

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....			.0	
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			.0	
2.2 Common stocks.....			.0	
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			.0	
3.2 Other than first liens.....			.0	
4. Real estate (Schedule A):				
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, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....0, Schedule DA).....			.0	170,551
6. Contract loans (including \$.....0 premium notes).....			.0	
7. Derivatives (Schedule DB).....			.0	
8. Other invested assets (Schedule BA).....			.0	
9. Receivables for securities.....			.0	
10. Securities lending reinvested collateral assets (Schedule DL).....			.0	
11. Aggregate write-ins for invested assets.....	600,000	0	600,000	600,000
12. Subtotals, cash and invested assets (Lines 1 to 11).....	600,000	0	600,000	770,551
13. Title plants less \$.....0 charged off (for Title insurers only).....			.0	
14. Investment income due and accrued.....			.0	
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	
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 to 25).....	600,000	0	600,000	770,551
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0	
28. TOTALS (Lines 26 and 27).....	600,000	0	600,000	770,551

DETAILS OF WRITE-INS

1101. STATUTORY DEPOSIT OF PR COMMISSIONER OF INSURANCE.....	600,000		600,000	600,000
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).....	600,000	0	600,000	600,000
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 capital gains (losses)).....			0	
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.....	8,124		8,124	
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 and \$.....0 certified 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).....	600,000	0	600,000	600,000
24. Total liabilities (Lines 1 to 23).....	608,124	0	608,124	600,000
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	305,000	305,000
27. Preferred capital stock.....	XXX	XXX		
28. Gross paid in and contributed surplus.....	XXX	XXX	295,000	302,638
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	(608,124)	(437,087)
32. Less treasury stock at cost:				
32.1 .....0.000 shares common (value included in Line 26 \$.....0).....	XXX	XXX		
32.2 .....0.000 shares preferred (value included in Line 27 \$.....0).....	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	(8,124)	170,551
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	600,000	770,551

DETAILS OF WRITE-INS

2301. SATTUTORY DEPOSIT.....	600,000		600,000	600,000
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).....	600,000	0	600,000	600,000
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 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
7. Aggregate write-ins for other non-health revenues.....	XXX	.0	.0
8. Total revenues (Lines 2 to 7).....	XXX	.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
15. Incentive pool, withhold adjustments and bonus amounts.....			
16. Subtotal (Lines 9 to 15).....	.0	.0	.0
Less:			
17. Net reinsurance recoveries.....			
18. Total hospital and medical (Lines 16 minus 17).....	.0	.0	.0
19. Non-health claims (net).....			
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....			
21. General administrative expenses.....		8,124	130,801
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	8,124	130,801
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX	(8,124)	(130,801)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17).....			8,992
26. Net realized capital gains or (losses) less capital gains tax of \$.....0.....			
27. Net investment gains or (losses) (Lines 25 plus 26).....	.0	.0	8,992
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
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	(8,124)	(121,809)
31. Federal and foreign income taxes incurred.....	XXX		
32. Net income (loss) (Lines 30 minus 31).....	XXX	(8,124)	(121,809)

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

STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1 Current Year	2 Prior Year
33. Capital and surplus prior reporting period.....	170,552	292,361
34. Net income or (loss) from Line 32.....	(8,124)	(121,809)
35. Change in valuation basis of aggregate policy and claim reserves.....		
36. Change in net unrealized capital gains and (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.....		
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.....	(170,552)	0
48. Net change in capital and surplus (Lines 34 to 47).....	(178,676)	(121,809)
49. Capital and surplus end of reporting period (Line 33 plus 48).....	(8,124)	170,552

DETAILS OF WRITE-INS

4701. Other Surplus ADJ.....	(170,552)	
4702.		
4703.		
4798. Summary of remaining write-ins for Line 47 from overflow page.....	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above).....	(170,552)	0

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....		
2. Net investment income.....		
3. Miscellaneous income.....		
4. Total (Lines 1 through 3).....	.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
11. Net cash from operations (Line 4 minus Line 10).....	.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
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....		
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).....	.0	.0
14. Net increase (decrease) in contract loans and premium notes.....		
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	.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.....		
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).....		
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	.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).....	.0	.0
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	170,551	170,551
19.2 End of year (Line 18 plus Line 19.1).....	170,551	170,551

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

20.0001		
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**U & I Ex.-Pt.1
NONE**

**U & I Ex.-Pt.2
NONE**

**U & I Ex.-Pt.2A
NONE**

**U & I Ex.-Pt.2B
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Grand Total
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Grand Total
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Grand Total
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Hospital & Medical
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Hospital & Medical
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Hospital & Medical
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Medicare Supp.
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Medicare Supp.
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Medicare Supp.
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Dental
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Dental
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Dental
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Vision
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Vision
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Vision
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Fed Emp Health
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Fed Emp Health
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Fed Emp Health
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Medicare
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Medicare
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Medicare
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Medicaid
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Medicaid
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Medicaid
NONE**

**U & I Ex.-Pt.2C-Sn A-Paid Claims-Other
NONE**

**U & I Ex.-Pt.2C-Sn B-Incurred Claims-Other
NONE**

**U & I Ex.-Pt.2C-Sn C-Expense Ratio-Other
NONE**

**U & I Ex.-Pt.2D
NONE**

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$.....0 for occupancy of own building).....					.0
2. Salaries, wages and other benefits.....					.0
3. Commissions (less \$.....0 ceded plus \$.....0 assumed).....					.0
4. Legal fees and expenses.....					.0
5. Certifications and accreditation fees.....					.0
6. Auditing, actuarial and other consulting services.....					.0
7. Traveling expenses.....					.0
8. Marketing and advertising.....					.0
9. Postage, express and telephone.....					.0
10. Printing and office supplies.....					.0
11. Occupancy, depreciation and amortization.....					.0
12. Equipment.....					.0
13. Cost or depreciation of EDP equipment and software.....					.0
14. Outsourced services including EDP, claims, and other services.....					.0
15. Boards, bureaus and association fees.....					.0
16. Insurance, except on real estate.....					.0
17. Collection and bank service charges.....					.0
18. Group service and administration fees.....					.0
19. Reimbursements by uninsured plans.....					.0
20. Reimbursements from fiscal intermediaries.....					.0
21. Real estate expenses.....					.0
22. Real estate taxes.....					.0
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes.....					.0
23.2 State premium taxes.....					.0
23.3 Regulatory authority licenses and fees.....					.0
23.4 Payroll taxes.....					.0
23.5 Other (excluding federal income and real estate taxes).....					.0
24. Investment expenses not included elsewhere.....					.0
25. Aggregate write-ins for expenses.....	0	0	8,124	0	8,124
26. Total expenses incurred (Lines 1 to 25).....	0	0	8,124	0	(a) 8,124
27. Less expenses unpaid December 31, current year.....					.0
28. Add expenses unpaid December 31, prior year.....					.0
29. Amounts receivable relating to uninsured plans, prior year.....					.0
30. Amounts receivable relating to uninsured plans, current year.....					.0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).....	0	0	8,124	0	8,124

DETAILS OF WRITE-INS

2501. Miscellaneous expense.....			8,124		8,124
2502. ....					.0
2503. ....					.0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0	.0
2599. TOTALS (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	8,124	0	8,124

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

Ex. of Net Investment Income
NONE

Ex. of Capital Gains (Losses)
NONE

Ex. of Nonadmitted Assets
NONE

Ex. 1
NONE

Notes to Financial Statements
NONE

General Interrogatories-Part 1-General
NONE

General Interrogatories-Part 1-Board of Directors
NONE

General Interrogatories-Part 1-Financial
NONE

General Interrogatories-Part 1-Investment
NONE

General Interrogatories-Part 1-Other
NONE

General Interrogatories-Part 2
NONE

FIVE-YEAR HISTORICAL DATA

	1 2012	2 2011	3 2010	4 2009	5 2008
Balance Sheet Items (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28).....	600,000	770,551			
2. Total liabilities (Page 3, Line 24).....	608,124	600,000			
3. Statutory surplus.....					
4. Total capital and surplus (Page 3, Line 33).....	(8,124)	170,551			
Income Statement Items (Page 4)					
5. Total revenues (Line 8).....					
6. Total medical and hospital expenses (Line 18).....					
7. Claims adjustment expenses (Line 20).....					
8. Total administrative expenses (Line 21).....	8,124	130,801			
9. Net underwriting gain (loss) (Line 24).....	(8,124)	(130,801)			
10. Net investment gain (loss) (Line 27).....		8,992			
11. Total other income (Lines 28 plus 29).....					
12. Net income or (loss) (Line 32).....	(8,124)	(121,809)			
Cash Flow (Page 6)					
13. Net cash from operations (Line 11).....		(121,809)			
Risk-Based Capital Analysis					
14. Total adjusted capital.....	(8,124)	170,551			
15. Authorized control level risk-based capital.....	15,000	15,256			
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7).....					
17. Total member months (Column 6, Line 7).....					
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3, and 5) x 100 .0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5).....	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Line 18 plus Line 19).....					
20. Cost containment expenses.....					
21. Other claims adjustment expenses.....					
22. Total underwriting deductions (Line 23).....					
23. Total underwriting gain (loss) (Line 24).....					
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13 Col. 5).....					
25. Estimated liability of unpaid claims - [prior year (Line 13, Col. 6)]					
Investments in Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1).....					
27. Affiliated preferred stocks (Sch D. Summary, Line 18, Col. 1).....					
28. Affiliated common stocks (Sch D. Summary, Line 24, Col. 1).....					
29. Affiliated short-term investments (subtotal included in Sch. DA, Verification, Column 5, Line 10).....					
30. Affiliated mortgage loans on real estate.....					
31. All other affiliated.....					
32. Total of above Lines 26 to 31.....	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above.....					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

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

NONE

DETAILS OF WRITE-INS

58001.....									.0
58002.....									.0
58003.....									.0
58998. Summary of remaining write-ins for line 58.....		.0	.0	.0	.0	.0	.0	.0	.0
58999. Total (Lines 58001 thru 58003 + 58998).....		.0	.0	.0	.0	.0	.0	.0	.0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer; (E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

Explanation of basis of allocation by states, premiums by state, etc.

(a) Insert the number of L responses except for Canada and Other Alien.

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

PART 1 – ORGANIZATIONAL CHART

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