DISTRICT OF COLUMBIA CAPTIVE INSURANCE COMPANY ANNUAL STATEMENT FOR THE PERIOD ENDED September 30, 2019

District of Columbia Captive Insurance Agency

COMPANY NAME

INCORPORAT	ED DATE:	May 29, 2008			
COMMENCED	BUSINESS DATE:	May 29, 2008	======================================		
DC HOME OF	FICE ADDRESS:	441 4th Street NV	/, Suite 800S; Washing	iton, DC 2000	1
COMPANY CO	NTACT:		i Ross		(202) 727-8600 PHONE
CAPTIVE MAN	IAGER:	Angel	a Dignan	_ ,	(410) 339-7263 PHONE
					PHONE
TITLE President Secretary	NAME	TITLE Vice President	ICERS* NAME	TITLE	NAME
Treasurer		Vice President			
- N	AME		CTORS*	3	NAME
Jed Ross					TVANIE
-					
		-	*		
	rict of Columbia				
County of					
,	وفيسور	President Secretary			
-		Treasurer			
insurer, and tha were the absolut thereon, except schedules, and statement of all	ses and says that the ton the last day of the property of the say as stated, and that explanations therein the assets and liabi	ney are the above de he period presented aid insurer, free and this annual statemen a contained, annexed lities and of the conc	rance Agency escribed officers of the , all of the herein describear from any liens or nt, together with related d or referred to are a filition and affairs of the ons therefrom for the year	said ribed assets claims d exhibits, ull and true said insurer	sworn, each
on that date, ac	cording to the best of	of their information, k	nowledge and belief, r	espectively.	
gal a	2	νÃ.		3	
	Ross isk Officer	Sec	retary	Т	reasurer**
Other Exec	cutive Officer				

Subscribed and sworn to before me this 13th day of Tebroary 20 20

Susana Suarez Notary Public, District of Columbia My Commission Expires 8/14/2020

*Show full name and indicate by number sign (#) those officers and directors who did not occupy the indicated position in the previous annual statement.

**Or corresponding person having charge of the accounts of the insurer.

SUSANA SUAPELLA SUAPE

ANNUAL STATEMENT FOR THE PESeptember 30, 2019 District of Columbia Captive Insurance Agency

TABLE OF CONTENTS

- 2. BALANCE SHEET
- 3. STATEMENT OF INCOME
- 3. CAPITAL AND SURPLUS ACCOUNT
- 4a. QUESTIONNAIRE
- 4b. QUESTIONNAIRE (CONTINUED)
- 4c. QUESTIONNAIRE (CONTINUED)
- 5. PREMIUM SCHEDULE
- 6. REINSURANCE
- 7. UNPAID LOSSES & LAE
- 8. LOSS & LAE PAID AND INCURRED
- 9a. SUMMARY OF ALL LINES NET LOSS & LAE
- 9b. AUTOMOBILE LIABILITY NET LOSS & LAE
- 9c. GENERAL AND PRODUCT LIABILITY NET LOSS & LAE
- 9d. PROFESSIONAL LIABILITY Net LOSS & LAE
- 9e. ADDITIONAL LINE NET LOSS & LAE
- 9f. ADDITIONAL LINE NET LOSS & LAE
- 9g. ADDITIONAL LINE NET LOSS & LAE
- 9h. ADDITIONAL LINE NET LOSS & LAE
- 9i. ADDITIONAL LINE NET LOSS & LAE
- 10a. SUMMARY OF ALL LINES LOSS DEVELOPMENT
- 10b. AUTOMOBILE LIABILITY LOSS DEVELOPMENT
- 10c. GENERAL AND PRODUCT LIABILITY LOSS DEVELOPMENT
- 10d. PROFESSIONAL LIABILITY LOSS DEVELOPMENT
- 10e. ADDITIONAL LINE LOSS DEVELOPMENT
- 10f. ADDITIONAL LINE LOSS DEVELOPMENT
- 10g. ADDITIONAL LINE LOSS DEVELOPMENT
- 10h. ADDITIONAL LINE LOSS DEVELOPMENT
- 10i. ADDITIONAL LINE LOSS DEVELOPMENT
- 11. INVESTMENT SCHEDULE

These templates may be used for other lines of business written if necessary.

These templates may be used for other lines of business written if necessary.

ANNUAL STATEMENT FOR THE PERIOD ENDED: September 30, 2019 District of Columbia Captive Insurance Agency

BALANCE SHEET						
ASSETS						
	09/30/2019	09/30/2018				
1. Bonds						
2. Stocks						
3. Cash	1,322,800	635,321				
Savings and Certificate of Deposit						
5. Other Invested Assets						
a)	1,405,072	2,711,431				
b)						
6. Subtotal, Cash and Invested Assets (lines 1 to 5)	2,727,872	3,346,752				
7. Investment Income Due and Accrued						
Accounts and Premiums Receivable						
Investments In and Advances to Affiliates						
10. Deferred Tax Asset						
11. Deferred Acquisition Costs						
12. Reins. Recoverable on Unpaid Losses & LAE						
13. Reins. Recoverable on Paid Losses & LAE						
14. Funds Held by Ceding Reinsurers						
15. Prepaid Reinsurance Premiums						
16. Deposits With Reinsurer						
17. Letters of Credit						
18. Other Assets						
a) Loan to Parent						
b) Accrued Interest on Loan to Parent						
c)						
19. Total Assets (lines 6 to 18)	2,727,872	3,346,752				

LIABILITIES, CAPITAL AND SURPLUS							
	09/30/2019	09/30/2018					
20. Losses	578,827	687,117					
21. Loss Adjustment Expenses							
22. Reins. Payable on Paid Losses & LAE							
23. Deposits Held Pursuant to Insurance Contracts							
24. Commissions, Expenses and Fees							
25. Federal Taxes Payable							
26. Unearned Premium							
27. Deferred Tax Liability							
28. Reinsurance Balances Payable							
29. Loans and Notes Payable							
30. Amounts Due to Affiliates							
31. Funds Held Under Reinsurance Contracts							
32. Dividends Payable							
33. Other Liabilities							
a)							
b)							
C)							
34. Total Liabilities (lines 20 to 33)	578,827	687,117					
35. Capital and Surplus:							
a) Common Stock							
b) Preferred Stock							
c) Contributed Surplus	4,094,002	4,990,498					
d) Unrealized Gain (Loss) on Investments							
36. Surplus (Accumulated Earnings)	(1,944,957)	(2,330,863)					
37. Total Capital and Surplus (page 3, line 27)	2,149,045	2,659,635					
38. Total (lines 34 and 37)	2,727,872	3,346,752					

STATEMENT OF INCOME					
	09/30/2019	09/30/2018			
Underwriting Income:					
1. Net Premiums Written (page 5, column 6)	73,029	73,903			
2. Net (Increase) Decrease In Unearned Premiums					
Net Premiums Earned	73,029	73,903			
4. Other Insurance Income	593,124	103,364			
5. Total Income (lines 3 and 4)	666.153	177,267			
Underwriting Expenses:					
6. Net Losses Incurred	(108,290)	(49,075)			
Net Loss Adjustment Expenses Incurred		-			
Commisions and Brokerage					
General and Administrative	409,864	574,529			
10. Other Underwriting Expenses					
11. Total Underwriting Expenses (lines 6 to 10)	301,574	525,454			
12. Underwriting Profit (Loss) (line 5 minus 11)	364,579	(348,187)			
13. Investment Income - Net	21,326	73,838			
14. Other Income					
15. Other Expenses					
16. Income Before Dividends and Taxes					
(lines 12 to 14 minus 15)	385,905	(274,349)			
17. Dividends to Policyholders					
18. Taxes (Federal)					
19. Net Income (line 16 minus lines 17 and 18)	385,905	(274,349)			

CAPITAL AND SURPLUS ACCOUNT					
20. Capital & Surplus, end of previous year	2,659,635	2,723,955			
21. Net Income	385,905	(274,349)			
22. Net Unrealized Capital Gains or Losses					
(including equity income (loss) on subsidiaries)					
23. Capital Changes:					
a) Paid in					
b) Transferred from Surplus (Stock Dividend)					
c) Transferred to Surplus					
24. Surplus Adjustments:					
a) Paid in					
b) Transferred to Capital (Stock Dividend)					
c) Transferred from Capital					
25. Dividends (Show as negative)					
26. Other (Show reductions in surplus as negatives):					
a) Removal of prior year appropriation funding	(2,991,450)	(1,912,892)			
b) Addition of FY18 appropriation		2,122,921			
c) Addition of FY19 appropriation	2,094,955	-			
27. Capital & Surplus, end of current year					
(lines 20 to 26; page 2, line 37)	2,149.045	2,659,635			

ASSETS

α	IFST	101	AI		-
		9 79	/- 31	154	-

indir	What is the name of the individual(s), corporation(s), association, or other entities who directly or indirectly own or control the insurer? Please list individual owners and percentage of ownership. The Captive is a subordinate agency of the District of Columbia								
		CAI	PITAL STOCK OF CA	APTIVE					
	Class	Number Shares Authorized	Number Shares Outstanding	Pa	r Value				
	Preferred								
	Common								
Ange	ela Dignan, N	and address of approv MBA, ACI - RCM&D ve; Baltimore, MD 212		firm name)?					
What Mark	t is the approv	ved appointed actuary'	s name and the addr		arial firm?				
What	t is the name applicable - 0	of the approved CPA p Captive is not require as part of the overall I	partner and the addre	ss of the indep					
Morr	t is the name	and address of resider	nt registered agent?						
1401		/, Suite 760, Washing	ton DC						
What i	H Street NW is the name a is, Manning H Street NW	I, Suite 760, Washing nd address of the Com & Martin LLP I, Suite 760, Washing	npany's D.C. attorney		o office on or hefere	the			
What in Morr 1401 Have close	is the name a is, Manning H Street NW	I, Suite 760, Washing nd address of the Com & Martin LLP	npany's D.C. attorney ton DC lich notice was receiv	ved at the home		the			
What i	is the name a is, Manning H Street NW	nd address of the Com Martin LLP Suite 760, Washing Suite 760, Washing And Suite 760, Washing	npany's D.C. attorney ton DC lich notice was receiv	ved at the home		the			
What is Morr 1401 Have close	is the name a is, Manning H Street NW. all transaction of business of	nd address of the Com Martin LLP I, Suite 760, Washing Ins of the captive of whom the date shown bee No I "net" amount insured	npany's D.C. attorney ton DC nich notice was receiven truthfully and accur	ved at the home		the			
What i Morr 1401 Have close What Per o	is the name a is, Manning H Street NW e all transaction of business of the street is the largest occurrence?	nd address of the Com & Martin LLP /, Suite 760, Washing ons of the captive of whom the date shown bee NO "net" amount insured 1,000,000	npany's D.C. attorney ton DC iich notice was receive n truthfully and accurate in any one risk: Aggregate?	ved at the home	on its books?	the			
What is Morr 1401 Have close What Per o Has t If yes	is the name a is, Manning H Street NW. all transaction of business of the street is the largest occurrence? the "net" aggress, by what among the street is the street is the street in	nd address of the Com & Martin LLP /, Suite 760, Washing ons of the captive of whom the date shown bee NO "net" amount insured 1,000,000	npany's D.C. attorney ton DC iich notice was receiv n truthfully and accur in any one risk: Aggregate? ast year's?	ved at the home ately entered of	3,000,000 ☑ NO				
What is Morr 1401 Have close What Per o Has t If yes	is the name a is, Manning H Street NW e all transaction of business of the street street is the largest occurrence? The "net" aggres, by what amount of the street street is the street aggres, by what amount of the street is the street aggres, by what amount of the street is the str	Ind address of the Com Martin LLP Indicate Teo, Washing Ins of the captive of whom the date shown bee Insert amount insured 1,000,000 I "net" amount insured 1,000,000	npany's D.C. attorney ton DC iich notice was receiv n truthfully and accur in any one risk: Aggregate? ast year's?	ved at the home ately entered of	3,000,000 ☑ NO				
What is Morr 1401 Have close Vhat Per o Has t If yes Has a associ	is the name a is, Manning H Street NW. Is all transaction of business of the street o	nd address of the Com & Martin LLP // Suite 760, Washing ons of the captive of whom the date shown bee NO "net" amount insured 1,000,000 egate increased over labount? een made during the year	ton DC iich notice was receiven truthfully and accurate accurate any one risk: Aggregate? ast year's? ear of this statement	YES The charter, and the charter cha	3,000,000 ☑ NO by-laws or articles of				
What is Morr 1401 Have close Vhat Per of the Has to If yes Has a associated Account Account Account GAAI	is the name a is, Manning H Street NW e all transaction of business of the street is the largest occurrence? The "net" aggress, by what amount of the street is the largest occurrence? The province of the street is the largest occurrence? The province of the street is the largest occurrence? The province occurrence occ	Ind address of the Com Martin LLP Indicate Teo, Washing Ins of the captive of whom the date shown bee Insolve I "net" amount insured 1,000,000 It "net" amount insured 1,000,000 It "not" amount insured 1,000,000	in any one risk: Aggregate? ear of this statement prepare the statement prepare the statement prepare the statement preproval granted by the	YES In the charter, and (e.g., Generles (SAP))?	3,000,000 ☑ NO by-laws or articles of				
What is Morr 1401 Have close Vhat Per of the Has to If yes Has a associated Account A	is the name a is, Manning H Street NW e all transaction of business of the street is the largest occurrence? The "net" aggress, by what amount of the street is the largest occurrence? The "net" aggress of the street is the largest occurrence? The "net" aggress occurrence? The princip is the basis of the basis of the basis of the street is the largest occurrence? The princip is the basis of th	Ind address of the Com Martin LLP Indicate Teo, Washing Indicate T	in any one risk: Aggregate? ear of this statement prepare the stateme y Accounting Princip	YES The Charter, 1 The Charter, 2 The Charter, 3 The Charter, 4 The Charter, 5 The Charter, 6 The Charter, 6 The Charter, 7 The Charter, 7 The Charter, 8 The Charter, 9 The Chart	3,000,000 ☑ NO by-laws or articles of ally Accepted				

QUESTIONNAIRE (continued)

11.1	Are the officers, directors and key employees of the re		
11.1	the captive insurer, which includes, at a minimum, the (a) Honest and ethical conduct, including the ethical h between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disc the captive with the Department; (c) Compliance with all applicable District laws, regula (d) The prompt internal reporting of violations to an ap ethics; and (e) Accountability for adherence to the code of ethics. YES NO (a) If the response to 11.1 is No, please explain:	following standards? andling of actual or apploace in the periodic retions and orders of the	parent conflicts of interest eports required to be filed by Commissioner;
11.2	Has each director, officer and key employee certified in the captive's code of ethics and a record of such certification by the Department upon request?	n writing annually that lication is maintained by	ne or she is in compliance with y the captive insurer for review
44.0			
11.2	(a) If the response to 11,2 is No, please explain:	Not applicable	
11.3	Has the code of ethics been amended?		
11,3			
	L YES ✓ NO		
11.4	If the response to 11.3 is Yes, provide information rela	ted to amendment(s);	Not applicable
	Have any provisions of the code of ethics been waived YES NO If the response to 11,5 is Yes, provide the nature of an		ors and key employees?
	Not applicable		
12.	Has the company changed its plan of operation during ☐ YES ☑ NO		e explain.
12.	Has the company changed its plan of operation during		e explain.
	Has the company changed its plan of operation during YES NO Not applicable	the year? If yes, pleas	
12. 13.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted?	the year? If yes, pleas	e explain.
	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used	the year? If yes, pleas	
	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted?	the year? If yes, pleas	
	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used	the year? If yes, pleas VES Not applicable Not applicable	✓ NO
13.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col	the year? If yes, pleas VES Not applicable Not applicable	✓ NO
13.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col	the year? If yes, pleas VES Not applicable Not applicable	✓ NO
13.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col YES NO If yes, attach a description of the transactions as a sup	the year? If yes, pleas VES Not applicable Not applicable	✓ NO
13.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col	the year? If yes, pleas VES Not applicable Not applicable	✓ NO
13.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col YES NO If yes, attach a description of the transactions as a sup	the year? If yes, pleas YES Not applicable Not applicable lateral at any time during	☑ NO ng the year?
13.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col YES NO If yes, attach a description of the transactions as a sup	the year? If yes, pleas YES Not applicable Not applicable lateral at any time during plement to this filing.	✓ NO
13. 14.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col YES NO If yes, attach a description of the transactions as a sup Not applicable	the year? If yes, pleas YES Not applicable Not applicable lateral at any time durin plement to this filling.	☑ NO ing the year? ☑ NO
13. 14. 15.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col YES NO If yes, attach a description of the transactions as a sup Not applicable Is the company writing or assuming unrelated business	the year? If yes, pleas YES Not applicable Not applicable lateral at any time during plement to this filling. YES the total business writt Not applicable	☑ NO Ing the year? ☑ NO Ien and assumed?
13. 14. 15.	Has the company changed its plan of operation during YES NO Not applicable Have losses been discounted? If yes, what interest rate was used What was the total amount of the discount Were any of the assets of the company pledged as col YES NO If yes, attach a description of the transactions as a sup Not applicable Is the company writing or assuming unrelated business If answer to 15 above is yes, what is the percentage to What other services does the approved independent C Corporation?	the year? If yes, pleas YES Not applicable Not applicable lateral at any time during plement to this filling. YES the total business writt Not applicable	☑ NO Ing the year? ☑ NO Ien and assumed?

18. Did a quorum of the Board of Directors meet at least once during calendar year 2019 in the District of

Columbia, in compliance with DCMR 3709.1 and 3709.2?

		QUESTIONNAIRE (continued)
_	Has the company	changed its auditors or actuaries from the previous year?
	YES	✓ NO
	If yes, why?	
	Does the company Columbia for the p	y have funds on deposit with the Insurance Commissioner of the District of protection of policyholders (Not letters of credit)?
	YES	✓ NO
	Does the company	y issue assessable policies?
-		s which have received permission to file using fiscal years other than the calende fiscal year end after the election was granted. 09
	List the company's	top five service providers and their function(s)?
	Provider	RCM&D
	Function(s)	Insurance broker
	Provider	RCM&D
	Function(s)	Captive manager
	Provider	IRMS
	Function(s)	Actuarial services and loss certification
	Provider	
	Function(s)	
	Provider	
	Function(s)	
	Has the company e reinsurance contract	entered into any retroactive reinsurance or financial insurance or financial cts?
		
	L YES	☑ NO
<u></u>	· · ·	arrangement including amounts received, paid, imputed interest, and companies
i i	If yes, describe the involved	
	If yes, describe the involved	
	If yes, describe the involved	
y i	If yes, describe the involved	
y i	If yes, describe the involved	
y i	If yes, describe the involved	

September 30, 2019
District of Columbia Captive Insurance Agency

PREMIUM SCHEDULE								
LINES OF BUSINESS	(1) (2) DIRECT BUSINESS REINSURANCE ASSUMED		JRANCE	(3) *PREMIUMS ACCT'D FOR BY DEPOSIT	REINSURANCE	(5) REINSURANCE ACCT'D FOR BY DEPOSIT	(6) NET PREMIUMS WRITTEN	
	Affiliated	Unaffiliated	Affiliated	Unaffiliated			METHOD	1+2-3-4+5
Automobile Liability General & Product Liability								
Professional Liability Other Liability	73,029				~~~~~~			73,029
5. Workers' Compensation 6. Property Liability								AND THE RESIDENCE OF THE PARTY
7. All Other Lines								
Describe below the other lines of business included in line 7:								
					BARRIER MALLO MARTINI DE LA TITA I I PARTICIPA		***************************************	

TOTAL	73,029							73,029
OTAL	73,029				(p.2, line 16)	-		(p.3, line 1)

^{*}This column is designated for direct and assumed premiums accounted for as deposits where there is inadequate risk transfer

September 30, 2019
District of Columbia Captive Insurance Agency

v			Captive Insurance	Agency		
	, , , , , , , , , , , , , , , , , , ,	EINOUPON		I) JRANCE	(2)	(3)
NAME AND STATE OF CEDING INSURER			PAYABLE	ON PAID OSSESALAE	PREMIUM ASSUMED	UNEARNED PREMIUMS
			PAID LOSSES	UNPAID LOSSES & LAE		
AFFILIATES:			P27.2750.00000000000000000000000000000000			
NAME	NAIC #	STATE				
					Suicini	
		-				
	-	-				
		1				
		-				
NON-AFFILIATES:		- TO 19				****
NAME	NAIC #	STATE	Wile::			
					AND DESCRIPTION OF THE PARTY.	
		\perp				
		-				
OTAL		- 1	l			

(p.5,col.2)

		REINSURA	ANCE CEDED			
VAME AND STATE OF REINSURER		RECEIVABL	IRANCE LE ON PAID DSSESALAE	(5) PREMIUM CEDED	(6) UNEARNED PREMIUMS	
			PAID LOSSES	UNPAID LOSSES & LAE		
AFFILIATES:						
NAME	NAIC #	STATE				
NON-AFFILIATES; NAME	NAIC#	STATE				
TWA WE	NAIC #	BIAIC				
DTAL						

⁽p.2, line 12+13) *Authorized companies or unauthorized companies with the Commissioner's prior approval.

(p.5, col 4-5)

p.7

	UNPAI	D LOSSES	30-	4.4		
<u>Lines of Business</u>	CASE BASIS DIRECT & ASSUMED	CASE BASIS REINSURANCE RECOVERABLE	(3) IBNR	(4) IBNR REINSURANCE RECOVERABLE	(5) DISCOUNT	(6) NET LOSSES UNPAID 1-2+3-4-5
1, Automobile Liability						
2 General & Product Liability						
3. Professional Liability			578,827	***************************************		578,827
4. Other Liability						
5. Workers' Compensation						
6 Property Liability						
7. All Other Lines						200
TOTALS			578,827			578,827

	UNPAID LAE				(e) (b)	
(7) CASE BASIS DIRECT & ASSUMED	(8) CASE BASIS REINSURANCE RECOVERABLE	(9) IBNR	(10) IBNR REINSURANCE RECOVERABLE	(11) DISCOUNT	(12) <u>NET LAE</u> <u>UNPAID</u> 7-8+9-10-11	(13) LOSS TO LAE DISCOUNT % 10 ÷ 5
						MONTH OF FEMALE ROSE CONTRACTOR CONTRACTOR
			1			
				_		
	CASE BASIS DIRECT & ASSUMED	(7) CASE BASIS DIRECT & REINSURANCE	(7) CASE BASIS DIRECT & REINSURANCE ASSUMED RECOVERABLE (9) RECOVERABLE	(7) CASE BASIS DIRECT & REINSURANCE ASSUMED RECOVERABLE (8) REINSURANCE RECOVERABLE (9) REINSURANCE RECOVERABLE	CASE BASIS DIRECT & REINSURANCE RECOVERABLE RECOVERABLE (10) IBNR REINSURANCE RECOVERABLE (111) RECOVERABLE	(7) CASE BASIS DIRECT & REINSURANCE ASSUMED (8) REINSURANCE RECOVERABLE (9) REINSURANCE RECOVERABLE (11) NET LAE UNPAID 7-8+9-10-11

District of	Columbia	Cantive	Insurance	Agency

		LOSS & L	AE PAID AND INC	CURRED	F* 5	100		
	N. Charles	I am like	LOSSES				The same of	A COLUMN TO SERVICE
		LOSSES PAII	LESS SALVAGE		(5)	(6)	(7)	(8)
<u>Lines of Business</u>	DIRECT BUSINESS	(2) REINSURANCE ASSUMED	(3) REINSURANCE RECOVERED	(4) NET PAYMENTS 1+2-3		NET LOSSES N	INCURRED	
1. Automobile Liability								#DIV/0
2. General & Product Liability	II							#DIV/0
3. Professional Liability				-	578.827	687,117	(108,290)	
4. Other Liability	i i						-	#DIV/0
5. Workers' Compensation								#D(V/0
6 Property Liability								#DIV/0
7, All Other Lines							-	#DIV/0
TOTALS					578,827 (p.7, col.6)	687,117	(108,290)	-148.28%

		LOSSES PAI	D LESS SALVAG		(13)	(14)	(15)	(16)
<u>Lines of Business</u>	(9) <u>DIRECT</u> BUSINESS	(10) REINSURANCE ASSUMED	(11) REINSURANCE RECOVERED	(12) NET PAYMENTS 9+10-11	NET LAE UNPAID CURRENT YEAR	NET LAE UNPAID	NET LAE INCURRED 4+5-6	RATIO OF LAE INCURRED TO PREMIUMS EARNED
1. Automobile Liability								#DIV/0
2. General & Product Liability								#DIV/0
3. Professional Liability								
4. Other Liability				-	8			#DIV/0
5 Workers' Compensation				-				#DIV/0
5. Property Liability				-			-	#DIV/
7. All Other Lines							-	#DIV/0

(p.7, col.12) (p.3, line 7)

District of Columbia Ca	ptive Insurance	Agency
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	NET LOSSES &	LAE SUMMARY OF	ALL LINES OF BL	SINESS	
YEARS IN	PAID LOSS	ES AND LOSS AD	JUSTMENT EXPEN	SES AT END OF	EAR
WHICH LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019
2015 & PRIOR	621,319	621,319	621,319	621,319	621,319
2016	\sim	-	-		-
2017					
2018					
2019					

YEARS IN	OUTSTANDING LOSSES AND LOSS ADJUSTMENT EXPENSE AT END OF YEAR							
WHICH LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019			
2015 & PRIOR		-			w.			
2016	\sim							
2017		\sim		-				
2018		$>\!\!<$						
2016 2017 2018 2019		\gg			-			

YEARS IN	IBNR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR								
WHICH LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019				
2015 & PRIOR	818,681	671,181	394,163	279,755	190,913				
2016		125,000	155,913	124,754	85,538				
2016 2017		\sim	186,115	137,500	120,338				
2018				145,108	123,722				
2019					58,316				

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	AUT	TOMOBILE LIABILIT	Y NET LOSSES &	LAE	
YEAR IN WHICH	PAID LO	OSSES AND LOSS	ADJUSTMENT EXP	ENSES AT END OF	TERR
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019
2015 & PRIOR					
2016	\sim				
2017	\sim	\sim	10		
2018	> <				
2019					

YEAR IN WHICH	OUTSTANDING LOSSES AND LOSS ADJUSTMENT EXPENSE AT END OF YEAR							
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019			
2015 & PRIOR								
2016	>							
2017								
2018	> <	-200						
2019	\sim							

YEAR IN WHICH LOSSES WERE INCURRED	IGNR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR						
	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016	> <						
2017	><	\sim					
2018	\sim	\sim	\sim				
2019	><						

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YEAR IN WHICH	24	UD LOSSES AND LO	ISS ADJUSTMENT EX	PENSES AT END OF YE	AR
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019
2015 & PRIOR					
2016					
2017	\sim	\sim			
2018		\sim			
2019					

YEAR IN WHICH LOSSES WERE INCURRED	OUTSTANDING LOSSES AND LOSS ADJUSTMENT EXPENSE AT END OF YEAR						
	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016	\bigvee						
2017	\sim	\sim					
2018	\sim	\sim					
2019							

YEAR IN WHICH	IBNR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR						
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016	\sim						
2016 2017	\bigvee						
2018 2019	\sim						
2019							

District of	Columbia	Captive	Insurance	Agency

Carrie and Charles	PROFESSI	ONAL LIABILITY	ET LOSSES AND	LAE	1 Harris - 1/2		
YEAR IN WHICH	PAID LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR						
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR	621,319	621,319	621,319	621,319	621,319		
2016							
2017							
2018			\sim				
2019							

YEAR IN WHICH LOSSES WERE INCURRED	OUTSTANDING LOSSES AND LOSS ADJUSTMENT EXPENSE AT END OF YEAR						
	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016	\sim						
2017	\sim						
2018 2019	$>\!<$		\sim				
2019							

YEAR IN WHICH	IMMR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR						
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017 2018	2019			
2015 & PRIOR	818,681	671,181	394,163	279,755	190,913		
2016		125,000	155,913	124,754	85,538		
2017		\sim	186 115	137,500	120,338		
2018				145,108	123,722		
2019				><	58,316		

District of Columbia Captive Insurance Agency

	INSERT NAME O	OF ADDITIONAL LA	NE HERE NET LOS	SSES AND LAE		
YEAR IN WHICH	PAID LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR					
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019	
2015 & PRIOR						
2016	\sim					
2017	$>\!<$	\wedge				
2018	> <		\sim			
2019						

YEAR IN WHICH	OUTSTANDING LOSSES AND LOSS ADJUSTMENT EXPENSE AT END OF YEAR						
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016	$>\!\!<$						
2017	$>\!<$	\sim					
2018	> <	\sim					
2019							

YEAR IN WHICH	IBNR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR					
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019	
2015 & PRIOR						
2016	> <					
2017					and the second s	
2018	\sim	\sim	\sim			
2019	\sim					

m				_
District o	f Columbia	Captive	Insurance	Agency

	INSERT NAME	OF ADDITIONAL LI	ME HERE NET LOS	SSES AND LAE	100
YEAR IN WHICH	PAID L	OSSES AND LOSS	ADJUSTMENT EX	PENSES AT END O	FYEAR
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019
2015 & PRIOR					
2016	$>\!<$				
2017	> <				
2018	> <				The Colonial Control Constitution and the Colonial Coloni
2019					

YEAR IN WHICH LOSSES WERE INCURRED	OUTSTANDING LOSSES AND LOSS ADJUSTMENT EXPENSE AT END OF YEAR						
	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016	$>\!<$						
2017	$>\!<$						
2018							
2019							

YEAR IN WHICH LOSSES WERE INCURRED	IBNR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR							
	2015 & PRIOR	2016	2017	2018	2019			
2015 & PRIOR								
2016	> <							
2017	> <	\sim						
2018	> <							
2019								

OD ENDED: September 30, 2019
District of Columbia Captive Insurance Agency

	HOUSE NAME OF	THE RESERVE TO BE STORY OF THE PARTY OF THE	EHERE- NET LO	CONTRACTOR OF THE PARTY OF	
YEAR IN WHICH	PAID L	OSSES AND LOSS	ADJUSTMENT EX	PENSES AT END	OF YEAR
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019
2015 & PRIOR					
2016	$>\!\!<$				
2017	$>\!\!<$				
2018	$>\!<$				
2019	> <	\sim			

YEAR IN WHICH	OUTSTANDING LOSSES AND LOSS ADJUSTMENT EXPENSE AT END OF YEAR						
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016	$>\!<$						
2017	> <						
2018							
2019							

YEAR IN WHICH	IBNR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR						
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016	> <						
2017	> <						
2018	> <	\sim	\sim				
2019							

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September 30, 2019

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District	of	Columbia	Captive	Insurance	Agency

	HEER? NAME O	FADOITIONAL LIN	MET LO	SSES AND LAE	
YEAR IN WHICH	PAID L	OSSES AND LOSS	ADJUSTMENT E	XPENSES AT END	OF YEAR
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019
2015 & PRIOR					
2016	> <				
2017	> <				
2018	> <	\sim	\sim		
2019	> <		\sim		

YEAR IN WHICH	OUTSTANDING LOSSES AND LOSS ADJUSTMENT EXPENSE AT END OF YEAR							
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019			
2015 & PRIOR								
2016	$>\!<$							
2017	$>\!<$	\sim						
2018	$>\!<$							
2019	><							

YEAR IN WHICH	IBNR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR						
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019		
2015 & PRIOR							
2016							
2017							
2018	> <						
2019	><						

District of	Columbia	Cantivo	Insurance	Agancy

	Distri	ct of Columbia Cap	tive insurance A	gency	
	THREST HAME O	FADOITIONAL LIN	HIRE- NET L	OSSES AND LAE	
YEAR IN WHICH	PAID L	OSSES AND LOSS	ADJUSTMENT E	XPENSES AT END O	F YEAR
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019
2015 & PRIOR					
2016 2017	><				
2017	> <				
2018	> <		\bigvee		
2019	> <		\sim		

YEAR IN WHICH	OUTSTAND	ING LOSSES AND	LOSS ADJUSTME	NT EXPENSE AT EN	ID OF YEAR
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019
2015 & PRIOR					
2016	$>\!\!<$				
2017	\sim				
2018	> <				
2019	> <				

YEAR IN WHICH	BNR LOSSES AND LOSS ADJUSTMENT EXPENSES AT END OF YEAR									
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019					
2015 & PRIOR										
2016	> <									
2017	$>\!<$	\sim								
2018 2019	> <		\sim							
2019				\sim						

		GRODEL BLOOD	1 TO 1 TO 1		Y OF ALL LINES		S		
YEAR IN WHICH	NET INCUR	RED LOSSES ANI	LAE EXPENSE	REPORTED AT E	LOSS		(3)	(4)	
LOSSES WERE INCURRED	2016 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	%CURRENT YEAR LOSSES INCURRED TO PREMIUM EARNED
2015 & PRIOR	2,650,499	671,181	394,163	279,755	190,913	(88,842)	(203,250)	728,460	363.85%
2016		125,000	155,913	124,754	85,538	(39,216)	(70,375)	67,100	186.29%
2017	><		186,115	137,500	120,338	(17,162)	(65,777)	75,460	246.64%
2018	$>\!<$			145,108	123,722	(21,386)		73,903	196.35%
2019	><			\sim	58,316			73,029	79.85%
					Totals	(166,606)	(339,402)		

^{*} For instruction reference refer to Sched. P Part-2 Summary of the NAIC Annual Statement Instructions

September 30, 2019

District of Columbia Captive Insurance Agency

Kes	i y	ARANA DE	AUT	MOBILE LIABILI	TY LOSS DEVELO	PMENT			
YEAR IN WHICH	NET INCUR	RED LOSSES AN	ID LOSS EXPENS	E REPORTED AT	*Loss Development		(3)	(4)	
LOSSES WERE INCURRED	2015 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	%CURRENT YEAR LOSSES INCURRED TO PREMIUM EARNED
2015 & PRIOR						-	-		
2016	O construction of the cons						-		
2017 2018 2019			\gg	>					
					Totals	E .	-		4

^{*} For instruction reference refer to Sched. P Part-2 Summary of the NAIC Annual Statement Instructions

			Dis	trict or columb	ia Captive ilisur	ance Agenc	<u>y</u>		
-			GENERA	LA PRODUCT	LIABILITY LOS	DEVELOP	MENT		e de la companya della companya della companya de la companya della companya dell
YEAR IN WHICH LOSSES WERE INCURRED	NET INCURRED	LOSSES AND I	OSS EXPENSE	REPORTED AT	*Loss Development		(3) NET	(4) %CURRENT YEAR	
	2016 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	LOSSES INCURRED TO PREMIUM EARNED
2015 & PRIOR 2016 2017	≥ ≪	><					-		
2018 2019	$\gg \lesssim$	$\gg \lesssim$	$\gg \lesssim$	><	Totals				

^{*} For instruction reference refer to Sched. P Part-2 Summary of the NAIC Annual Statement Instructions

			PROFESSION.	AL LIABILITY LOS	S DEVELOPME	ENT			
YEAR IN WHICH LOSSES WERE	NET INCURRE	D LOSSES AND L	(3) NET	(4) %CURRENT YEAR					
INCURRED	2015 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	LOSSES INCURRE TO PREMIUM EARNED
2015 & PRIOR	2,650,499	671,181	394,163	279,755	190,913	(88,842)	(203,250)	728,460	363.85%
2016	> <	125,000	155,913	124,754	85,538	(39,216)	(70,375)	67,100	186.29%
2017	\sim	$>\!\!<$	186,115	137,500	120,338	(17,162)	(65,777)	75,460	246.64%
2018			><	145,108	123,722	(21,386)		73,903	196.35%
2019	\sim			\sim	58,316			73,029	79.85%

^{*} For instruction reference refer to Sched P Part-2 Summary of the NAIC Annual Statement Instructions

ANNUAL STATEMENT FO	R THE PERIOD ENDI			Columbia Captive		ency EVELOPMEN		up SK	p.10e
YEAR IN WHICH LOSSES WERE	NET INCURR	RED LOSSES AND	LOSS EXPENSE	REPORTED AT E	ND OF YEAR	*Loss Dev	relopment	(3) NET	(4) %CURRENT YEAR
INCURRED	2015 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	TO PREMIUM EARNED
015 & PRIOR									
2017 2018 2019		\gg	>	<u></u>		+			
2019					Totals				

^{*} For instruction reference refer to Sched. P Part-2 Summary of the NAIC Annual Statement Instructions

		195	Name and Address of the Owner, where	Columbia Captive		VELOPMEN'		15 m	The second
YEAR IN WHICH LOSSES WERE	NET INCURR	RED LOSSES AND	LOSS EXPENSE	REPORTED AT E	ND OF YEAR	*Loss Des	velopment	(3) NET	(4) %CURRENT YEAR
INCURRED	2015 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	TO PREMIUM EARNED
015 & PRIOR 016									
017 018	\approx	\approx							
019	$\leq \leq$		$\leq <$	><	Totals				

^{*} For instruction reference refer to Sched. P Part-2 Summary of the NAIC Annual Statement Instructions

District	of	Columbia	Captive	Insurance	Agency
-1011101	~ .	OUIGIII	oupero	mounding	rigonoy

			BERT NAME OF A	DOMONAL LINE	HEILE LOSS DE	VELOPMEN	T		
YEAR IN WHICH LOSSES WERE INCURRED	NET INCURR	RED LOSSES AND	LOSS EXPENSE	*Loss Development		(3) NET	(4) %CURRENT YEAR		
	2015 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	LOSSES INCURRED TO PREMIUM EARNED
2015 & PRIOR							- 3		
2016 2017	>						- 3		
2018			>		CONCRETE MATERIAL CONTRACTOR OF THE PARTY OF				
2019	\sim				Totals	-	-		

^{*}For instruction reference refer to Sched, P Part-2 Summary of the NAIC Annual Statement Instructions

		ned	SERT NAME OF A	DOTTONAL LINE	LOSS DE	VELOPMEN	Т		
YEAR IN WHICH LOSSES WERE	NET INCURR	NET INCURRED LOSSES AND LOSS EXPENSE REPORTED AT END OF YEAR						(3) NET	%CURRENT YEAR
INCURRED	2015 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	LOSSES INCURREI TO PREMIUM EARNED
17	> >	><							
015 & PRIOR 016 017 018 019			//						

^{*} For instruction reference refer to Sched. P Part-2 Summary of the NAIC Annual Statement Instructions

150 4 20 (THE RESERVE TO SERVE THE PARTY OF THE PARTY	DOITIONAL LINE	MARKET CONTRACTOR	VELOPMEN	r	THE REST	
YEAR IN WHICH LOSSES WERE INCURRED	NET INCUR	RED LOSSES AND	LOSS EXPENSE	*Loss Development		(3) NET	(4) %CURRENT YEAR		
	2015 & PRIOR	2016	2017	2018	2019	(1) 1 YEAR	(2) 2 YEAR	PREMIUMS EARNED	LOSSES INCURRED TO PREMIUM EARNED
2015 & PRIOR 2016									
2017 2018 2019		\gg	>>>				•		
				1172	Totals	- 4	- 1		

^{*} For instruction reference refer to Sched, P Part-2 Summary of the NAIC Annual Statement Instructions

September 30, 2019
District of Columbia Captive Insurance Agency

District of Columbia Captive Insurance Agency INVESTMENT SCHEDULE									
Cash & Money Market Accts:		 	1	1		┪		†	1
Fund Balance from Operations		District of Columbia fund apportionment	N/A	\$	1,322,800	\$	1,322,800	N/A	N/A
Appropriated Capital Fund		District of Columbia fund apportionment	N/A	\$	1,405,072	\$	1,405,072	N/A	N/A
Bonds & Other Securities:									

^{*} Include cash bank accounts. All investments included in lines 1-5 of the Company's balance sheet shall be individually listed in this schedule. The total of this schedule shall correspond to line 6 of the Company's balance sheet.

Cross Check							
1 (p.2, line 19 Assets) - (p.2, line 38, Liab, Capital & Surplus)							
2 (p.2, line 19 Assets Prior Year) - (p.2, line 38, Liab. Capital & Surplus Prior Year)	/ /						
3 (p.2, line 20 Losses) = (p.7,C1+C3 Direct Loss and IBNR)	*****						
4 (p.2, line 21 LAE) = (p.7,C6+C8 Direct LAE & IBNR)	10 m						
5 (p.2, line 12 Reins. Recoverable) = (p.7,C2+C4+C7+C10 Reins Recoverable)	***						
6 (p.2, line 12 Reins. Recov unpaid) = (p.6 Recov unpaid)	-						
7 (p.2, line 13 Reins Recov pd) = (p.6 Recov Pd)	in the second						
8 (p.2, line 15 Prepaid reins prem) = (p.6 Prepaid Reinsurance)	n.//						
9 (p.2, line 37 Capital & Surplus) = (p.3, line 27 Capital & Surplus current)	0						
10 (p.2,line 37 Capital & Surplus Prior Year) = (p.3, line 27 Capital & Surplus Prior Year)							
11 (p.2, line 37 Capital & Surplus Prior Year) = (p.3, line 20 Capital & Surplus Prior Year)							
12 (p.2,line 26 U/P) = (p.2,line 26,C2 - p.3,line 2,C1 + p.2, line 15,C1 - p.2, line 15,C2)							
13 (p.3, line 1 Net Premiums Written) = (p.5,C6 Net Premiums Written)	and the second						
14 (p.3, line 6 Net losses incurred) = (p.8,C7 Net Losses Incurred)							
15 (p.3, line 7 Net LAE incurred) = (p. 8,C15 Net LAE incurred)	3 20						
16 (p.3, line 19 Net Income) = (p.3, line 21 Net Income current)	-						
17 (p.3, line 19,C2 Net Income prior year) = (p.3,line 21, C2 net income prior year)							
18 (p.3,line 20,C1 C&S prior year) = (p.3, line 27,C2 C&S prior year)	247						
19 (p.6 Reinsurance Recoverable unpaid loss & lae) = (p.7,C2+C4+C8+C10)	-						
20 (p.6,C5 Premium Ceded) = (p.5,C4 Premium ceded)	M + 12 - 2 - 2 - 4						
21 (p.5,C2 Reinsurance Assumed) = (p.6, C2 Premium Assumed) 22 (p.7,line1,C1-C2+C7-C8 Auto liability) = (p.9b Outstanding loss current yr)							
23 (p.7,line1,C3-C4+C9-C10 Auto liability) = (p.9b lBNR loss and lae current yr)							
24 (p.7,line1,C6 Auto liability) = (p.8,line1,C5 Net losses unpaid)							
25 (p.7,line1,C12 Auto liability) = (p.8,line1,C13 Net LAE unpaid)							
26 (p.7,line 2,C1-C2+C7-C8 General & Product Liab) = (p.9c Outstanding loss & lae current yr)	7.						
27 (p.7,line2,C3-C4+C9-C10 Gen & Product Liab) = (p.9c IBNR loss & lae current yr)							
28 (p.7,line2,C6 Gen & Product Liab) = (p.8,line2,C5 Net losses unpaid)							
29 (p.7,line2,C12 Gen & Product Liab) = (p.8,line2,C13 Net lae unpaid)	7						
30 (p.7,line3,C1-C2+C7-C8 Professional liab) = (p.9d Outstanding loss & lae current yr)							
31 (p.7,line3,C3-C4+C9-C10 Professional liab) = (p.9d IBNR loss & lae current yr)							
32 (p.7,line3,C6 Professional liab) = (p.8,line3,C5 Net losses unpaid)							
33 (p.7,line3,C12 Professional liab) = (p.8,line3,C13 Net lae unpaid)							
34 (p.7,line4,C6 Other Liability) = (p.8,line4,C5 Net losses unpaid)							
35 (p.7,line4,C12 Other Liability) = (p.8,line4,C13 Net lae unpaid)							
36 (p.7,line5,C6 Workers' Comp) = (p.8,line5,C5 Net losses unpaid)							
37 (p.7,line5,C12 Workers' Comp) = (p.8,line5,C13 Net lae unpaid)							
38 (p.7,line6,C6 Property Liability) = (p.8,line6,C5 Net losses unpaid)							
39 (p.7,line6,C12 Property Liability) = (p.8,line6,C13 Net lae unpaid)	*** **** ****						
40 (p.7,line7,C6 All Other Lines) = (p.8,line7,C5 Net losses unpaid)							
41 (p.7,line7,C12 All Other Lines) = (p.8,line7,C13 Net lae unpaid)	11/2						
42 (p.7,line4,5,6,7,C1-C2+C7-C8 Addtl Lines)=(p9e,9f,9g,9h,9i Outstnding loss&lae current yr)	* - *·-*5 -						
43 (p.7,line4,5,6,7,C3-C4+C9-C10 Addtl Lines)=(p9e,9f,9g,9h,9i IBNR loss & lae current yr)	Notes -						
44 (p.10a,C3 Net Premium Earned) = (p.3,line3,C1 Premiums Earned current)	(0)						
45 (p.10a,C3 Net Premium Earned) = (p.3,line3,C2 Premiums Earned prior year)	7						