

## Record Layout

2022 Data in 2022 PC Format - Product Code IP

File Name: X2022087

SCHEDULE NAME: GENERAL INTERROGATORIES - PART 1 - GENERAL

PAGE NUMBER: 027

COLUMN NUMBER	COLUMN NAME	FORMAT	LENGTH
1	COCODE	NUMERIC	5
2	LINE_NO	ALPHA	10
3	YES_NO_RESPONSE	ALPHA	3
4	NUMERIC_RESPONSE	NUMERIC	14
5	PCT	NUMERIC	13.3
6	DTE_RESPONSE	ALPHA	11
7	NM_OF_ENTITY	ALPHA	50
8	NAIC_COMPANY_CODE	NUMERIC	10
9	ST_OF_DOMICILE	ALPHA	2
10	NATIONALITY	ALPHA	40
11	TYPE_OF_ENTITY	ALPHA	40
12	AFFILIATE_NM	ALPHA	50
13	LOCATION_CITY_ST	ALPHA	50
14	FRB	ALPHA	3
15	OCC	ALPHA	3
16	FDIC	ALPHA	3
17	SEC	ALPHA	3
18	AMERICAN_BANKERS_ASSOCIATION_A	NUMERIC	9
19	ISSUING_OR_CONFIRMING_BANK_NM	ALPHA	40
20	CIRCUMSTANCES_THAT_CAN_TRIGGER	ALPHA	300
21	AMT	NUMERIC	14
22	EXPLANATION	ALPHA	300
23	CIK	ALPHA	10

The following column/row intersections either do not exist or do not have values on the Annual Statement.

COLUMN	LINE NUMBER
YES_NO_RESPONSE	01.3 01.5 02.2 03.1 03.2 03.3 03.4 05.2001 06.2 07.21 07.2201 08.2 08.4001 09 10.2 10.4 10.6 11 12.11 12.12 12.13 12.2 13.1 14.11 14.21 14.31 15.2001
NUMERIC_RESPONSE	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
PCT	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
DTE_RESPONSE	01.1 01.2 01.3 01.4 01.5 02.1 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001

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NM_OF_ENTITY	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
NAIC_COMPANY_CODE	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
ST_OF_DOMICILE	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
NATIONALITY	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
TYPE_OF_ENTITY	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
AFFILIATE_NM	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
LOCATION_CITY_ST	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
FRB	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
OCC	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
FDIC	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001

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SEC	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001
AMERICAN_BANKERS_ASSOCIATION_A	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1
ISSUING_OR_CONFIRMING_BANK_NM	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1
CIRCUMSTANCES_THAT_CAN_TRIGGER	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1
AMT	01.1 01.2 01.3 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1
EXPLANATION	01.1 01.2 01.4 01.5 02.1 02.2 03.1 03.2 03.3 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 07.1 07.21 07.2201 08.1 08.3 08.4001 08.5 08.6 10.1 10.3 10.5 12.1 12.12 12.13 13.2 13.3 13.4 14.1 14.2 14.3 15.1 15.2001
CIK	01.1 01.2 01.3 01.4 02.1 02.2 03.1 03.2 03.3 03.4 03.5 03.6 04.11 04.12 04.21 04.22 05.1 05.2001 06.1 06.2 07.1 07.21 07.2201 08.1 08.2 08.3 08.4001 08.5 08.6 09 10.1 10.2 10.3 10.4 10.5 10.6 11 12.1 12.11 12.12 12.13 12.2 13.1 13.2 13.3 13.4 14.1 14.11 14.2 14.21 14.3 14.31 15.1 15.2001

## VALID LINE NUMBERS

LINE NUMBER	LINE DESCRIPTION
01.1	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 (general)
01.2	If yes, did the reporting entity register and file with its domiciliary state a registration statement providing disclosure to standards adopted by the NAIC or similar reporting standards (general)
01.3	State regulating (general)
01.4	Is the reporting entity publicly traded or a member of a publicly traded group?
01.5	If the response to 3.4 is yes, provide the CIK code issued by the SEC for the entity/group.
02.1	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 (general)
02.2	If yes, date of change (general)
03.1	State as of what date the latest financial examination of the reporting entity was made or is being made (general)
03.2	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.(general)

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- 03.3 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) (general)
- 03.4 By what department or departments (general)
- 03.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?
- 03.6 Have all of the recommendations within the latest financial examination report been complied with?
- 04.11 During the period covered by this statement, did any agent, broker, etc. under common control receive credit or commissions for or control a substantial part of sales of new business (general)
- 04.12 During the period covered by this statement, did any agent, broker, etc. under common control receive credit or commissions for or control a substantial part of renewals (general)
- 04.21 During the period covered by this statement did any sales/service organization owned in whole or in part receive credit or commissions for or control a substantial part of sales of new business
- 04.22 During the period covered by this statement did any sales/service organization owned in whole or in part receive credit or commissions for or control a substantial part of renewals
- 05.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement (general)
- 05.2001 If yes, provide the name of the entity, NAIC company code and state of domicile for any entity that has ceased to exist as a result of the merger or consolidation (general)
- 06.1 Has the reporting entity had any Certificates of Authority, licenses or registrations suspended or revoked by any governmental entity during the reporting period (general)
- 06.2 If yes, give full information (general)
- 07.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity (general)
- 07.21 State the percentage of foreign control (general)
- 07.2201 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity (general)
- 08.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board (general)
- 08.2 If response to 8.1 is yes, please identify the name of the DIHC. (general)
- 08.3 Is the company affiliated with one or more banks, thrifts or securities firm (general)
- 08.4001 If response to 8.3 is yes, provide (general)
- 08.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the reporting entity?
- 08.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?
- 09 What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit (general)
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?
- 10.2 If the response to 10.1 is yes, provide information related to this exemption.
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?
- 10.4 If the response to 10.3 is yes, provide information related to this exemption.
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?
- 10.6 If the response to 10.5 is no or n/a, please explain
- 11 What is the name, address and affiliation of the individual providing the statement of actuarial opinion/certification (general)
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

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- 12.11 Name of real estate holding company
- 12.12 Number of parcels involved
- 12.13 Total Book/Adjusted Carrying Value
- 12.2 If yes, provide explanation
- 13.1 What changes have been made during the year in the U.S. manager or the U.S. trustees of the reporting entity (for U.S. branches of alien reporting entity only) (general)
- 13.2 Does this statement contain all business transacted for the reporting entity through its U.S. branch on risks wherever located (for U.S. branches of alien reporting entities only) (general)
- 13.3 Have there been any changes made to any of the trust indentures during the year (for U.S. branches of alien reporting entities only) (general)
- 13.4 If answer to 13.3 is yes, has the domiciliary or entry state approved the changes (for U.S. branches of alien reporting entities only) (general)
- 14.1 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? (a)....(e)
- 14.11 If the response to 14.1 is no, please explain
- 14.2 Has the code of ethics for senior managers been amended?
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s)
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers?
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s)
- 15.1 Is the reporting entity the beneficiary of a letter of credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?
- 15.2001 If the response to 15.1 is yes, indicate the ABA Routing Number and the name of the issuing or confirming bank of the letter of credit and describe the circumstances in which the letter of credit is triggered.