |
| 6. Property/casualty unearned premium reserve..... | | | .0 | |
| 7. Aggregate health claim reserves..... | | | .0 | |
| 8. Premiums received in advance..... | | | .0 | |
| 9. General expenses due or accrued..... | | | .0 | |
| 10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses))..... | 59,945 | | 59,945 | |
| 10.2 Net deferred tax liability..... | | | .0 | |
| 11. Ceded reinsurance premiums payable..... | | | .0 | |
| 12. Amounts withheld or retained for the account of others..... | | | .0 | |
| 13. Remittances and items not allocated..... | | | .0 | |
| 14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current)..... | | | .0 | |
| 15. Amounts due to parent, subsidiaries and affiliates..... | 1,847 | | 1,847 | |
| 16. Derivatives..... | | | .0 | |
| 17. Payable for securities..... | | | .0 | |
| 18. Payable for securities lending..... | | | .0 | |
| 19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and certified \$.....0 reinsurers)..... | | | .0 | |
| 20. Reinsurance in unauthorized and certified (\$.....0) companies..... | | | .0 | |
| 21. Net adjustments in assets and liabilities due to foreign exchange rates..... | | | .0 | |
| 22. Liability for amounts held under uninsured plans..... | | | .0 | |
| 23. Aggregate write-ins for other liabilities (including \$.....0 current)..... | .0 | .0 | .0 | .0 |
| 24. Total liabilities (Lines 1 to 23)..... | 61,792 | .0 | 61,792 | .0 |
| 25. Aggregate write-ins for special surplus funds..... | XXX | XXX | .0 | .0 |
| 26. Common capital stock..... | XXX | XXX | 46,320,610 | |
| 27. Preferred capital stock..... | XXX | XXX | | |
| 28. Gross paid in and contributed surplus..... | XXX | XXX | | |
| 29. Surplus notes..... | XXX | XXX | | |
| 30. Aggregate write-ins for other than special surplus funds..... | XXX | XXX | .0 | .0 |
| 31. Unassigned funds (surplus)..... | XXX | XXX | 223,813 | |
| 32. Less treasury stock, at cost: | | | | |
| 32.10.000 shares common (value included in Line 26 \$.....0)..... | XXX | XXX | | |
| 32.20.000 shares preferred (value included in Line 27 \$.....0)..... | XXX | XXX | | |
| 33. Total capital and surplus (Lines 25 to 31 minus Line 32)..... | XXX | XXX | 46,544,423 | .0 |
| 34. Total liabilities, capital and surplus (Lines 24 and 33)..... | XXX | XXX | 46,606,215 | .0 |

DETAILS OF WRITE-INS

| | | | | |
|--|-----|-----|----|----|
| 2301. | | | .0 | |
| 2302. | | | .0 | |
| 2303. | | | .0 | |
| 2398. Summary of remaining write-ins for Line 23 from overflow page..... | .0 | .0 | .0 | .0 |
| 2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)..... | .0 | .0 | .0 | .0 |
| 2501. | | | | |
| 2502. | | | | |
| 2503. | | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page..... | XXX | XXX | .0 | .0 |
| 2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)..... | XXX | XXX | .0 | .0 |
| 3001. | | | | |
| 3002. | | | | |
| 3003. | | | | |
| 3098. Summary of remaining write-ins for Line 30 from overflow page..... | XXX | XXX | .0 | .0 |
| 3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above)..... | XXX | XXX | .0 | .0 |

STATEMENT OF REVENUE AND EXPENSES

| | Current Year To Date | | Prior Year To Date | Prior Year Ended December 31 |
|--|-------------------------|------------|-----------------------|---------------------------------|
| | 1 Uncovered | 2 Total | 3 Total | 4 Total |
| 1. Member months..... | .XXX | | | |
| 2. Net premium income (including \$.....0 non-health premium income)..... | .XXX | | | |
| 3. Change in unearned premium reserves and reserve for rate credits..... | .XXX | | | |
| 4. Fee-for-service (net of \$.....0 medical expenses)..... | .XXX | | | |
| 5. Risk revenue..... | .XXX | | | |
| 6. Aggregate write-ins for other health care related revenues..... | .XXX | .0 | .0 | .0 |
| 7. Aggregate write-ins for other non-health revenues..... | .XXX | .0 | .0 | .0 |
| 8. Total revenues (Lines 2 to 7)..... | .XXX | .0 | .0 | .0 |
| Hospital and Medical: | | | | |
| 9. Hospital/medical benefits..... | | | | |
| 10. Other professional services..... | | | | |
| 11. Outside referrals..... | | | | |
| 12. Emergency room and out-of-area..... | | | | |
| 13. Prescription drugs..... | | | | |
| 14. Aggregate write-ins for other hospital and medical..... | .0 | .0 | .0 | .0 |
| 15. Incentive pool, withhold adjustments and bonus amounts..... | | | | |
| 16. Subtotal (Lines 9 to 15)..... | .0 | .0 | .0 | .0 |
| Less: | | | | |
| 17. Net reinsurance recoveries..... | | | | |
| 18. Total hospital and medical (Lines 16 minus 17)..... | .0 | .0 | .0 | .0 |
| 19. Non-health claims (net)..... | | | | |
| 20. Claims adjustment expenses, including \$.....0 cost containment expenses..... | | | | |
| 21. General administrative expenses..... | | | | |
| 22. Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only)..... | | | | |
| 23. Total underwriting deductions (Lines 18 through 22)..... | .0 | .0 | .0 | .0 |
| 24. Net underwriting gain or (loss) (Lines 8 minus 23)..... | .XXX | .0 | .0 | .0 |
| 25. Net investment income earned..... | | .283,758 | | |
| 26. Net realized capital gains (losses) less capital gains tax of \$.....0..... | | | | |
| 27. Net investment gains or (losses) (Lines 25 plus 26)..... | .0 | .283,758 | .0 | .0 |
| 28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)]..... | | | | |
| 29. Aggregate write-ins for other income or expenses..... | .0 | .0 | .0 | .0 |
| 30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)..... | .XXX | .283,758 | .0 | .0 |
| 31. Federal and foreign income taxes incurred..... | .XXX | .59,945 | | |
| 32. Net income (loss) (Lines 30 minus 31)..... | .XXX | .223,813 | .0 | .0 |

DETAILS OF WRITE-INS

| | | | | |
|--|------|----|----|----|
| 0601. | .XXX | | | |
| 0602. | .XXX | | | |
| 0603. | .XXX | | | |
| 0698. Summary of remaining write-ins for Line 6 from overflow page..... | .XXX | .0 | .0 | .0 |
| 0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)..... | .XXX | .0 | .0 | .0 |
| 0701. | .XXX | | | |
| 0702. | .XXX | | | |
| 0703. | .XXX | | | |
| 0798. Summary of remaining write-ins for Line 7 from overflow page..... | .XXX | .0 | .0 | .0 |
| 0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above)..... | .XXX | .0 | .0 | .0 |
| 1401. | | | | |
| 1402. | | | | |
| 1403. | | | | |
| 1498. Summary of remaining write-ins for Line 14 from overflow page..... | .0 | .0 | .0 | .0 |
| 1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)..... | .0 | .0 | .0 | .0 |
| 2901. | | | | |
| 2902. | | | | |
| 2903. | | | | |
| 2998. Summary of remaining write-ins for Line 29 from overflow page..... | .0 | .0 | .0 | .0 |
| 2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)..... | .0 | .0 | .0 | .0 |

STATEMENT OF REVENUE AND EXPENSES (Continued)

| CAPITAL AND SURPLUS ACCOUNT | 1 Current Year to Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| 33. Capital and surplus prior reporting year..... | 0 | | |
| 34. Net income or (loss) from Line 32..... | 223,813 | | |
| 35. Change in valuation basis of aggregate policy and claim reserves..... | | | |
| 36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0..... | | | |
| 37. Change in net unrealized foreign exchange capital gain or (loss)..... | | | |
| 38. Change in net deferred income tax..... | | | |
| 39. Change in nonadmitted assets..... | | | |
| 40. Change in unauthorized and certified reinsurance..... | | | |
| 41. Change in treasury stock..... | | | |
| 42. Change in surplus notes..... | | | |
| 43. Cumulative effect of changes in accounting principles..... | | | |
| 44. Capital changes: | | | |
| 44.1 Paid in..... | 46,320,610 | | |
| 44.2 Transferred from surplus (Stock Dividend)..... | | | |
| 44.3 Transferred to surplus..... | | | |
| 45. Surplus adjustments: | | | |
| 45.1 Paid in..... | | | |
| 45.2 Transferred to capital (Stock Dividend)..... | | | |
| 45.3 Transferred from capital..... | | | |
| 46. Dividends to stockholders..... | | | |
| 47. Aggregate write-ins for gains or (losses) in surplus..... | 0 | 0 | 0 |
| 48. Net change in capital and surplus (Lines 34 to 47)..... | 46,544,423 | 0 | 0 |
| 49. Capital and surplus end of reporting period (Line 33 plus 48)..... | 46,544,423 | 0 | 0 |

DETAILS OF WRITE-INS

| | | | |
|--|---|---|---|
| 4701. | | | |
| 4702. | | | |
| 4703. | | | |
| 4798. Summary of remaining write-ins for Line 47 from overflow page..... | 0 | 0 | 0 |
| 4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above)..... | 0 | 0 | 0 |

CASH FLOW

| | 1 Current Year to Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| CASH FROM OPERATIONS | | | |
| 1. Premiums collected net of reinsurance..... | | | |
| 2. Net investment income..... | 145,362 | | |
| 3. Miscellaneous income..... | | | |
| 4. Total (Lines 1 through 3)..... | 145,362 | .0 | .0 |
| 5. Benefit and loss related payments..... | | | |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts..... | | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions..... | | | |
| 8. Dividends paid to policyholders..... | | | |
| 9. Federal and foreign income taxes paid (recovered) net of \$.0 tax on capital gains (losses)..... | | | |
| 10. Total (Lines 5 through 9)..... | .0 | .0 | .0 |
| 11. Net cash from operations (Line 4 minus Line 10)..... | 145,362 | .0 | .0 |
| CASH FROM INVESTMENTS | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 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..... | | | |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7)..... | .0 | .0 | .0 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds..... | 44,785,624 | | |
| 13.2 Stocks..... | | | |
| 13.3 Mortgage loans..... | | | |
| 13.4 Real estate..... | | | |
| 13.5 Other invested assets..... | | | |
| 13.6 Miscellaneous applications..... | | | |
| 13.7 Total investments acquired (Lines 13.1 to 13.6)..... | 44,785,624 | .0 | .0 |
| 14. Net increase or (decrease) in contract loans and premium notes..... | | | |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)..... | (44,785,624) | .0 | .0 |
| CASH FROM FINANCING AND MISCELLANEOUS SOURCES | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes..... | | | |
| 16.2 Capital and paid in surplus, less treasury stock..... | 46,320,610 | | |
| 16.3 Borrowed funds..... | | | |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities..... | | | |
| 16.5 Dividends to stockholders..... | | | |
| 16.6 Other cash provided (applied)..... | 1,847 | | |
| 17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)..... | 46,322,457 | .0 | .0 |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)..... | 1,682,194 | .0 | .0 |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year..... | .0 | | |
| 19.2 End of period (Line 18 plus Line 19.1)..... | 1,682,194 | .0 | .0 |

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

| | | | |
|---------------|--|--|--|
| 20.0001 | | | |
|---------------|--|--|--|

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

| | 1 Total | Comprehensive (Hospital & Medical) | | 4 Medicare Supplement | 5 Vision Only | 6 Dental Only | 7 Federal Employees Health Benefit Plan | 8 Title XVIII Medicare | 9 Title XIX Medicaid | 10 Other |
|--|------------|------------------------------------|------------|-----------------------------|---------------------|---------------------|---|------------------------------|----------------------------|-------------|
| | | 2 Individual | 3 Group | | | | | | | |
| Total Members at End of: | | | | | | | | | | |
| 1. Prior Year..... | .0 | | | | | | | | | |
| 2. First Quarter..... | .0 | | | | | | | | | |
| 3. Second Quarter..... | .0 | | | | | | | | | |
| 4. Third Quarter..... | .0 | | | | | | | | | |
| 5. Current Year..... | .0 | | | | | | | | | |
| 6. Current Year Member Months..... | .0 | | | | | | | | | |
| Total Member Ambulatory Encounters for Period: | | | | | | | | | | |
| 7. Physician..... | .0 | | | | | | | | | |
| 8. Non-Physician..... | .0 | | | | | | | | | |
| 9. Total..... | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 | .0 |
| 10. Hospital Patient Days Incurred..... | .0 | | | | | | | | | |
| 11. Number of Inpatient Admissions..... | .0 | | | | | | | | | |
| 12. Health Premiums Written (a)..... | .0 | | | | | | | | | |
| 13. Life Premiums Direct..... | .0 | | | | | | | | | |
| 14. Property/Casualty Premiums Written..... | .0 | | | | | | | | | |
| 15. Health Premiums Earned..... | .0 | | | | | | | | | |
| 16. Property/Casualty Premiums Earned..... | .0 | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services..... | .0 | | | | | | | | | |
| 18. Amount Incurred for Provision of Health Care Services..... | .0 | | | | | | | | | |

007

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

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

Aging Analysis of Unpaid Claims

| 1 Account | 2 1 - 30 Days | 3 31 - 60 Days | 4 61 - 90 Days | 5 91 - 120 Days | 6 Over 120 Days | 7 Total |
|--------------|------------------|-------------------|-------------------|--------------------|--------------------|------------|
|--------------|------------------|-------------------|-------------------|--------------------|--------------------|------------|

UNDERWRITING AND INVESTMENT EXHIBIT

Analysis of Claims Unpaid - Prior Year - Net of Reinsurance

| Line of Business | Claims Paid Year to Date | | Liability End of Current Quarter | | 5 Claims Incurred in Prior Years (Columns 1 + 3) | 6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year |
|--|--|---|---|---|---|---|
| | 1 On Claims Incurred Prior to January 1 of Current Year | 2 On Claims Incurred During the Year | 3 On Claims Unpaid December 31 of Prior Year | 4 On Claims Incurred During the Year | | |
| 1. Comprehensive (hospital and medical)..... | | | | | .0 | |
| 2. Medicare Supplement..... | | | | | .0 | |
| 3. Dental only..... | | | | | .0 | |
| 4. Vision only..... | | | | | .0 | |
| 5. Federal Employees Health Benefits Plan..... | | | | | .0 | |
| 6. Title XVIII - Medicare..... | | | | | .0 | |
| 7. Title XIX - Medicaid..... | | | | | .0 | |
| 8. Other health..... | | | | | .0 | |
| 9. Health subtotal (Lines 1 to 8)..... | .0 | .0 | .0 | .0 | .0 | .0 |
| 10. Healthcare receivables (a)..... | | | | | .0 | |
| 11. Other non-health..... | | | | | .0 | |
| 12. Medical incentive pools and bonus amounts..... | | | | | .0 | |
| 13. Totals (Lines 9-10+11+12)..... | .0 | .0 | .0 | .0 | .0 | .0 |

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

NOTES TO FINANCIAL STATEMENTS**Note 1 – Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

The financial statements of the company are presented on the basis of accounting practices prescribed or permitted by the Arkansas Insurance Department.

The Arkansas Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Arkansas for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Arkansas Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual, version effective January 1, 2001, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Arkansas.

| | SSAP # | F/S Page | F/S Line # | Current Year to Date | 2019 |
|--|--------|----------|------------|----------------------|------|
| NET INCOME | | | | | |
| (1) USAbLe HMO Company state basis (Page 4, Line 32, Columns 2 & 4) | XXX | XXX | XXX | \$ 223,813 | \$ |
| (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 | \$ 223,813 | \$ |
| SURPLUS | | | | | |
| (5) USAbLe HMO Company state basis (Page 3, line 33, Columns 3 & 4) | XXX | XXX | XXX | \$ 46,544,423 | \$ |
| (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 | \$ 46,544,423 | \$ |

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

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

Given that these companies are in the start-up process, there are no current premiums written for this organizations.

- (1) Basis for Short-Term Investments
Short-term investments are stated at amortized cost.
- (2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method
Bonds not backed by other loans are stated at amortized cost using the interest method.
- (3) Basis for Common Stocks
The Company does not have common stocks.
- (4) Basis for Preferred Stocks
The Company does not have preferred stocks.
- (5) Basis for Mortgage Loans
The Company does not have mortgage loans.
- (6) Basis for Loan-Backed Securities and Adjustment Methodology
The Company does not have loan-back securities.
- (7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities
The Company does not have any investments in subsidiaries.
- (8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities
The Company does not have any investments in joint ventures, partnerships, or limited liability companies.
- (9) Accounting Policies for Derivatives
The Company does not have any derivatives.
- (10) Anticipated Investment Income Used in Premium Deficiency Calculation
The Company does not anticipate investment income as a factor in the premium deficiency calculation.
- (11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses
The Company does not have any losses or loss adjustment expense at this time. At which time normal operations begin, the company will estimate the impact on potential liabilities, losses, and loss adjustment expense.
- (12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period
The Company's Capitalization Policy sets the capitalization threshold at \$1,500.
- (13) Method Used to Estimate Pharmaceutical Rebate Receivables
The Company does not have pharmacy rebates as of March 31, 2020.

D. Going Concern

For the period ending June 30, 2020 management has evaluated the Company's ability to continue as a going concern. Management has concluded that there is not substantial doubt that the Company can continue as a going concern, therefore, there are no policies in place to alleviate such situations.

Note 2 – Accounting Changes and Corrections of Errors

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Arkansas. There were no accounting changes or correction of errors during 2019.

Note 3 – Business Combinations and Goodwill

The Company had no business combination or goodwill as of June 30, 2020.

Note 4 – Discontinued Operations

NOTES TO FINANCIAL STATEMENTS

The Company had no discontinued operations as of June 30, 2020.

Note 5 – Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
Not Applicable
- B. Debt Restructuring
Not Applicable
- C. Reverse Mortgages
Not Applicable
- D. Loan-Backed Securities
- (1) Description of Sources Used to Determine Prepayment Assumptions
The company has no loan-backed securities at this time.
 - (2) Other-Than-Temporary Impairments

| | 1 Amortized Cost Basis Before Other-than-Temporary Impairment | 2 Other-than-Temporary Impairment Recognized in Loss | 3 Fair Value 1 – 2 |
|---|---|---|--------------------------|
| OTTI Recognized 1 st Quarter | | | |
| a. Intent to sell | \$ | \$ | \$ |
| b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis | | | |
| c. Total 1 st Quarter | \$ | \$ | \$ |
| OTTI Recognized 2 nd Quarter | | | |
| d. Intent to sell | \$ | \$ | \$ |
| e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis | | | |
| f. Total 2 nd Quarter | \$ | \$ | \$ |
| OTTI Recognized 3 rd Quarter | | | |
| g. Intent to sell | \$ | \$ | \$ |
| h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis | | | |
| i. Total 3 rd Quarter | \$ | \$ | \$ |
| OTTI Recognized 4 th Quarter | | | |
| j. Intent to sell | \$ | \$ | \$ |
| k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis | | | |
| l. Total 4 th Quarter | \$ | \$ | \$ |
| m. Annual aggregate total | XXX | | XXX |

(3) Recognized OTTI securities

| CUSIP | Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI | Present Value of Projected Cash Flows | Recognized Other-Than-Temporary Impairment | Amortized Cost After Other-Than-Temporary Impairment | Fair Value at Time of OTTI | Date of Financial Statement Where Reported |
|-------|--|---------------------------------------|--|--|----------------------------|--|
| | \$ | \$ | \$ | \$ | \$ | |
| Total | | | \$ | | | |

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

| | | |
|---|------------------------|----|
| a. The aggregate amount of unrealized losses: | 1. Less than 12 Months | \$ |
| | 2. 12 Months or Longer | \$ |
| b. The aggregate related fair value of securities with unrealized losses: | 1. Less than 12 Months | \$ |
| | 2. 12 Months or Longer | \$ |

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary
The Company has no impairments that are not Other-Than-Temporary.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
- (1) Policy for Requiring Collateral or Other Security
Not Applicable
 - (2) Disclose the Carrying Amount and Classification of Both Assets and Liabilities
Not Applicable
 - (3) Collateral Received

NOTES TO FINANCIAL STATEMENTS

- a. Aggregate Amount Collateral Received
Not Applicable
- b. The Fair Value of that Collateral and of the Portion of that Collateral that it has Sold or Repledged \$ _____
- c. Information about Sources and Uses of Collateral
Not Applicable
- (4) Aggregate Value of the Reinvested Collateral
Not Applicable
- (5) Collateral Reinvestment
Not Applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
Repurchase Transaction – Cash Taker – Overview of Secured Borrowing Transactions

(1) Company Policies or Strategies for Repo Programs

(2) Type of Repo Trades Used

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-----------------------|---------------|----------------|---------------|----------------|
| a. Bilateral (YES/NO) | | | | |
| b. Tri-Party (YES/NO) | | | | |

(3) Original (Flow) and Residual Maturity

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-------------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Open – No Maturity | \$ | \$ | \$ | \$ |
| 2. Overnight | \$ | \$ | \$ | \$ |
| 3. 2 Days to 1 Week | \$ | \$ | \$ | \$ |
| 4. >1 Week to 1 Month | \$ | \$ | \$ | \$ |
| 5. >1 Month to 3 Months | \$ | \$ | \$ | \$ |
| 6. >3 Months to 1 Year | \$ | \$ | \$ | \$ |
| 7. > 1 Year | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. Open – No Maturity | \$ | \$ | \$ | \$ |
| 2. Overnight | \$ | \$ | \$ | \$ |
| 3. 2 Days to 1 Week | \$ | \$ | \$ | \$ |
| 4. >1 Week to 1 Month | \$ | \$ | \$ | \$ |
| 5. >1 Month to 3 Months | \$ | \$ | \$ | \$ |
| 6. >3 Months to 1 Year | \$ | \$ | \$ | \$ |
| 7. > 1 Year | \$ | \$ | \$ | \$ |

(4) Fair Value Securities Sold and/or Acquired that Resulted in Default

(5) Securities "Sold" Under Repo – Secured Borrowing

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|---------------------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. BACV | XXX | XXX | XXX | \$ |
| 2. Nonadmitted – Subset of BACV | XXX | XXX | XXX | \$ |
| 3. Fair Value | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. BACV | XXX | XXX | XXX | \$ |
| 2. Nonadmitted – Subset of BACV | XXX | XXX | XXX | \$ |
| 3. Fair Value | \$ | \$ | \$ | \$ |

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation

| Ending Balance | 1 None | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|--------------------------------|-----------|-------------|-------------|-------------|
| a. Bonds- BACV | \$ | \$ | \$ | \$ |
| b. Bonds- FV | | | | |
| c. LB & SS- BACV | | | | |
| d. LB & SS- FV | | | | |
| e. Preferred Stock- BACV | | | | |
| f. Preferred Stock- FV | | | | |
| g. Common Stock | | | | |
| h. Mortgage Loans- BACV | | | | |
| i. Mortgage Loans- FV | | | | |
| j. Real Estate- BACV | | | | |
| k. Real Estate- FV | | | | |
| l. Derivatives- BACV | | | | |
| m. Derivatives- FV | | | | |
| n. Other Invested Assets- BACV | | | | |
| o. Other Invested Assets- FV | | | | |
| p. Total Assets- BACV | \$ | \$ | \$ | \$ |
| q. Total Assets- FV | \$ | \$ | \$ | \$ |

| Ending Balance | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 Nonadmitted |
|--------------------------|-------------|-------------|-------------|------------------|
| a. Bonds- BACV | \$ | \$ | \$ | \$ |
| b. Bonds- FV | | | | |
| c. LB & SS- BACV | | | | |
| d. LB & SS- FV | | | | |
| e. Preferred Stock- BACV | | | | |
| f. Preferred Stock- FV | | | | |

NOTES TO FINANCIAL STATEMENTS

| Ending Balance | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 Nonadmitted |
|--------------------------------|-------------|-------------|-------------|------------------|
| g. Common Stock | | | | |
| h. Mortgage Loans- BACV | | | | |
| i. Mortgage Loans- FV | | | | |
| j. Real Estate- BACV | | | | |
| k. Real Estate- FV | | | | |
| l. Derivatives- BACV | | | | |
| m. Derivatives- FV | | | | |
| n. Other Invested Assets- BACV | | | | |
| o. Other Invested Assets- FV | | | | |
| p. Total Assets- BACV | \$ | \$ | \$ | \$ |
| q. Total Assets- FV | \$ | \$ | \$ | \$ |

$$p = a + c + e + g + h + j + l + n \quad q = b + d + f + g + i + k + m + o$$

(7) Collateral Received – Secured Borrowing

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|--------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |

(8) Cash & Non-Cash Collateral Received – Secured Borrowing by NAIC Designation

| Ending Balance | 1 None | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|---|-----------|-------------|-------------|-------------|
| a. Cash | \$ | \$ | \$ | \$ |
| b. Bonds- FV | | | | |
| c. LB & SS- FV | | | | |
| d. Preferred Stock- FV | | | | |
| e. Common Stock | | | | |
| f. Mortgage Loans- FV | | | | |
| g. Real Estate- FV | | | | |
| h. Derivatives- FV | | | | |
| i. Other Invested Assets- FV | | | | |
| j. Total Collateral Assets – FV (Sum of a through i) | \$ | \$ | \$ | \$ |

| Ending Balance | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 Does Not Qualify as Admitted |
|---|-------------|-------------|-------------|--------------------------------------|
| a. Cash | \$ | \$ | \$ | \$ |
| b. Bonds- FV | | | | |
| c. LB & SS- FV | | | | |
| d. Preferred Stock- FV | | | | |
| e. Common Stock | | | | |
| f. Mortgage Loans- FV | | | | |
| g. Real Estate- FV | | | | |
| h. Derivatives- FV | | | | |
| i. Other Invested Assets- FV | | | | |
| j. Total Collateral Assets – FV (Sum of a through i) | \$ | \$ | \$ | \$ |

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

| | Fair Value |
|-----------------------------|------------|
| a. Overnight and Continuous | \$ |
| b. 30 Days or Less | \$ |
| c. 31 to 90 Days | \$ |
| d. >90 Days | \$ |

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

| | Amortized Cost | Fair Value |
|--------------------|----------------|------------|
| a. 30 Days or Less | \$ | \$ |
| b. 31 to 60 Days | \$ | \$ |
| c. 61 to 90 Days | \$ | \$ |
| d. 91 to 120 Days | \$ | \$ |
| e. 121 to 180 Days | \$ | \$ |
| f. 181 to 365 Days | \$ | \$ |
| g. 1 to 2 Years | \$ | \$ |
| h. 2 to 3 Years | \$ | \$ |
| i. >3 Years | \$ | \$ |

(11) Liability to Return Collateral – Secured Borrowing (Total)

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-------------------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Cash (Collateral – All) | \$ | \$ | \$ | \$ |
| 2. Securities Collateral (FV) | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. Cash (Collateral – All) | \$ | \$ | \$ | \$ |
| 2. Securities Collateral (FV) | \$ | \$ | \$ | \$ |

NOTES TO FINANCIAL STATEMENTSG. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions

(1) Company Policy or Strategies for Engaging in Repo Programs

(2) Type of Repo Trades Used

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-----------------------|---------------|----------------|---------------|----------------|
| a. Bilateral (YES/NO) | | | | |
| b. Tri-Party (YES/NO) | | | | |

(3) Original (Flow) and Residual Maturity

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-------------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Open – No Maturity | \$ | \$ | \$ | \$ |
| 2. Overnight | \$ | \$ | \$ | \$ |
| 3. 2 Days to 1 Week | \$ | \$ | \$ | \$ |
| 4. >1 Week to 1 Month | \$ | \$ | \$ | \$ |
| 5. >1 Month to 3 Months | \$ | \$ | \$ | \$ |
| 6. >3 Months to 1 Year | \$ | \$ | \$ | \$ |
| 7. > 1 Year | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. Open – No Maturity | \$ | \$ | \$ | \$ |
| 2. Overnight | \$ | \$ | \$ | \$ |
| 3. 2 Days to 1 Week | \$ | \$ | \$ | \$ |
| 4. >1 Week to 1 Month | \$ | \$ | \$ | \$ |
| 5. >1 Month to 3 Months | \$ | \$ | \$ | \$ |
| 6. >3 Months to 1 Year | \$ | \$ | \$ | \$ |
| 7. > 1 Year | \$ | \$ | \$ | \$ |

(4) Fair Value Securities Sold and/or Acquired that Resulted in Default

(5) Fair Value of Securities Acquired Under Repo – Secured Borrowing

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | \$ | \$ | \$ | \$ |
| b. Ending Balance | \$ | \$ | \$ | \$ |

(6) Securities Acquired Under Repo – Secured Borrowing by NAIC Designation

| Ending Balance | 1 None | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|--|-----------|-------------|-------------|-------------|
| a. Bonds- FV | \$ | \$ | \$ | \$ |
| b. LB & SS- FV | | | | |
| c. Preferred Stock- FV | | | | |
| d. Common Stock | | | | |
| e. Mortgage Loans- FV | | | | |
| f. Real Estate- FV | | | | |
| g. Derivatives- FV | | | | |
| h. Other Invested Assets- FV | | | | |
| i. Total Assets- FV (Sum of a through h) | \$ | \$ | \$ | \$ |

| Ending Balance | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 Does Not Qualify as Admitted |
|--|-------------|-------------|-------------|--------------------------------------|
| a. Bonds- FV | \$ | \$ | \$ | \$ |
| b. LB & SS- FV | | | | |
| c. Preferred Stock- FV | | | | |
| d. Common Stock | | | | |
| e. Mortgage Loans- FV | | | | |
| f. Real Estate- FV | | | | |
| g. Derivatives- FV | | | | |
| h. Other Invested Assets- FV | | | | |
| i. Total Assets- FV (Sum of a through h) | \$ | \$ | \$ | \$ |

(7) Collateral Provided – Secured Borrowing

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|------------------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |
| 3. Securities (BACV) | XXX | XXX | XXX | XXX |
| 4. Nonadmitted Subset (BACV) | XXX | XXX | XXX | XXX |
| b. Ending Balance | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |
| 3. Securities (BACV) | \$ | \$ | \$ | \$ |
| 4. Nonadmitted Subset (BACV) | \$ | \$ | \$ | \$ |

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

| | Amortized Cost | | Fair Value | |
|-----------------------------|----------------|--|------------|--|
| a. Overnight and Continuous | \$ | | \$ | |
| b. 30 Days or Less | \$ | | \$ | |
| c. 31 to 90 Days | \$ | | \$ | |
| d. >90 Days | \$ | | \$ | |

(9) Recognized Receivable for Return of Collateral – Secured Borrowing

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|--|---------------|----------------|---------------|----------------|
| | | | | |

NOTES TO FINANCIAL STATEMENTS

| | | | | |
|--|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |
| B. Ending Balance | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |
| (10) Recognized Liability to Return Collateral – Secured Borrowing (Total) | | | | |
| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
| a. Maximum Amount | | | | |
| 1. Repo Securities Sold/Acquired with Cash Collateral | \$ | \$ | \$ | \$ |
| 2. Repo Securities Sold/Acquired with Securities Collateral (FV) | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. Repo Securities Sold/Acquired with Cash Collateral | \$ | \$ | \$ | \$ |
| 2. Repo Securities Sold/Acquired with Securities Collateral (FV) | \$ | \$ | \$ | \$ |

- H. Repurchase Agreements Transactions Accounted for as a Sale
 Repurchase Transaction – Cash Taker – Overview of Sale Transactions
 (1) Company Policy or Strategies for Engaging in Repo Programs

| | | | | |
|------------------------------|---------------|----------------|---------------|----------------|
| (2) Type of Repo Trades Used | | | | |
| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
| a. Bilateral (YES/NO) | | | | |
| b. Tri-Party (YES/NO) | | | | |

| | | | | |
|---|---------------|----------------|---------------|----------------|
| (3) Original (Flow) & Residual Maturity | | | | |
| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
| a. Maximum Amount | | | | |
| 1. Open – No Maturity | \$ | \$ | \$ | \$ |
| 2. Overnight | \$ | \$ | \$ | \$ |
| 3. 2 Days to 1 Week | \$ | \$ | \$ | \$ |
| 4. >1 Week to 1 Month | \$ | \$ | \$ | \$ |
| 5. >1 Month to 3 Months | \$ | \$ | \$ | \$ |
| 6. >3 Months to 1 Year | \$ | \$ | \$ | \$ |
| 7. > 1 Year | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. Open – No Maturity | \$ | \$ | \$ | \$ |
| 2. Overnight | \$ | \$ | \$ | \$ |
| 3. 2 Days to 1 Week | \$ | \$ | \$ | \$ |
| 4. >1 Week to 1 Month | \$ | \$ | \$ | \$ |
| 5. >1 Month to 3 Months | \$ | \$ | \$ | \$ |
| 6. >3 Months to 1 Year | \$ | \$ | \$ | \$ |
| 7. > 1 Year | \$ | \$ | \$ | \$ |

- (4) Fair Value Securities Sold and/or Acquired that Resulted in Default

| | | | | |
|---|---------------|----------------|---------------|----------------|
| (5) Securities "Sold" Under Repo – Sale | | | | |
| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
| a. Maximum Amount | | | | |
| 1. BACV | XXX | XXX | XXX | \$ |
| 2. Nonadmitted – Subset of BACV | XXX | XXX | XXX | \$ |
| 3. Fair Value | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. BACV | XXX | XXX | XXX | \$ |
| 2. Nonadmitted – Subset of BACV | XXX | XXX | XXX | \$ |
| 3. Fair Value | \$ | \$ | \$ | \$ |

| | | | | |
|---|-----------|-------------|-------------|-------------|
| (6) Securities Sold Under Repo – Sale by NAIC Designation | | | | |
| Ending Balance | 1 None | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
| a. Bonds-BACV | \$ | \$ | \$ | \$ |
| b. Bonds-FV | | | | |
| c. LB & SS-BACV | | | | |
| d. LB & SS-FV | | | | |
| e. Preferred Stock-BACV | | | | |
| f. Preferred Stock-FV | | | | |
| g. Common Stock | | | | |
| h. Mortgage Loans-BACV | | | | |
| i. Mortgage Loans-FV | | | | |
| j. Real Estate-BACV | | | | |
| k. Real Estate-FV | | | | |
| l. Derivatives-BACV | | | | |
| m. Derivatives-FV | | | | |
| n. Other Invested Assets-BACV | | | | |
| o. Other Invested Assets-FV | | | | |

NOTES TO FINANCIAL STATEMENTS

| Ending Balance | 1 None | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|----------------------|-----------|-------------|-------------|-------------|
| p. Total Assets-BACV | \$ | \$ | \$ | \$ |
| q. Total Assets-FV | \$ | \$ | \$ | \$ |

| Ending Balance | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 Nonadmitted |
|-------------------------------|-------------|-------------|-------------|------------------|
| a. Bonds-BACV | \$ | \$ | \$ | \$ |
| b. Bonds-FV | | | | |
| c. LB & SS-BACV | | | | |
| d. LB & SS-FV | | | | |
| e. Preferred Stock-BACV | | | | |
| f. Preferred Stock-FV | | | | |
| g. Common Stock | | | | |
| h. Mortgage Loans-BACV | | | | |
| i. Mortgage Loans-FV | | | | |
| j. Real Estate-BACV | | | | |
| k. Real Estate-FV | | | | |
| l. Derivatives-BACV | | | | |
| m. Derivatives-FV | | | | |
| n. Other Invested Assets-BACV | | | | |
| o. Other Invested Assets-FV | | | | |
| p. Total Assets-BACV | \$ | \$ | \$ | \$ |
| q. Total Assets-FV | \$ | \$ | \$ | \$ |

$$p = a + c + e + g + h + j + l + n \quad q = b + d + f + g + i + k + m + o$$

(7) Proceeds Received – Sale

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|--------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |
| 3. Nonadmitted | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |
| 3. Nonadmitted | \$ | \$ | \$ | \$ |

(8) Cash & Non-Cash Collateral Received – Sale by NAIC Designation

| Ending Balance | 1 None | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|---|-----------|-------------|-------------|-------------|
| a. Bonds-FV | \$ | \$ | \$ | \$ |
| b. LB & SS-FV | | | | |
| c. Preferred Stock-FV | | | | |
| d. Common Stock | | | | |
| e. Mortgage Loans-FV | | | | |
| f. Real Estate-FV | | | | |
| g. Derivatives-FV | | | | |
| h. Other Invested Assets-FV | | | | |
| i. Total Assets-FV (Sum of a through h) | \$ | \$ | \$ | \$ |

| Ending Balance | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 Nonadmitted |
|---|-------------|-------------|-------------|------------------|
| a. Bonds-FV | \$ | \$ | \$ | \$ |
| b. LB & SS-FV | | | | |
| c. Preferred Stock-FV | | | | |
| d. Common Stock | | | | |
| e. Mortgage Loans-FV | | | | |
| f. Real Estate-FV | | | | |
| g. Derivatives-FV | | | | |
| h. Other Invested Assets-FV | | | | |
| i. Total Assets-FV (Sum of a through h) | \$ | \$ | \$ | \$ |

(9) Recognized Forward Resale Commitment

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | \$ | \$ | \$ | \$ |
| b. Ending Balance | \$ | \$ | \$ | \$ |

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Repurchase Transaction – Cash Provider – Overview of Sale Transactions

(1) Company Policy or Strategies for Engaging in Repo Programs

(2) Type of Repo Trades Used

| | 1 First Quarter | 2 Second Quarter | 3 Third Quarter | 4 Fourth Quarter |
|-----------------------|--------------------|---------------------|--------------------|---------------------|
| a. Bilateral (YES/NO) | | | | |
| b. Tri-Party (YES/NO) | | | | |

(3) Original (Flow) & Residual Maturity

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-----------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Open – No Maturity | \$ | \$ | \$ | \$ |

NOTES TO FINANCIAL STATEMENTS

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-------------------------|---------------|----------------|---------------|----------------|
| 2. Overnight | \$ | \$ | \$ | \$ |
| 3. 2 Days to 1 Week | \$ | \$ | \$ | \$ |
| 4. >1 Week to 1 Month | \$ | \$ | \$ | \$ |
| 5. >1 Month to 3 Months | \$ | \$ | \$ | \$ |
| 6. >3 Months to 1 Year | \$ | \$ | \$ | \$ |
| 7. > 1 Year | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. Open – No Maturity | \$ | \$ | \$ | \$ |
| 2. Overnight | \$ | \$ | \$ | \$ |
| 3. 2 Days to 1 Week | \$ | \$ | \$ | \$ |
| 4. >1 Week to 1 Month | \$ | \$ | \$ | \$ |
| 5. >1 Month to 3 Months | \$ | \$ | \$ | \$ |
| 6. >3 Months to 1 Year | \$ | \$ | \$ | \$ |
| 7. > 1 Year | \$ | \$ | \$ | \$ |

(4) Fair Value Securities Sold and/or Acquired that Resulted in Default

(5) Securities Acquired Under Repo – Sale

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|---------------------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. BACV | XXX | XXX | XXX | \$ |
| 2. Nonadmitted – Subset of BACV | XXX | XXX | XXX | \$ |
| 3. Fair Value | \$ | \$ | \$ | \$ |
| b. Ending Balance | | | | |
| 1. BACV | XXX | XXX | XXX | \$ |
| 2. Nonadmitted – Subset of BACV | XXX | XXX | XXX | \$ |
| 3. Fair Value | \$ | \$ | \$ | \$ |

(6) Securities Acquired Under Repo – Sale by NAIC Designation

| Ending Balance | 1 None | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|-------------------------------|-----------|-------------|-------------|-------------|
| a. Bonds-BACV | \$ | \$ | \$ | \$ |
| b. Bonds-FV | | | | |
| c. LB & SS-BACV | | | | |
| d. LB & SS-FV | | | | |
| e. Preferred Stock-BACV | | | | |
| f. Preferred Stock-FV | | | | |
| g. Common Stock | | | | |
| h. Mortgage Loans-BACV | | | | |
| i. Mortgage Loans-FV | | | | |
| j. Real Estate-BACV | | | | |
| k. Real Estate-FV | | | | |
| l. Derivatives-BACV | | | | |
| m. Derivatives-FV | | | | |
| n. Other Invested Assets-BACV | | | | |
| o. Other Invested Assets-FV | | | | |
| p. Total Assets-BACV | \$ | \$ | \$ | \$ |
| q. Total Assets-FV | \$ | \$ | \$ | \$ |

| Ending Balance | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 Nonadmitted |
|-------------------------------|-------------|-------------|-------------|------------------|
| a. Bonds-BACV | \$ | \$ | \$ | \$ |
| b. Bonds-FV | | | | |
| c. LB & SS-BACV | | | | |
| d. LB & SS-FV | | | | |
| e. Preferred Stock-BACV | | | | |
| f. Preferred Stock-FV | | | | |
| g. Common Stock | | | | |
| h. Mortgage Loans-BACV | | | | |
| i. Mortgage Loans-FV | | | | |
| j. Real Estate-BACV | | | | |
| k. Real Estate-FV | | | | |
| l. Derivatives-BACV | | | | |
| m. Derivatives-FV | | | | |
| n. Other Invested Assets-BACV | | | | |
| o. Other Invested Assets-FV | | | | |
| p. Total Assets-BACV | \$ | \$ | \$ | \$ |
| q. Total Assets-FV | \$ | \$ | \$ | \$ |

p = a + c + e + g + h + j + l + n q = b + d + f + g + i + k + m + o

(7) Proceeds Provided – Sale

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-----------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |
| 3. Securities (BACV) | XXX | XXX | XXX | XXX |
| 4. Nonadmitted Subset | XXX | XXX | XXX | XXX |
| b. Ending Balance | | | | |
| 1. Cash | \$ | \$ | \$ | \$ |
| 2. Securities (FV) | \$ | \$ | \$ | \$ |

NOTES TO FINANCIAL STATEMENTS

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-----------------------|---------------|----------------|---------------|----------------|
| 3. Securities (BACV) | \$ | \$ | \$ | \$ |
| 4. Nonadmitted Subset | \$ | \$ | \$ | \$ |

(8) Recognized Forward Resale Commitment

| | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|-------------------|---------------|----------------|---------------|----------------|
| a. Maximum Amount | \$ | \$ | \$ | \$ |
| b. Ending Balance | \$ | \$ | \$ | \$ |

J. Real Estate

The Company does not have investments in real estate.

K. Low-Income Housing Tax Credits (LIHTC)

The Company does not have investments in LIHTC.

L. Restricted Assets

The Company does not have restricted assets.

M. Working Capital Finance Investments

(1) Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation:

Not Applicable

(2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs

| | Book/Adjusted Carrying Value |
|--------------------|------------------------------|
| a. Up to 180 Days | \$ |
| b. 181 to 365 Days | |
| c. Total | \$ |

T05M029901;99;NINVEST:WORKCAP;D

(3) Any Events of Default or Working Capital Finance Investments

N. Offsetting and Netting of Assets and Liabilities

| | Gross Amount Recognized | Amount Offset* | Net Amount Presented on Financial Statements |
|-----------------|-------------------------|----------------|--|
| (1) Assets | | | |
| | \$ | \$ | \$ |
| (2) Liabilities | | | |
| | \$ | \$ | \$ |

* For derivative assets and derivative liabilities, the amount of offset shall agree to Schedule DB, Part D, Section 1.

O. 5GI Securities

Not Applicable

P. Short Sales

Not Applicable

Q. Prepayment Penalty and Acceleration Fees

Not Applicable

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in Joint Ventures, Partnerships, or Limited Liability Companies that exceed 10% of its admitted assets.

B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships, and Limited Liability Companies during the statement period.

Note 7 – Investment Income

Not Applicable

Note 8 – Derivative Instruments

Not Applicable

A. Derivatives Under SSAP No. 86 – Derivatives

(1) Market Risk, Credit Risk and Cash Requirements

Not Applicable

(2) Objectives for Derivative Use

Not Applicable

(3) Accounting Policies for Recognition and Measurement

Not Applicable

(4) Identification of Whether Derivative Contracts with Financing Premiums

Not Applicable

(5) Net Gain or Loss Recognized

Not Applicable

(6) Net Gain or Loss Recognized from Derivatives that no Longer Qualify for Hedge Accounting

Not Applicable

(7) Derivatives Accounted for as Cash Flow Hedges

Not Applicable

NOTES TO FINANCIAL STATEMENTS

(8) Total Premium Costs for Contracts

| a. Scheduled Amortization Fiscal Year | Derivative Premium Payments Due |
|---------------------------------------|---------------------------------|
| 1. 2020 | \$ |
| 2. 2021 | |
| 3. 2022 | |
| 4. 2023 | |
| 5. Thereafter | |
| 6. Total Future Settled Premiums | \$ |

| b. | Undiscounted Future Premium Commitments | Derivative Fair Value with Premium Commitments (Reported on DB) | Derivative Fair Value Excluding Impact of Future Settled Premiums |
|-------------------------|---|---|---|
| 1. Prior Year | \$ | \$ | \$ |
| 2. Current Year to Date | \$ | \$ | \$ |

B. Derivatives under SSAP No. 108 – Derivatives Hedging Variable Annuity Guarantees

(1) Discussion of Hedged Item/Hedging Instruments and Hedging Strategy
Not Applicable

(2) Recognition of Gains/Losses and Deferred Assets and Liabilities

a. Scheduled Amortization

| Amortization Year | Deferred Assets | Deferred Liabilities |
|-------------------|-----------------|----------------------|
| 1. 2020 | \$ | \$ |
| 2. 2021 | | |
| 3. 2022 | | |
| 4. 2023 | | |
| 5. 2024 | | |
| 6. 2025 | | |
| 7. 2026 | | |
| 8. 2027 | | |
| 9. 2028 | | |
| 10. 2029 | | |
| 11. Total | \$ | \$ |

b. Total Deferred Balance

| | |
|--|----|
| (Should agree to column 19 of Schedule DB, Part E) | \$ |
|--|----|

c. Reconciliation of Amortization

| | |
|--|----|
| 1. Prior year total deferred balance | \$ |
| 2. Current year to date amortization | |
| 3. Current year to date deferred recognition | |
| 4. Ending deferred balance [(1)-(2)+3] | \$ |

(3) Hedging Strategies Identified as No Longer Highly Effective

Not Applicable

(4) Hedging Strategies Terminated

Not Applicable

Not Applicable

Note 9 – Income Taxes

Not Applicable

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

USAbLe Mutual Insurance Company, d.b.a. Arkansas Blue Cross Blue Shield, owns 100% of USAbLe Corporation, 20% of Partnership for a Healthy Arkansas, LLC, and 50% of HMO Partners, Inc. The Company owns 43.07% of LSV, LLC. LSV, LLC owns 100% of USAbLe Life. As of June 30, 2020, USAbLe Corporation owns 100% of Pinnacle Insurance Agency, 100% of USAbLe Partners, LLC 50% of Medsite Health Mgmt, LLC, 10% of New Directions Behavioral Health Holding Company, LLC, 100% USAbLe HMO, and 100% USAbLe PPO.

Note 11 – DebtA. Debt Including Capital Notes
Not ApplicableB. FHLB (Federal Home Loan Bank) Agreements
Not Applicable(1) Nature of the Agreement
Not Applicable

(2) FHLB Capital Stock

a. Aggregate Totals

1. Current Year to Date

| | Total |
|---|-------|
| (a) Membership Stock – Class A | \$ |
| (b) Membership Stock – Class B | |
| (c) Activity Stock | |
| (d) Excess Stock | |
| (e) Aggregate Total (a+b+c+d) | \$ |
| (f) Actual or estimated borrowing capacity as determined by the insurer | \$ |

2. Prior Year-End

| | Total |
|--------------------------------|-------|
| (a) Membership Stock – Class A | \$ |

NOTES TO FINANCIAL STATEMENTS

| | Total |
|---|-------|
| (b) Membership Stock – Class B | |
| (c) Activity Stock | |
| (d) Excess Stock | |
| (e) Aggregate Total (a+b+c+d) | \$ |
| (f) Actual or estimated borrowing capacity as determined by the insurer | \$ |

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

| | 1 | 2 | Eligible for Redemption | | | |
|------------------|--|-----------------------------|-------------------------|------------------------------|------------------------|--------------|
| | | | 3 | 4 | 5 | 6 |
| Membership Stock | Current Year to Date Total (2+3+4+5+6) | Not Eligible for Redemption | Less than 6 Months | 6 Months to Less Than 1 Year | 1 to Less Than 3 Years | 3 to 5 Years |
| 1. Class A | \$ | \$ | \$ | \$ | \$ | \$ |
| 2. Class B | \$ | \$ | \$ | \$ | \$ | \$ |

(3) Collateral Pledged to FHLB

a. Amount Pledged as of Reporting Date (Current Year to Date)

| | 1 | 2 | 3 |
|---|------------|----------------|---------------------------|
| | Fair Value | Carrying Value | Aggregate Total Borrowing |
| Current Year to Date Total Collateral Pledged | \$ | \$ | \$ |
| Prior Year Total Collateral Pledged | \$ | \$ | \$ |

b. Maximum Amount Pledged During Year

| | 1 | 2 | 3 |
|---|------------|----------------|---|
| | Fair Value | Carrying Value | Amount Borrowed at Time of Maximum Collateral |
| Current Year to Date Total Collateral Pledged | \$ | \$ | \$ |
| Prior Year Total Collateral Pledged | \$ | \$ | \$ |

(4) Borrowing from FHLB

a. Amount as of the Reporting Date

1. Current Year to Date

| | 1 | 2 |
|-----------------------------|-------|---|
| | Total | Funding Agreements Reserves Established |
| (a) Debt | | XXX |
| (b) Funding Agreements | | |
| (c) Other | | XXX |
| (d) Aggregate Total (a+b+c) | | |

2. Prior Year

| | 1 | 2 |
|-----------------------------|-------|---|
| | Total | Funding Agreements Reserves Established |
| (a) Debt | \$ | XXX |
| (b) Funding Agreements | | \$ |
| (c) Other | | XXX |
| (d) Aggregate Total (a+b+c) | \$ | \$ |

b. Maximum Amount During Reporting Period (Current Year to Date)

| | Total |
|----------------------------------|-------|
| 1. Debt | |
| 2. Funding Agreements | |
| 3. Other | |
| 4. Aggregate Total (Lines 1+2+3) | |

c. FHLB – Prepayment Obligations

| | Does the Company have Prepayment Obligations under the Following Arrangements (YES/NO) |
|-----------------------|--|
| 1. Debt | |
| 2. Funding Agreements | |
| 3. Other | |

Not Applicable

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

- (1) Change in Benefit Obligation
Not Applicable
- (2) Change in Plan Assets
Not Applicable
- (3) Funded Status
Not Applicable
- (4) Components of Net Periodic Benefit Cost
Not Applicable

| | Pension Benefits | | Postretirement Benefits | | Special or Contractual Benefits per SSAP No. 11 | |
|----------------------------|----------------------|------|-------------------------|------|---|------|
| | Current Year to Date | 2019 | Current Year to Date | 2019 | Current Year to Date | 2019 |
| a. Service cost | \$ | \$ | \$ | \$ | \$ | \$ |
| b. Interest cost | | | | | | |
| c. Expected return on plan | | | | | | |

NOTES TO FINANCIAL STATEMENTS

| | Pension | Benefits | Postretirement | Benefits | Special or | Contractual |
|--|-----------------|----------|-----------------|----------|-----------------|-------------|
| | Current Year to | 2019 | Current Year to | 2019 | Benefits per | SSAP No. 11 |
| | Date | | Date | | Current Year to | 2019 |
| assets | | | | | | |
| d. Transition asset or obligation | | | | | | |
| e. Gains and losses | | | | | | |
| f. Prior service cost or credit | | | | | | |
| g. Gain or loss recognized due to a settlement curtailment | | | | | | |
| h. Total net periodic benefit cost | \$ | \$ | \$ | \$ | \$ | \$ |

Not Applicable

(5) Amounts in Unassigned Funds (Surplus) Recognized as Components of Net Period Benefit Cost

Not Applicable

(6) Amounts in Unassigned Funds (Surplus) That Have Not Yet Been Recognized as Components of Net Period Benefit Cost

Not Applicable

(7) Weighted Average Assumptions Used to Determine Net Periodic Benefit Cost as of Current Period

Not Applicable

(8) Accumulated Benefit Obligation for Defined Benefit Pension Plans

Not Applicable

(9) For Postretirement Benefits Other Than Pensions, the Assumed Health Care Cost Trend Rate(s)

Not Applicable

(10) Estimated Future Payments, Which Reflect Unexpected Future Service

Not Applicable

(11) Estimate of Contributions Expected to be Paid to the Plan

Not Applicable

(12) Amounts and Types of Securities Included in Plan Assets

Not Applicable

(13) Alternative Method Used to Amortize Prior Service Amounts or Net Gains and Losses

Not Applicable

(14) Substantive Comment Used to Account for Benefit Obligations

Not Applicable

(15) Cost of Providing Special or Contractual Termination Benefits Recognized

Not Applicable

(16) Reasons for Significant Gains/Losses Related to Changes in Defined Benefit Obligation and any Other Significant Change in the Benefit Obligations Assets Not Otherwise Apparent

Not Applicable

(17) Accumulated Postretirement and Pension Benefit Obligation and Fair Value of Plan Assets for Defined Postretirement and Pension Benefit Plans

Not Applicable

(18) Full Transition Surplus Impact of SSAP 102

Not Applicable

B. Investment Policies and Strategies

Not Applicable

C. Fair Value of Plan Assets

Not Applicable

D. Basis Used to Determine Expected Long-Term Rate-of-Return

Not Applicable

E. Defined Contribution Plans

Not Applicable

F. Multiemployer Plans

Not Applicable

G. Consolidated/Holding Company Plans

Not Applicable

H. Postemployment Benefits and Compensated Absences

Not Applicable

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable

Note 13 – Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations

Not Applicable

Note 14 – Liabilities, Contingencies and Assessments

Not Applicable

Note 15 – Leases

Not Applicable

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

NOTES TO FINANCIAL STATEMENTS

Not Applicable

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales
Not Applicable

B. Transfer and Servicing of Financial Assets

- (1) Description of any Loaned Securities
Not Applicable
- (2) Servicing Assets and Servicing Liabilities
- (3) When Servicing Assets and Liabilities are Measured at Fair Value
Not Applicable
- (4) Securitizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales
 - (a)
 - (b)
- (5) Disclosure Requirements for Transfers of Assets Accounted for as Secured Borrowing
Not Applicable
- (6) Transfer of Receivables with Recourse
Not Applicable
- (7) Securities Underlying Repurchase and Reverse Repurchase Agreements, Dollar Repurchase and Dollar Reverse Repurchase Agreements
Not Applicable

C. Wash Sales

- (1) Description of the Objectives Regarding These Transactions
- (2) The details by NAIC designation 3 or below, or unrated of securities sold during the current period and reacquired within 30 days of the sale date are:

| Description | NAIC Designation | Number of Transactions | Book Value of Securities Sold | Cost of Securities Repurchased | Gain/(Loss) |
|-------------|------------------|------------------------|-------------------------------|--------------------------------|-------------|
| | | | \$ | \$ | \$ |

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

Not Applicable

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

Not Applicable

Note 20 – Fair Value Measurements

A. Fair Value Measurements
(1) Fair Value Measurements at Reporting Date
Not Applicable

| Description for Each Type of Asset or Liability | Level 1 | Level 2 | Level 3 | Net Asset Value (NAV) | Total |
|---|---------|---------|---------|-----------------------|-------|
| Assets at Fair Value | | | | | |
| | \$ | \$ | \$ | \$ | \$ |
| Total | \$ | \$ | \$ | \$ | \$ |
| Liabilities at Fair Value | | | | | |
| | \$ | \$ | \$ | \$ | \$ |
| Total | \$ | \$ | \$ | \$ | \$ |

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy
Not Applicable

| Description | Beginning Balance | Transfers Into Level 3 | Transfers Out of Level 3 | Total Gains and (Losses) Included in Net Income | Total Gains and (Losses) Included in Surplus | Purchases | Issuances | Sales | Settlements | Ending Balance as of Current Period |
|-----------------------|-------------------|------------------------|--------------------------|---|--|-----------|-----------|-------|-------------|-------------------------------------|
| a. Assets | | | | | | | | | | |
| | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Total | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| b. Liabilities | | | | | | | | | | |
| | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |
| Total | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

- (3) Policies when Transfers Between Levels are Recognized
Not Applicable
- (4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement
Not Applicable
- (5) Fair Value Disclosures for Derivative Assets and Liabilities
Not Applicable

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

NOTES TO FINANCIAL STATEMENTS

Not Applicable

C. Fair Value Level

Not Applicable

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
|------------------------------|----------------------|-----------------|-----------|-----------|-----------|-----------------------|----------------------------------|
| | \$ | \$ | \$ | \$ | \$ | \$ | \$ |

D. Not Practicable to Estimate Fair Value

Not Applicable

| Type of Class or Financial Instrument | Carrying Value | Effective Interest Rate | Maturity Date | Explanation |
|---------------------------------------|----------------|-------------------------|---------------|-------------|
| | \$ | | | |

E. NAV Practical Expedient Investments

Not Applicable

Note 21 – Other Items

Not Applicable

Note 22 – Events Subsequent

Not Applicable

Note 23 – Reinsurance

Not Applicable

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. Method Used to Estimate Accrued Retrospective Premium Adjustments

Not Applicable

B. Retrospective Premiums Recorded Through Written Premium or Adjustment to Earned Premium

Not Applicable

C. Amount and Percentage of Net Premiums Written Subject to Retrospective Rating Features

Not Applicable

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act

Not Applicable

E. Risk Sharing Provisions of the Affordable Care Act

Not Applicable

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions

Yes [] No [X]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year to date:

| a. Permanent ACA Risk Adjustment Program | AMOUNT |
|--|---------------|
| Assets | |
| 1. Premium adjustments receivable due to ACA Risk Adjustment | \$ |
| Liabilities | |
| 2. Risk adjustment user fees payable for ACA Risk Adjustment | \$ |
| 3. Premium adjustments payable due to ACA Risk Adjustment | \$ |
| Operations (Revenue & Expenses) | |
| 4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment | \$ |
| 5. Reported in expenses as ACA Risk Adjustment user fees (incurred/paid) | \$ |
| b. Transitional ACA Reinsurance Program | AMOUNT |
| Assets | |
| 1. Amounts recoverable for claims paid due to ACA Reinsurance | \$ |
| 2. Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability) | \$ |
| 3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance | \$ |
| Liabilities | |
| 4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium | \$ |
| 5. Ceded reinsurance premiums payable due to ACA Reinsurance | \$ |
| 6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance | \$ |
| Operations (Revenue & Expenses) | |
| 7. Ceded reinsurance premiums due to ACA Reinsurance | \$ |
| 8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments | \$ |
| 9. ACA Reinsurance contributions – not reported as ceded premium | \$ |

NOTES TO FINANCIAL STATEMENTS

| c. Temporary ACA Risk Corridors Program | AMOUNT |
|---|--------|
| Assets | |
| 1. Accrued retrospective premium due to ACA Risk Corridors | \$ |
| Liabilities | |
| 3. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors | \$ |
| Operations (Revenue & Expenses) | |
| 3. Effect of ACA Risk Corridors on net premium income (paid/received) | \$ |
| 4. Effect of ACA Risk Corridors on change in reserves for rate credits | \$ |

(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:

| | Accrued During the Prior Year on Business Written Before Dec. 31 of the Prior Year | | Received or Paid as of the Current Year to Date on Business Written Before Dec. 31 of the Prior Year | | Differences | | Adjustments | | Ref | Unsettled Balances as of the Reporting Date | |
|--|--|-----------|--|-----------|---|---|------------------------|------------------------|-----|--|--|
| | | | | | Prior Year Accrued Less Payments (Col. 1-3) | Prior Year Accrued Less Payments (Col. 2-4) | To Prior Year Balances | To Prior Year Balances | | Cumulative Balance from Prior Years (Col. 1-3+7) | Cumulative Balance from Prior Years (Col. 2-4+8) |
| | | | | | 1 | 2 | 3 | 4 | | 5 | 6 |
| | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | | Receivable | (Payable) |
| a. Permanent ACA Risk Adjustment Program | | | | | | | | | | | |
| 1. Premium adjustments receivable | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | A | \$ | \$ |
| 2. Premium adjustments (payable) | | | | | | | | | B | | |
| 3. Subtotal ACA Permanent Risk Adjustment Program | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | | \$ | \$ |
| b. Transitional ACA Reinsurance Program | | | | | | | | | | | |
| 1. Amounts recoverable for claims paid | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | C | \$ | \$ |
| 2. Amounts recoverable for claims unpaid (contra liability) | | | | | | | | | D | | |
| 3. Amounts receivable relating to uninsured plans | | | | | | | | | E | | |
| 4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premiums | | | | | | | | | F | | |
| 5. Ceded reinsurance premiums payable | | | | | | | | | G | | |
| 6. Liability for amounts held under uninsured plans | | | | | | | | | H | | |
| 7. Subtotal ACA Transitional Reinsurance Program | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | | \$ | \$ |
| c. Temporary ACA Risk Corridors Program | | | | | | | | | | | |
| 1. Accrued retrospective premium | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | I | \$ | \$ |
| 2. Reserve for rate credits or policy experience rating refunds | | | | | | | | | J | | |
| 3. Subtotal ACA Risk Corridors Program | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | | \$ | \$ |
| d. Total for ACA Risk Sharing Provisions | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | | \$ | \$ |

Explanations of Adjustments

- A.
- B.
- C.
- D.
- E.
- F.
- G.
- H.
- I.
- J.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

| | Accrued During the Prior Year on Business Written Before Dec. 31 of the Prior Year | | Received or Paid as of the Current Year to Date on Business Written Before Dec. 31 of the Prior Year | | Differences | | Adjustments | | | Unsettled Balances as of the Reporting Date | |
|---------|--|-----------|--|-----------|---|---|------------------------|------------------------|--|--|--|
| | | | | | Prior Year Accrued Less Payments (Col. 1-3) | Prior Year Accrued Less Payments (Col. 2-4) | To Prior Year Balances | To Prior Year Balances | | Cumulative Balance from Prior Years (Col. 1-3+7) | Cumulative Balance from Prior Years (Col. 2-4+8) |
| | | | | | 1 | 2 | 3 | 4 | | 5 | 6 |
| | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | | Receivable | (Payable) |
| a. 2014 | | | | | | | | | | | |

NOTES TO FINANCIAL STATEMENTS

| | Accrued During the Prior Year on Business Written Before Dec. 31 of the Prior Year | | Received or Paid as of the Current Year to Date on Business Written Before Dec. 31 of the Prior Year | | Differences | | Adjustments | | Unsettled Balances as of the Reporting Date | | |
|--|--|-----------|--|-----------|---|---|------------------------|------------------------|--|--|-----------|
| | | | | | Prior Year Accrued Less Payments (Col. 1-3) | Prior Year Accrued Less Payments (Col. 2-4) | To Prior Year Balances | To Prior Year Balances | Cumulative Balance from Prior Years (Col. 1-3+7) | Cumulative Balance from Prior Years (Col. 2-4+8) | |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |
| | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | | Receivable | (Payable) |
| 1. Accrued retrospective premium | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | A | \$ | \$ |
| 2. Reserve for rate credits for policy experience rating refunds | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | B | \$ | \$ |
| b. 2015 | | | | | | | | | | | |
| 1. Accrued retrospective premium | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | C | \$ | \$ |
| 2. Reserve for rate credits for policy experience rating refunds | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | D | \$ | \$ |
| c. 2020 | | | | | | | | | | | |
| 1. Accrued retrospective premium | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | E | \$ | \$ |
| 2. Reserve for rate credits or policy experience rating refunds | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | F | \$ | \$ |
| d. Total for Risk Corridors | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | | \$ | \$ |

- A.
- B.
- C.
- D.
- E.
- F.

(5) ACA Risk Corridors Receivable as of Reporting Date

| Risk Corridors Program Year | 1 Estimated Amount to be Filed or Final Amount Filed with CMS | 2 Non-Accrued Amounts for Impairment or Other Reasons | 3 Amounts Received from CMS | 4 Asset Balance (Gross of Non-Admissions) (1-2-3) | 5 Non-Admitted Amount | 5 Net Admitted Asset (4-5) |
|-----------------------------|--|--|--------------------------------|--|--------------------------|-------------------------------|
| a. 2014 | \$ | \$ | \$ | \$ | \$ | \$ |
| b. 2015 | | | | | | |
| c. 2016 | | | | | | |
| d. Total (a+b+c) | \$ | \$ | \$ | \$ | \$ | \$ |

Not Applicable

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

A. Change in Incurred Losses and Loss Adjustment Expenses

Not Applicable

B. Information about Significant Changes in Methodologies and Assumptions

Not Applicable

Note 26 – Intercompany Pooling Arrangements

The company has no intercompany pooling arrangements.

Note 27 – Structured Settlements

Not applicable

Note 28 – Health Care Receivables

The Company has no risk sharing receivables.

Note 29 – Participating Policies

The Company has no participating policies.

Note 30 – Premium Deficiency Reserves

The Company has no premium deficiency reserves as of June 30, 2020.

Note 31 – Anticipated Salvage and Subrogation

The Company has no estimates of anticipated salvage and subrogation as of June 30, 2020.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change: _____

- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? If yes, complete Schedule Y, Parts 1 and 1A. Yes [X] No []
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.

- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
-
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period. Yes [] No [X]
- 4.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

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

- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. _____
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. _____
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). _____
- 6.4 By what department or departments? _____

- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:

- 8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator].

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

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - (c) Compliance with applicable governmental laws, rules and regulations;
 - (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - (e) Accountability for adherence to the code.

- 9.11 If the response to 9.1 is No, please explain: _____
- 9.2 Has the code of ethics for senior managers been amended? Yes [] No [X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ 0
13. Amount of real estate and mortgages held in short-term investments: \$ 0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]
- 14.2 If yes, please complete the following:

| | 1 Prior Year End Book/Adjusted Carrying Value | | 2 Current Quarter Book/Adjusted Carrying Value |
|-------|---|----|--|
| 14.21 | 0 | \$ | 0 |
| 14.22 | 0 | | 0 |
| 14.23 | 0 | | 0 |
| 14.24 | 0 | | 0 |
| 14.25 | 0 | | 0 |
| 14.26 | 0 | | 0 |
| 14.27 | 0 | \$ | 0 |
| 14.28 | 0 | \$ | 0 |

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
- If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0
- 16.3 Total payable for securities lending reported on the liability page: \$ 0
17. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? Yes [X] No []

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

| 1 Name of Custodian(s) | 2 Custodian Address |
|---|--------------------------------------|
| US Bank Institutional Trust and Custody | PO Box 387, St. Louis, MO 61366-0387 |

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full and complete information relating thereto:

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

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

| 1 Name of Firm or Individual | 2 Affiliation |
|---------------------------------|------------------|
| Gray D. Dillard | I |

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [] No [X]
- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [] No [X]

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

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

- 18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [X] No []
- 18.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities? Yes [] No [X]
20. By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities? Yes [] No [X]
21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The security was 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 reporting NAIC designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

GENERAL INTERROGATORIES (continued)

PART 2 - HEALTH

| | | |
|--|---------|--------|
| 1. Operating Percentages: | | |
| 1.1 A&H loss percent | | 0.0 % |
| 1.2 A&H cost containment percent | | 0.0 % |
| 1.3 A&H expense percent excluding cost containment expenses | | 0.0 % |
| | | |
| 2.1 Do you act as a custodian for health savings accounts? | Yes [] | No [X] |
| 2.2 If yes, please provide the amount of custodial funds held as of the reporting date. | | 0 |
| 2.3 Do you act as an administrator for health savings accounts? | Yes [] | No [X] |
| 2.4 If yes, please provide the amount of funds administered as of the reporting date. | | 0 |
| | | |
| 3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?..... | Yes [] | No [X] |
| 3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?..... | Yes [] | No [X] |

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

| 1 NAIC Company Code | 2 ID Number | 3 Effective Date | 4 Name of Reinsurer | 5 Domiciliary Jurisdiction | 6 Type of Reinsurance Ceded | 7 Type of Business Ceded | 8 Type of Reinsurer | 9 Certified Reinsurer Rating (1 through 6) | 10 Effective Date of Certified Reinsurer Rating |
|------------------------------|----------------|---------------------|------------------------|----------------------------------|-----------------------------------|-----------------------------|------------------------|--|--|
|------------------------------|----------------|---------------------|------------------------|----------------------------------|-----------------------------------|-----------------------------|------------------------|--|--|

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

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

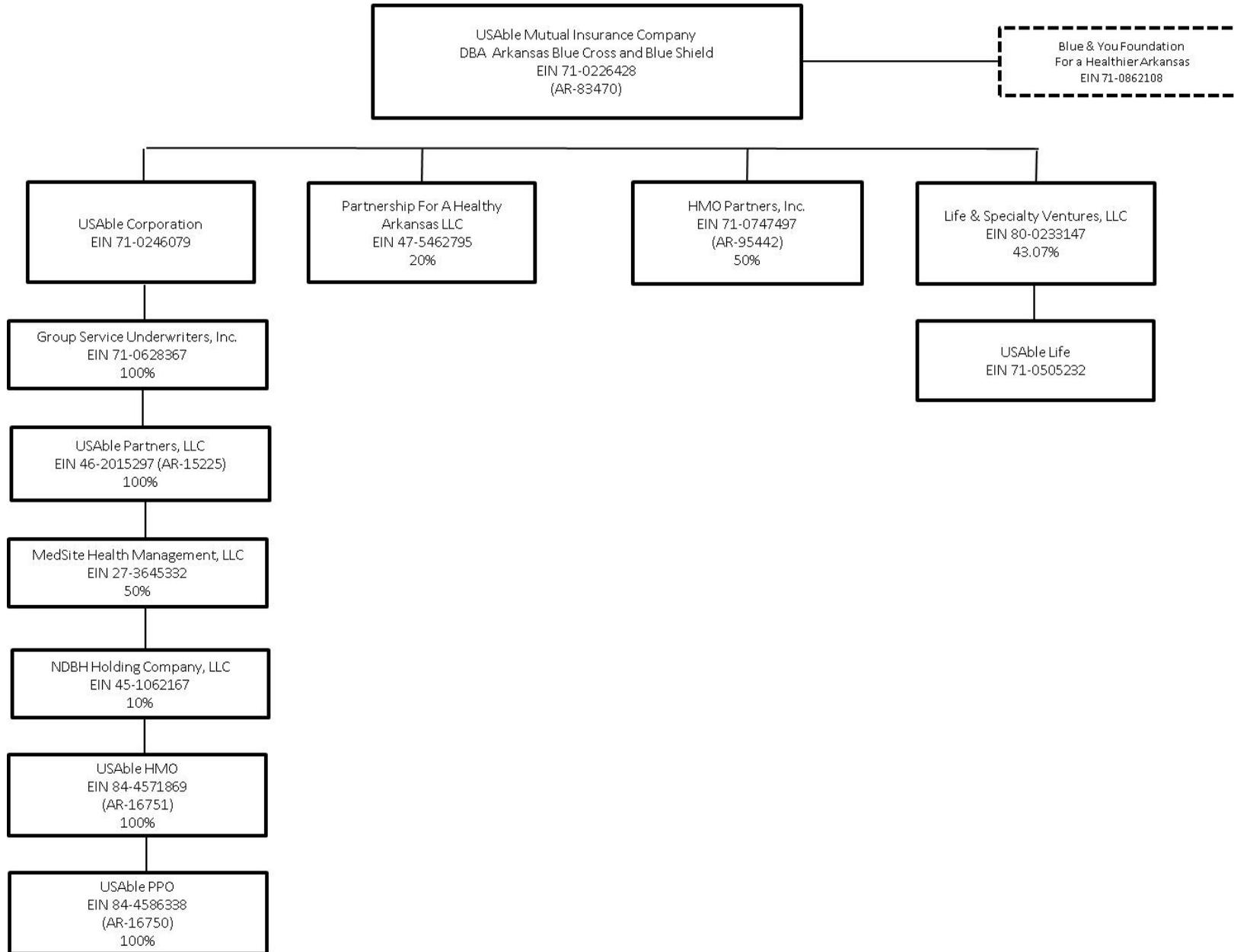
DETAILS OF WRITE-INS

| | | | | | | | | | |
|---|--|---|---|---|---|---|---|---|---|
| 58001..... | | | | | | | | | 0 |
| 58002..... | | | | | | | | | 0 |
| 58003..... | | | | | | | | | 0 |
| 58998. Summary of remaining write-ins for line 58 from overflow page..... | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above)..... | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

(a) Active Status Count

| | | | |
|---|---|---|----|
| L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... | 1 | R - Registered - Non-domiciled RRGs..... | 0 |
| E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... | 0 | Q - Qualified - Qualified or accredited reinsurer..... | 0 |
| | | N - None of the above - Not allowed to write business in the state..... | 56 |

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



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|----------------|---------------------------------|-------------------|--------------|--------------|-----|--|---|----------------------|----------------------------------|--|---|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Required? (Y/N) | * |
| Members | | | | | | | | | | | | | | | |
| 0876 | USAbLe Mutual Insurance Company | 83470... | 71-0226428.. | | | | USAbLe Mutual Insurance Company..... | AR..... | | USAbLe Mutual Insurance Company..... | Board..... | | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | | 71-0862108.. | | | | Blue & You Foundation..... | AR..... | NIA..... | USAbLe Mutual Insurance Company..... | Ownership, Board, Influence | | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | | 71-0246079.. | | | | USAbLe Corporation..... | AR..... | DS..... | USAbLe Mutual Insurance Company..... | Ownership, Board, Influence | 100.000 | USAbLe Mutual Insurance Company..... |Y..... | |
| 0876 | USAbLe Mutual Insurance Company | | 47-5462795.. | | | | Partnership for a Health Arkansas LLC..... | AR..... | DS..... | USAbLe Mutual Insurance Company..... | Ownership, Influence, Board | 20.000 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | 95442... | 71-0747497.. | | | | HMO Partners, Inc..... | AR..... | DS..... | USAbLe Mutual Insurance Company..... | Ownership, Board, Influence | 50.000 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | | 80-0233147.. | | | | Life & Specialty Ventures, Inc..... | DE..... | NIA..... | USAbLe Mutual Insurance Company..... | Ownership, Board, Influence | 40.750 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | | 71-0628367.. | | | | Group Service Underwriters, Inc..... | AR..... | DS..... | USAbLe Corporation..... | Ownership, Influence | 100.000 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | | 27-3645332.. | | | | MedSite Health Management, LLC..... | AR..... | DS..... | USAbLe Corporation..... | Ownership, Board, Influence | 50.000 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | 15225... | 46-2015297.. | | | | USAbLe Partners, LLC..... | AR..... | DS..... | USAbLe Corporation..... | Ownership, Board, Influence | 100.000 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | | 45-1062167.. | | | | NDBH Holding Company, LLC..... | AR..... | DS..... | USAbLe Corporation..... | Ownership, Influence | 10.000 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | 94358... | 71-0505232.. | | | | USAbLe Life..... | AR..... | IA..... | Life and Specialty Ventures, LLC..... | Ownership..... | 100.000 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | 16751... | 84-4571869.. | | | | USAbLe HMO..... | AR..... | DS..... | USAbLe Corporation..... | Ownership, Board, Influence | 100.000 | USAbLe Mutual Insurance Company..... |N..... | |
| 0876 | USAbLe Mutual Insurance Company | 16750... | 84-4586338.. | | | | USAbLe PPO..... | AR..... | DS..... | USAbLe Corporation..... | Ownership, Board, Influence | 100.000 | USAbLe Mutual Insurance Company..... |N..... | |

Q16

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

Response

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

NO

Explanation:

1.

Bar Code:



Overflow Page for Write-Ins

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

| | 1 Year to Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year..... | .0 | |
| 2. Cost of bonds and stocks acquired..... | 44,785,624 | |
| 3. Accrual of discount..... | 8,935 | |
| 4. Unrealized valuation increase (decrease)..... | | |
| 5. Total gain (loss) on disposals..... | | |
| 6. Deduct consideration for bonds and stocks disposed of..... | | |
| 7. Deduct amortization of premium..... | | |
| 8. Total foreign exchange change in book/adjusted carrying value..... | | |
| 9. Deduct current year's other-than-temporary impairment recognized..... | | |
| 10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees..... | | |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)..... | 44,794,560 | .0 |
| 12. Deduct total nonadmitted amounts..... | | |
| 13. Statement value at end of current period (Line 11 minus Line 12)..... | 44,794,560 | .0 |

SCHEDULE D - PART 1B

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

| NAIC Designation | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|--|--|--|--|--|--|---|--|--|
| BONDS | | | | | | | | |
| 1. NAIC 1 (a)..... | 49,212,137 | (4,443,816) | | 26,238 | 49,212,137 | 44,794,560 | | |
| 2. NAIC 2 (a)..... | | | | | | 0 | | |
| 3. NAIC 3 (a)..... | | | | | | 0 | | |
| 4. NAIC 4 (a)..... | | | | | | 0 | | |
| 5. NAIC 5 (a)..... | | | | | | 0 | | |
| 6. NAIC 6 (a)..... | | | | | | 0 | | |
| 7. Total Bonds..... | 49,212,137 | (4,443,816) | 0 | 26,238 | 49,212,137 | 44,794,560 | 0 | 0 |
| PREFERRED STOCK | | | | | | | | |
| 8. NAIC 1..... | | | | | | 0 | | |
| 9. NAIC 2..... | | | | | | 0 | | |
| 10. NAIC 3..... | | | | | | 0 | | |
| 11. NAIC 4..... | | | | | | 0 | | |
| 12. NAIC 5..... | | | | | | 0 | | |
| 13. NAIC 6..... | | | | | | 0 | | |
| 14. Total Preferred Stock..... | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 15. Total Bonds and Preferred Stock..... | 49,212,137 | (4,443,816) | 0 | 26,238 | 49,212,137 | 44,794,560 | 0 | 0 |

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(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

SCHEDULE DA - PART 1

Short-Term Investments

| | 1 Book/Adjusted Carrying Value | 2 Par Value | 3 Actual Cost | 4 Interest Collected Year To Date | 5 Paid for Accrued Interest Year To Date |
|--------------|--------------------------------------|----------------|---------------------|---|--|
| 9199999..... | | XXX | | | |

SCHEDULE DA - VERIFICATION

Short-Term Investments

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

SCHEDULE DB - PART A - VERIFICATION

Options, Caps, Floors, Collars, Swaps and Forwards

| | | | |
|-----|--|---|--|
| 1. | Book/adjusted carrying value, December 31, prior year (Line 10, prior year)..... | | |
| 2. | Cost paid/(consideration received) on additions..... | | |
| 3. | Unrealized valuation increase/(decrease)..... | | |
| 4. | SSAP No. 108 adjustments..... | | |
| 5. | Total gain (loss) on termination recognized..... | | |
| 6. | Considerations received/(paid) on terminations..... | | |
| 7. | Amortization..... | | |
| 8. | Adjustment to the book/adjusted carrying value of hedge item..... | | |
| 9. | Total foreign exchange change in book/adjusted carrying value..... | | |
| 10. | Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 + 7 + 8 + 9)..... | 0 | |
| 11. | Deduct nonadmitted assets..... | | |
| 12. | Statement value at end of current period (Line 10 minus Line 11)..... | 0 | |

SCHEDULE DB - PART B - VERIFICATION

Futures Contracts

| | | | |
|------|---|---|---|
| 1. | Book/adjusted carrying value, December 31, prior year (Line 6, prior year)..... | | |
| 2. | Cumulative cash change (Section 1, Broker Name/Net Cash Deposits Footnote - Cumulative Cash Change column)..... | | |
| 3.1 | Add: | | |
| | Change in variation margin on open contracts - Highly Effective Hedges: | | |
| 3.11 | Section 1, Column 15, current year to date minus..... | | |
| 3.12 | Section 1, Column 15, prior year..... | 0 | |
| | Change in variation margin on open contracts - All Other: | | |
| 3.13 | Section 1, Column 18, current year to date minus..... | | |
| 3.14 | Section 1, Column 18, prior year..... | 0 | 0 |
| 3.2 | Add: | | |
| | Change in adjustment to basis of hedged item: | | |
| 3.21 | Section 1, Column 17, current year to date minus..... | | |
| 3.22 | Section 1, Column 17, prior year..... | 0 | |
| | Change in amount recognized: | | |
| 3.23 | Section 1, Column 19, current year to date minus..... | | |
| 3.24 | Section 1, Column 19, prior year..... | | |
| 3.25 | SSAP No. 108 adjustments..... | 0 | 0 |
| 3.3 | Subtotal (Line 3.1 minus Line 3.2)..... | | 0 |
| 4.1 | Cumulative variation margin on terminated contracts during the year..... | | |
| 4.2 | Less: | | |
| 4.21 | Amount used to adjust basis of hedged item..... | | |
| 4.22 | Amount recognized..... | | |
| 4.23 | SSAP No. 108 adjustments..... | 0 | |
| 4.3 | Subtotal (Line 4.1 minus Line 4.2)..... | | 0 |
| 5. | Dispositions gains (losses) on contracts terminated in prior year: | | |
| 5.1 | Total gain (loss) recognized for terminations in prior year..... | | |
| 5.2 | Total gain (loss) adjusted into the hedged item(s) for the terminations in prior year..... | | |
| 6. | Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3.3 - 4.3 - 5.1 - 5.2)..... | 0 | |
| 7. | Deduct nonadmitted assets..... | | |
| 8. | Statement value at end of current period (Line 6 minus Line 7)..... | 0 | |

SCHEDULE DB - PART C - SECTION 1

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

| Replication (Synthetic) Asset Transactions | | | | | | | | Components of the Replication (Synthetic Asset) Transactions | | | | | | | |
|--|-------------|---------------------------------------|-----------------|------------------------------|------------|----------------|---------------|--|------------------------------|------------|-------------------------|-------------|---------------------------------------|------------------------------|------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | Derivative Instrument(s) Open | | | Cash Instrument(s) Held | | | | |
| Number | Description | NAIC Designation or Other Description | Notional Amount | Book/Adjusted Carrying Value | Fair Value | Effective Date | Maturity Date | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
| | | | | | | | | Description | Book/Adjusted Carrying Value | Fair Value | CUSIP | Description | NAIC Designation or Other Description | Book/Adjusted Carrying Value | Fair Value |
| | | | | | | | | | | | | | | | |

SCHEDULE DB - PART C - SECTION 2

Reconciliation (Synthetic Asset) Transactions Open

| | First Quarter | | Second Quarter | | Third Quarter | | Fourth Quarter | | Year-To-Date | |
|---|--------------------------|---|--------------------------|---|--------------------------|---|--------------------------|---|--------------------------|--|
| | 1 Number of Positions | 2 Total Replication (Synthetic Asset) Transactions Statement Value | 3 Number of Positions | 4 Total Replication (Synthetic Asset) Transactions Statement Value | 5 Number of Positions | 6 Total Replication (Synthetic Asset) Transactions Statement Value | 7 Number of Positions | 8 Total Replication (Synthetic Asset) Transactions Statement Value | 9 Number of Positions | 10 Total Replication (Synthetic Asset) Transactions Statement Value |
| 1. Beginning Inventory..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |
| 2. Add: Opened or acquired transactions..... | | | | | | | | |0 |0 |
| 3. Add: Increases in replication (synthetic asset) transactions statement value..... |XXX | |XXX | |XXX | |XXX | |XXX |0 |
| 4. Less: Closed or disposed of transactions..... | | | | | | | | |0 |0 |
| 5. Less: Positions disposed of for failing effectiveness criteria..... | | | | | | | | |0 |0 |
| 6. Less: Decreases in replication (synthetic asset) transactions statement value..... |XXX | |XXX | |XXX | |XXX | |XXX |0 |
| 7. Ending Inventory..... |0 |0 |0 |0 |0 |0 |0 |0 |0 |0 |

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SCHEDULE DB - VERIFICATION

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

Book/Adjusted Carrying Value Check

| | | |
|----|---|-------|
| 1. | Part A, Section 1, Column 14..... | _____ |
| 2. | Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance..... | _____ |
| 3. | Total (Line 1 plus Line 2)..... | 0 |
| 4. | Part D, Section 1, Column 5..... | _____ |
| 5. | Part D, Section 1, Column 6..... | _____ |
| 6. | Total (Line 3 minus Line 4 minus Line 5)..... | 0 |

Fair Value Check

| | | |
|-----|---|-------|
| 7. | Part A, Section 1, Column 16..... | _____ |
| 8. | Part B, Section 1, Column 13..... | _____ |
| 9. | Total (Line 7 plus Line 8)..... | 0 |
| 10. | Part D, Section 1, Column 8..... | _____ |
| 11. | Part D, Section 1, Column 9..... | _____ |
| 12. | Total (Line 9 minus Line 10 minus Line 11)..... | 0 |

Potential Exposure Check

| | | |
|-----|---|-------|
| 13. | Part A, Section 1, Column 21..... | _____ |
| 14. | Part B, Section 1, Column 20..... | _____ |
| 15. | Part D, Section 1, Column 11..... | _____ |
| 16. | Total (Line 13 plus Line 14 minus Line 15)..... | 0 |

SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year..... | 0 | |
| 2. Cost of cash equivalents acquired..... | 1,682,194 | |
| 3. Accrual of discount..... | | |
| 4. Unrealized valuation increase (decrease)..... | | |
| 5. Total gain (loss) on disposals..... | | |
| 6. Deduct consideration received on disposals..... | | |
| 7. Deduct amortization of premium..... | | |
| 8. Total foreign exchange change in book/ adjusted carrying value..... | | |
| 9. Deduct current year's other-than-temporary impairment recognized..... | | |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)..... | 1,682,194 | 0 |
| 11. Deduct total nonadmitted amounts..... | | |
| 12. Statement value at end of current period (Line 10 minus Line 11)..... | 1,682,194 | 0 |

SCHEDULE A - PART 2

Showing all Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

| 1 Description of Property | Location | | 4 Date Acquired | 5 Name of Vendor | 6 Actual Cost at Time of Acquisition | 7 Amount of Encumbrances | 8 Book/Adjusted Carrying Value Less Encumbrances | 9 Additional Investment Made After Acquisition |
|------------------------------|-----------|------------|--------------------|---------------------|---|-----------------------------|---|---|
| | 2 City | 3 State | | | | | | |

QE01

SCHEDULE A - PART 3

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

| 1 Description of Property | Location | | 4 Disposal Date | 5 Name of Purchaser | 6 Actual Cost | 7 Expended for Additions, Permanent Improvements and Changes in Encumbrances | 8 Book/Adjusted Carrying Value Less Encumbrances Prior Year | Change in Book/Adjusted Carrying Value Less Encumbrances | | | | | 14 Book/Adjusted Carrying Value Less Encumbrances on Disposal | 15 Amounts Received During Year | 16 Foreign Exchange Gain (Loss) on Disposal | 17 Realized Gain (Loss) on Disposal | 18 Total Gain (Loss) on Disposal | 19 Gross Income Earned Less Interest Incurred on Encumbrances | 20 Taxes, Repairs, and Expenses Incurred |
|------------------------------|-----------|------------|--------------------|------------------------|------------------|---|--|--|---|---|---|--|--|------------------------------------|--|--|-------------------------------------|--|---|
| | 2 City | 3 State | | | | | | 9 Current Year's Depreciation | 10 Current Year's Other-Than-Temporary Impairment Recognized | 11 Current Year's Change in Encumbrances | 12 Total Change in B./A.C.V. (11 - 9 - 10) | 13 Total Foreign Exchange Change in B./A.C.V. | | | | | | | |

SCHEDULE B - PART 2

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

| 1 | 2 Location | | 4 | 5 | 6 | 7 | 8 | 9 |
|-------------|------------|---------|-----------|---------------|------------------|------------------------------------|--|-----------------------------|
| Loan Number | City | 3 State | Loan Type | Date Acquired | Rate of Interest | Actual Cost at Time of Acquisition | Additional Investment Made After Acquisition | Value of Land and Buildings |

QE02

SCHEDULE B - PART 3

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

| 1 | 2 Location | | 4 | 5 | 6 | 7 | 8 Change in Book Value/Recorded Investment | | | | | 14 | 15 | 16 | 17 | 18 | |
|-------------|------------|---------|-----------|---------------|---------------|--|--|---|--|--|---|--|---|---------------|--|----------------------------------|-------------------------------|
| Loan Number | City | 3 State | Loan Type | Date Acquired | Disposal Date | Book Value/Recorded Investment Excluding Accrued Interest Prior Year | Unrealized Valuation Increase (Decrease) | 9 Current Year's (Amortization) / Accretion | 10 Current Year's Other-Than-Temporary Impairment Recognized | 11 Capitalized Deferred Interest and Other | 12 Total Change in Book Value (8 + 9 - 10 + 11) | 13 Total Foreign Exchange Change in Book Value | Book Value / Recorded Investment Excluding Accrued Interest on Disposal | Consideration | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal |

SCHEDULE BA - PART 2

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

| 1 | 2 | Location | | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|----------------------|---------------------|----------|-------|-----------------------------------|---|--------------------------|-------------------|------------------------------------|--|------------------------|--------------------------------------|-------------------------|
| | | 3 | 4 | | | | | | | | | |
| CUSIP Identification | Name or Description | City | State | Name of Vendor or General Partner | NAIC Designation and Administrative Symbol/Market Indicator | Date Originally Acquired | Type and Strategy | Actual Cost at Time of Acquisition | Additional Investment Made after Acquisition | Amount of Encumbrances | Commitment for Additional Investment | Percentage of Ownership |

QE03

SCHEDULE BA - PART 3

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

| 1 | 2 | Location | | 5 | 6 | 7 | 8 | Changes in Book/Adjusted Carrying Value | | | | | | 15 | 16 | 17 | 18 | 19 | 20 |
|----------------------|---------------------|----------|-------|---|--------------------------|---------------|--|--|---|---|---|--|--|--|---------------|--|----------------------------------|-------------------------------|-------------------|
| | | 3 | 4 | | | | | 9 | 10 | 11 | 12 | 13 | 14 | | | | | | |
| CUSIP Identification | Name or Description | City | State | Name of Purchaser or Nature of Disposal | Date Originally Acquired | Disposal Date | Book/Adjusted Carrying Value Less Encumbrances, Prior Year | Unrealized Valuation Increase (Decrease) | Current Year's (Depreciation) or (Amortization) / Accretion | Current Year's Other-Than-Temporary Impairment Recognized | Capitalized Deferred Interest and Other | Total Change in B./A.C.V. (9+10-11+12) | Total Foreign Exchange Change in B./A.C.V. | Book/Adjusted Carrying Value Less Encumbrances on Disposal | Consideration | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Investment Income |

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

| 1 CUSIP Identification | 2 Description | 3 Foreign | 4 Date Acquired | 5 Name of Vendor | 6 Number of Shares of Stock | 7 Actual Cost | 8 Par Value | 9 Paid for Accrued Interest and Dividends | 10 NAIC Designation and Administrative Symbol |
|---------------------------|------------------|--------------|--------------------|---------------------|--------------------------------|------------------|----------------|--|--|
|---------------------------|------------------|--------------|--------------------|---------------------|--------------------------------|------------------|----------------|--|--|

QE04

SCHEDULE D - PART 4

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Change in Book/Adjusted Carrying Value | | | | | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
|----------------------|-------------|---------|---------------|-------------------|---------------------------|---------------|-----------|-------------|---|--|---|---|--------------------------------------|--|---|--|----------------------------------|-------------------------------|--|----------------------------------|--|
| | | | | | | | | | | 11 | 12 | 13 | 14 | 15 | | | | | | | |
| CUSIP Identification | Description | Foreign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Prior Year Book/Adjusted Carrying Value | Unrealized Valuation Increase (Decrease) | Current Year's (Amortization) / Accretion | Current Year's Other-Than-Temporary Impairment Recognized | Total Change in B./A.C.V. (11+12-13) | Total Foreign Exchange Change in B./A.C.V. | Book/Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest / Stock Dividends Received During Year | Stated Contractual Maturity Date | NAIC Designation and Administrative Symbol |
| | | | | | | | | | | | | | | | | | | | | | |

QE05

SCHEDULE DB - PART A - SECTION 1

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 |
|-------------|---|-------------------------------|------------------------|---|------------|--------------------------------|---------------------|-----------------|---|---|---|---------------------|------------------------------|----------------|------------|--|--|---|--|--------------------|------------------------------------|--|
| Description | Description of Item(s) Hedged, Used for Income Generation or Replicated | Schedule / Exhibit Identifier | Type(s) of Risk(s) (a) | Exchange, Counterparty or Central Clearinghouse | Trade Date | Date of Maturity or Expiration | Number of Contracts | Notional Amount | Strike Price, Rate of Index Received (Paid) | Cumulative Prior Year(s) Initial Cost of Undiscounted Premium (Received) Paid | Current Year Initial Cost of Undiscounted Premium (Received) Paid | Current Year Income | Book/Adjusted Carrying Value | Carrying Value | Fair Value | Unrealized Valuation Increase (Decrease) | Total Foreign Exchange Change in B./A.C.V. | Current Year's (Amortization) / Accretion | Adjustment to Carrying Value of Hedged Items | Potential Exposure | Credit Quality of Reference Entity | Hedge Effectiveness at Inception and at Year-end (b) |

SCHEDULE DB - PART B - SECTION 1

Futures Contracts Open as of the Current Statement Date

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | Highly Effective Hedges | | | 18 | 19 | 20 | 21 | 22 |
|---------------|---------------------|-----------------|-------------|---|-------------------------------|------------------------|--------------------------------|----------|------------|-------------------|----------------------|------------|------------------------------|-----------------------------|---------------------------|--|--|---|--------------------|--|------------------------|
| | | | | | | | | | | | | | | 15 | 16 | 17 | | | | | |
| Ticker Symbol | Number of Contracts | Notional Amount | Description | Description of Item(s) Hedged, Used for Income Generation or Replicated | Schedule / Exhibit Identifier | Type(s) of Risk(s) (a) | Date of Maturity or Expiration | Exchange | Trade Date | Transaction Price | Reporting Date Price | Fair Value | Book/Adjusted Carrying Value | Cumulative Variation Margin | Deferred Variation Margin | Change in Variation Margin Gain (Loss) Used to Adjust Basis of Hedged Item | Cumulative Variation Margin for All Other Hedges | Change in Variation Margin Gain (Loss) Recognized in Current Year | Potential Exposure | Hedge Effectiveness at Inception and at Year-end (b) | Value of One (1) Point |
| | | | | | | | | | | | | | | | | | | | | | |

QE07

SCHEDULE DB - PART D - SECTION 1

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

| 1 Description of Exchange, Counterparty or Central Clearinghouse | 2 Master Agreement (Y or N) | 3 Credit Support Annex (Y or N) | 4 Fair Value of Acceptable Collateral | Book Adjusted Carrying Value | | | Fair Value | | | 11 Potential Exposure | 12 Off-Balance Sheet Exposure |
|---|-----------------------------------|---------------------------------------|--|--|--|---------------------------------|------------------------------------|------------------------------------|----------------------------------|--------------------------|----------------------------------|
| | | | | 5 Contracts with Book/Adjusted Carrying Value > 0 | 6 Contracts with Book/Adjusted Carrying Value < 0 | 7 Exposure Net of Collateral | 8 Contracts with Fair Value > 0 | 9 Contracts with Fair Value < 0 | 10 Exposure Net of Collateral | | |
| 1. Offset per SSAP No. 64..... | | | | | | | | | | | |
| 2. Net after right of offset per SSAP No. 64..... | | | | | 0 | 0 | | | | | |

QE08

SCHEDULE DB - PART D - SECTION 2

Collateral for Derivative Instruments Open as of Current Statement Date

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|---|-----------------------|----------------------|-------------|------------|-----------|------------------------------|---------------|-----------------------------|
| Exchange, Counterparty or Central Clearinghouse | Type of Asset Pledged | CUSIP Identification | Description | Fair Value | Par Value | Book/Adjusted Carrying Value | Maturity Date | Type of Margin (I, V or IV) |
| | | | | | | | | |

SCHEDULE DB - PART E

Derivatives Hedging Variable Annuity Guarantees as of the Current Statement Date

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

| CDHS | | Hedged Item | | | | | | | | Hedging Instruments | | | | | | | | |
|------------|-------------|---|---|--|---|---|--|--|---|------------------------|--|--|---|--|---|---|--|--|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| Identifier | Description | Prior Fair Value in Full Contract Cash Flow Attributed to Interest Rate | Ending Fair Value in Full Contract Cash Flow Attributed to Interest Rates | Fair Value Gain (Loss) in Hedged Item Attributed to Interest Rates (4-3) | Fair Value Gain (Loss) in Hedged Item Attributed to Hedged Risk | Current Year Increase (Decrease) in VM-21 Liability (Decrease) in VM-21 Liability | Current Year Increase (Decrease) in VM-21 Liability Attributed to Interest Rates | Change in the Hedged Item Attributed to Hedged Risk Percentage (6/5) | Current Year Increase (Decrease) in VM-21 Liability Attributed to Hedged Risk (8*9) | Prior Deferred Balance | Current Year Fair Value Fluctuation of the Hedge Instruments | Current Year Natural Offset to VM-21 Liability | Hedging Instruments' Current Fair Value Fluctuation Not Attributed to Hedged Risk | Hedge Gain (Loss) in Current Year Deferred Adjustment [12 - (13 + 14)] | Current Year Prescribed Deferred Amortization | Current Year Additional Deferred Amortization | Current Year Total Deferred Amortization (16 + 17) | Ending Deferred Balance (11 + 15 + 18) |
| | | | | | | | | | | | | | | | | | | |

SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|----------------------|-------------|------|--|------------|------------------------------|---------------|
| CUSIP Identification | Description | Code | NAIC Designation and Administrative Symbol | Fair Value | Book/Adjusted Carrying Value | Maturity Date |

General Interrogatories:

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

SCHEDULE DL - PART 2 SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|----------------------|-------------|------|--|------------|------------------------------|---------------|
| CUSIP Identification | Description | Code | NAIC Designation and Administrative Symbol | Fair Value | Book/Adjusted Carrying Value | Maturity Date |

General Interrogatories:

1. The activity for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
2. Average balance for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

| 1 Depository | 2 Code | 3 Rate of Interest | 4 Amount of Interest Received During Current Quarter | 5 Amount of Interest Accrued at Current Statement Date | Book Balance at End of Each Month During Current Quarter | | | 9 * |
|---------------------|---------------|---------------------------|---|---|--|-----------------------|----------------------|------------|
| | | | | | 6 First Month | 7 Second Month | 8 Third Month | |
| | | | | | | | | |

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

| 1 CUSIP | 2 Description | 3 Code | 4 Date Acquired | 5 Rate of Interest | 6 Maturity Date | 7 Book/Adjusted Carrying Value | 8 Amount of Interest Due & Accrued | 9 Amount Received During Year |
|---|------------------------------|-----------|--------------------|-----------------------|--------------------|-----------------------------------|---------------------------------------|----------------------------------|
| Exempt Money Market Mutual Funds as Identified by the SVO | | | | | | | | |
| 60934N 50 0 | FEDERATED HRMS TRS INST..... | | 06/02/2020..... |0.100 | |1,682,194 |147 |437 |
| 8599999. Total - Exempt Money Market Mutual Funds as Identified by the SVO..... | | | | | |1,682,194 |147 |437 |
| 8899999. Total - Cash Equivalents..... | | | | | |1,682,194 |147 |437 |

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