

PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

ANNUAL STATEMENT

For the Year Ended December 31, 2023 OF THE CONDITION AND AFFAIRS OF THE

PROVIDENCE MUTUAL FIRE INSURANCE COMPANY

NAIC Group Code	, 00382	00382	NAIC Company Co	ode 15040	Employer's ID N	umber 05-0204000
(Cur	rent Period)	(Prior Period)				
Organized under the Laws of	of	Rhode Is	sland	_ , State of Domicile or	Port of Entry	Rhode Island
Country of Domicile				United States		
Incorporated/Organized		10/27/1800)	Commenced Business		10/27/1800
Statutory Home Office		340 Eas	t Avenue	,	Warwick, RI, I	JS 02886-1802
		(Street an	nd Number)		(City or Town, State,	Country and Zip Code)
Main Administrative Office		340 East Ave		Warwick, RI, US	02886-1802	401-827-1800
		(Street and Nun	nber)		ntry and Zip Code)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Mail Address		P.O. Box 6066	,		Providence, RI, US	
		and Number or P.O. Bo		,	City or Town, State, Count	• • •
Primary Location of Books a	nd Records _		East Avenue		, US 02886-1802	
		(Stre	et and Number)		e, Country and Zip Code)	(Area Code) (Telephone Number)
Internet Web Site Address				ww.providencemutual.co		
Statutory Statement Contact	· _	Ch	ristina Mullaney			1800-8575
cmullano	(@providence	mutual com	(Name)		(Area Code) (Telephor 401-822-1872	ne Number) (Extension)
	(E-Mail Address				(Fax Number)	
	(,			(Fax Nulliber)	
			OFFIC			
Name		Title	-	Name		Title
Michele Leigh Streto		Presid		Thomas Clayton B	everly,	Secretary
Earl Francis Cottam	Jr,	Treasu	urer		,	
			OTHER OF	FICERS		
Joseph John Muccio),	Vice Pres	sident	William Leo Donov	van ,	Vice President
Lisa Marie Hatch	,	Vice Pres	sident	Kashmira Rajendra P	radhan ,	Vice President
Franco Marco DiDuc	a,	Vice Pres	sident		,	
		DI	RECTORS OF	RTRUSTEES		
Alan Henry Litwin		David Marti	n Gilden	B. Michael Rauh	Jr.	Edwin Joseph Santos
John Bond Trevor IV	/	Collin Earle	e Bailey	Maria Patrice Ducha	arme	John Scott Lombardo
Kimberly Marie Barke	er	Michele Leig	h Streton			
State of	Rhode Island					
County of	Kent		SS			

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 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 off 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 the variate 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 the variate states and belief. 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.

kilou

Thomas Cluyton Burely

Eal Frain Cotto

Michele Leigh Streton President

Subscribed and sworn to before me this _day of 27

February, 2024

Thomas Clayton Beverly Secretary

Earl Francis Cottam Jr. Treasurer

Yes [X] No []

- a. Is this an original filing? b. If no:1. State the amendment number
- 2 Date filed
- 3. Number of pages attached

havie Williamson

Stephanie Jean Williamson, Notary January 16, 2025

		99513			
			Current Year		Prior Year
		1	2	3	4
		. .		Net Admitted Assets	Net Admitted
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets
1.					
2.	Stocks (Schedule D):	0		0	0
	2.1 Preferred stocks				0
3.	2.2 Common stocks Mortgage loans on real estate (Schedule B):				
3.	3.1 First liens			0	0
	3.2 Other than first liens				0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less				
	\$0 encumbrances)			2,439,995	
	4.2 Properties held for the production of income				
	(less \$0 encumbrances)			0	
	4.3 Properties held for sale (less				
	\$			0	0
5.	Cash (\$1,374,216 , Schedule E-Part 1), cash equivalents				
	(\$1,731,902 , Schedule E-Part 2) and short-term				
	investments (\$	3,106,119			
6.	Contract loans (including \$			0	0
7.	Derivatives (Schedule DB)				0
8.	Other invested assets (Schedule BA)		0		0
9.	Receivables for securities				0
10.	Securities lending reinvested collateral assets (Schedule DL)				0
11.	Aggregate write-ins for invested assets				0
12.	Subtotals, cash and invested assets (Lines 1 to 11)		0		
13.	Title plants less \$				
	only)				
14.	Investment income due and accrued				
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of				
	collection			805 , 867	
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned			45 075 550	10,070,070
	but unbilled premiums)				
	15.3 Accrued retrospective premiums (\$			0	0
10	contracts subject to redetermination (\$)				0
16.	Reinsurance:	1 250 420		1 250 420	000 027
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies 16.3 Other amounts receivable under reinsurance contracts				0 0
17	Amounts receivable relating to uninsured plans				U
17. 18.1	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software.				
20.	Furniture and equipment, including health care delivery assets				
21.	(\$)	191 622	191 622	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 (\$				
25.	Aggregate write-ins for other-than-invested assets				
26.	Total assets excluding Separate Accounts, Segregated Accounts and	, ,	,	, ,	, ,
	Protected Cell Accounts (Lines 12 to 25)				
27.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts			0	0
28.	Total (Lines 26 and 27)	182,331,113	370,612	181,960,501	181,768,561
DETAIL	S OF WRITE-INS				
1101.					0
1102.				0	0
1103.				0	0
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0		0
2501.	Other Assets				
2502.	Pools and Associations				
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	6,937,469	107,185		6,945,473
		.,,		. , ,	. , = . = ,

ASSETS

LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
1		Current Year	Prior Year
	Losses (Part 2A, Line 35, Column 8) Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		
	Loss adjustment expenses (Part 2A, Line 35, Column 9)		
	Commissions payable, contingent commissions and other similar charges		
	Other expenses (excluding taxes, licenses and fees)		
	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$		
	Net deferred tax liability		
	Borrowed money \$		
1	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of		
0.	\$		
	health experience rating refunds including \$ for medical loss ratio rebate per the Public Health		
	Service Act)	43,758,686	
10.	Advance premium	1,030,362	719,572
11.	Dividends declared and unpaid:		
	11.1 Stockholders		0
	11.2 Policyholders		0
12.	Ceded reinsurance premiums payable (net of ceding commissions)	672,415	
13.	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$		0
17.	Net adjustments in assets and liabilities due to foreign exchange rates		0
18.	Drafts outstanding		0
19.	Payable to parent, subsidiaries and affiliates		0
20.	Derivatives	0	0
21.	Payable for securities		0
22.	Payable for securities lending		0
23.	Liability for amounts held under uninsured plans		0
24.	Capital notes \$ and interest thereon \$		0
25.	Aggregate write-ins for liabilities	0	0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds	0	0
30.	Common capital stock		0
31.	Preferred capital stock		0
32.	Aggregate write-ins for other-than-special surplus funds	0	0
33.	Surplus notes		0
34.	Gross paid in and contributed surplus		0
35.	Unassigned funds (surplus)		
36.	Less treasury stock, at cost:		
	36.1		0
	36.2 shares preferred (value included in Line 31 \$		0
37.	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)		93,339,982
	Totals (Page 2, Line 28, Col. 3)	181,960,501	181,768,561
	LS OF WRITE-INS		
2501.			0
2502.			0
2503.			0
2598.	Summary of remaining write-ins for Line 25 from overflow page		0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	0	0
2901.			0
2902.			0
2903.			0
	Summary of remaining write-ins for Line 29 from overflow page		
	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0
			0
3203.			
	Summary of remaining write-ins for Line 32 from overflow page	0	0

STATEMENT OF INCOME

		1 Current Year	2 Prior Year
1.	UNDERWRITING INCOME Premiums earned (Part 1, Line 35, Column 4) DEDUCTIONS:	67,991,296	
2.	Losses incurred (Part 2, Line 35, Column 7)		
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		
	Aggregate write-ins for underwriting deductions		
	Total underwriting deductions (Lines 2 through 5)	88,642,776	74,806,767
	Net income of protected cells Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)		
0.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(20,001,400)	
	INVESTMENT INCOME		
	Net investment income earned (Exhibit of Net Investment Income, Line 17)		2,793,495
	Net realized capital gains (losses) less capital gains tax of \$	2,345,948	1,012,327
	OTHER INCOME		
12	Net gain (loss) from agents' or premium balances charged off (amount recovered \$		
	charged off \$	(192, 190)	(172,800)
	Finance and service charges not included in premiums		
	Aggregate write-ins for miscellaneous income	(385,921)	(445,937)
	Total other income (Lines 12 through 14)	(371,022)	(397,875)
	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	(15,410,657)	(5,748,125)
	Dividends to policyholders		0
	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	(15,410,657)	(5,748,125)
1	Federal and foreign income taxes incurred	(45, 440, 057)	0
20.	Net income (Line 18 minus Line 19) (to Line 22)	(15,410,657)	(5,748,125)
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)		
	Net income (from Line 20)		
	Net transfers (to) from Protected Cell accounts		
	Change in net unrealized capital gains or (losses) less capital gains tax of \$1,543,180		
	Change in net unrealized foreign exchange capital gain (loss) Change in net deferred income tax		
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	76.653	
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
	Change in surplus notes		0
	Surplus (contributed to) withdrawn from protected cells		0
	Cumulative effect of changes in accounting principles		0
32.	Capital changes:		0
	32.1 Paid in		
	32.3 Transferred to surplus (eteot binderid)		
33.	Surplus adjustments:		
	33.1 Paid in		0
			0
24	33.3 Transferred from capital		0
	Net remittances from or (to) Home Office Dividends to stockholders		0
1	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
1	Aggregate write-ins for gains and losses in surplus	0	0
	Change in surplus as regards policyholders for the year (Lines 22 through 37)	(7,985,533)	(17,779,741)
	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	85,354,449	93,339,982
	S OF WRITE-INS		^
			0
			0
	Summary of remaining write-ins for Line 5 from overflow page		
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0
	Policyholder Service Fees		
	Loss on Disposal of Assets		,
	Summary of remaining write-ins for Line 14 from overflow page Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	(385,921)	0 (445,937)
			(443,937)
1			
3798.	Summary of remaining write-ins for Line 37 from overflow page		0
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)	0	0

CASH FLOW

			2
		Current Year	Prior Year
1	Cash from Operations		
	Premiums collected net of reinsurance Net investment income		2,874,375
	Miscellaneous income	(371,022)	(397,875)
	Total (Lines 1 through 3)	73,186,397	67,634,448
	Benefit and loss related payments		
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.		
	Commissions, expenses paid and aggregate write-ins for deductions		37.004.202
	Dividends paid to policyholders		
	Federal and foreign income taxes paid (recovered) net of \$tax on capital gains (losses)	(436,067)	0
	Total (Lines 5 through 9)	84,900,043	81,044,820
	Net cash from operations (Line 4 minus Line 10)	(11,713,646)	(13,410,372)
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks		
	12.3 Mortgage loans	0	0
	12.4 Real estate	0	0
	12.5 Other invested assets		0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0
	12.7 Miscellaneous proceeds		0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13.	Cost of investments acquired (long-term only):	0 470 540	10, 101, 000
	13.1 Bonds		
	13.2 Stocks		
	13.3 Mortgage loans		0
	13.4 Real estate		0
	13.5 Other invested assets	808	0
	13.6 Miscellaneous applications	28,032,027	33,864,000
11	13.7 Total investments acquired (Lines 13.1 to 13.6) Net increase/(decrease) in contract loans and premium notes	· · · ·	33,004,000
		13,140,987	4,159,867
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) Cash from Financing and Miscellaneous Sources	13,140,307	4,133,007
16	Cash provided (applied):		
10.	16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock.	I I	0
	16.3 Borrowed funds		Ō
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)		60,056
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	72,811	60,056
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	1 , 500 , 152	(9,190,449)
	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year		
	19.2 End of year (Line 18 plus Line 19.1)	3,106,119	1,605,967

UNDERWRITING AND INVESTMENT EXHIBIT PART 1 - PREMIUMS EARNED

	PART 1 - P	REMIUMS EARN			
	Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1.	Fire				
2.1	Allied lines				1,231,504
2.2	Multiple peril crop				
2.3	Federal flood			0	0
2.4	Private crop			0	0
2.5	Private flood			0	0
3.	Farmowners multiple peril			0	0
4.	Homeowners multiple peril				
5.1	Commercial multiple peril (non-liability portion)				
5.2	Commercial multiple peril (liability portion)				
6.	Mortgage guaranty			0	0
8.	Ocean marine			0	0
9.	Inland marine				
10.	Financial guaranty			0	0
11.1	Medical professional liability-occurrence	0	0	0	0
11.2	Medical professional liability-claims-made		0	0	0
12.	Earthquake		0	0	0
13.1	Comprehensive (hospital and medical) individual			0	0
13.2	Comprehensive (hospital and medical) group		0	0	0
14.	Credit accident and health (group and individual)	0	0	0	0
15.1	Vision only		0	0	0
15.2	Dental only		0	0	0
15.3	Disability income		0	0	0
15.4	Medicare supplement			0	0
15.5	Medicaid Title XIX			0	0
15.6	Medicare Title XVIII			0	0
15.7	Long-term care			0	0
15.8	Federal employees health benefits plan			0	0
15.9	Other health			0	0
16.	Workers' compensation			8,913	
17.1	Other liability-occurrence			,	
17.2	Other liability-claims-made			0	0
17.3	Excess workers' compensation			0	0
18.1	Products liability-occurrence			0	0
18.2	Products liability-claims-made				0
19.1	Private passenger auto no-fault (personal injury protection)				0
19.2	Other private passenger auto liability				
19.3	Commercial auto no-fault (personal injury protection)				0
19.4	Other commercial auto liability				
21.1	Private passenger auto physical damage				
21.2	Commercial auto physical damage				
22.	Aircraft (all perils)				0
23.	Fidelity				0
24.	Surety			0	0
26.	Burglary and theft			0	0
27.	Boiler and machinery			0	0
28.	Credit			0	0
29.	International			0	0
30. 31	Warranty			0	0
31.	Reinsurance-nonproportional assumed property			0	0
32. 33	Reinsurance-nonproportional assumed liability			0	0
33.	Reinsurance-nonproportional assumed financial lines			0	
34. 35	Aggregate write-ins for other lines of business	72,445,936		43,758,686	67,991,296
35.		12,440,930	39,304,040	43,730,000	07,331,230
	OF WRITE-INS				
3401. 3402.			1		
3402. 3403.					
3403. 3498.	Sum. of remaining write-ins for Line 34 from overflow page				0
3498. 3499.				0 0	
0499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	U	0

UNDERWRITING AND INVESTMENT EXHIBIT PART 1A - RECAPITULATION OF ALL PREMIUMS

	PART 1/	<u> A - RECAPITUL</u>	ATION OF ALL	PREMIUMS	1	
		1 Amount Unearned (Running One Year or Less from Date of Policy)	One Year from Date of Policy)	3 Earned but	4 Reserve for Rate Credits and Retrospective Adjustments Based	5 Total Reserve for Unearned Premiums
1	Line of Business	(a)	(a)	Unbilled Premium	on Experience	Cols. 1+2+3+4
	Fire					1,021,126
	Allied lines					
	Multiple peril crop					0
	Federal flood					0
	Private crop					
	Private flood					
	Farmowners multiple peril Homeowners multiple peril					00 400 474
	Commercial multiple peril (non-liability portion)					11 110 101
	Commercial multiple peril (liability portion)					0 504 004
	Mortgage guaranty					
	Ocean marine					0
	Inland marine					000.000
	Financial guaranty					
	Medical professional liability-occurrence					
	Medical professional liability-claims-made					
	Earthquake					
	Comprehensive (hospital and medical) individual					
	Comprehensive (hospital and medical) individual					
	Credit accident and health (group and individual)					0
	Vision only					0
	Dental only					0
	•					
	Disability income					-
	Medicare supplement					
	Medicare title XVIII					
	Federal employees health benefits plan					0
	Other health.					
	Workers' compensation					0.040
	Other liability-occurrence					
	-					
	Other liability-claims-made Excess workers' compensation					
	•					
	Products liability-occurrence Products liability-claims-made					0
	Private passenger auto no-fault (personal injury protection)					
19.2	Other private passenger auto liability					
19.3	Commercial auto no-fault (personal injury protection)					
	Other commercial auto liability					
	Private passenger auto physical damage					
	Commercial auto physical damage					
	Aircraft (all perils)					0
	Fidelity					0
	Surety					0
	Burglary and theft					
	Boiler and machinery					
	Credit					0
	International					0
	Warranty					0
	Reinsurance-nonproportional assumed property					0
33.	Reinsurance-nonproportional assumed liability Reinsurance-nonproportional assumed financial					0
34.	lines Aggregate write-ins for other lines of business	0	0	0	0	0
	TOTALS	43,758,686	0	0	0	43,758,686
	Accrued retrospective premiums based on experier					
	Earned but unbilled premiums					40.750.000
	Balance (Sum of Lines 35 through 37)	1				43,758,686
	DF WRITE-INS					
3403. 3498.	Sum. of remaining write-ins for Line 34 from					
	overflow page.	0	0	0	l0	·····0
	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above) ere basis of computation used in each case.	0	0	0	0	0

(a) State here basis of computation used in each case.

UNDERWRITING AND INVESTMENT EXHIBIT

		1B - PREM	Reinsurand	ce Assumed		nce Ceded	6
	Line of Business	Direct Business (a)	2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	Net Premiums Written Cols. 1+2+3-4-5
1.			/		7 11110100		
2.1	Allied lines			.61,224		.385,473	
2.2	Multiple peril crop					,	
2.3	Federal flood						
2.4	Private crop						
2.4	Private flood						
3.							
	Farmowners multiple peril			160 520		0 021 072	
4.	Homeowners multiple peril						
5.1	Commercial multiple peril (non-liability portion)						
5.2	Commercial multiple peril (liability portion)						
6.	Mortgage guaranty						<u> </u> !
8.	Ocean marine						
9.	Inland marine	421,450					
10.	Financial guaranty						l
11.1	Medical professional liability-occurrence						ļ
11.2	Medical professional liability-claims-made						ļ!
12.	Earthquake						ļ
13.1	Comprehensive (hospital and medical) individual						ļ
13.2	Comprehensive (hospital and medical) group						ļ
14.	Credit accident and health (group and individual)						
15.1	Vision only						
15.2	Dental only						
15.3	Disability income						
15.4	Medicare supplement						
15.5	Medicaid Title XIX						
15.6	Medicare Title XVIII						
15.7	Long-term care						
15.8	Federal employees health benefits plan						
15.9	Other health						1
16.	Workers' compensation						
17.1	Other liability-occurrence						
17.2	Other liability-claims-made						······
17.3	Excess workers' compensation						<u> </u>
18.1	Products liability-occurrence						l
18.2	Products liability-claims-made						ļ
19.1	Private passenger auto no-fault (personal injury protection)						ļ!
19.2	Other private passenger auto liability	6 , 565 , 600					6, 193, 26
19.3	Commercial auto no-fault (personal injury protection)						ļ
19.4	Other commercial auto liability						
21.1	Private passenger auto physical	4,453,739					4,006,47
21.2	Commercial auto physical damage						
22.	Aircraft (all perils)						
23.	Fidelity						
23. 24.	Surety						[
26.	Burglary and theft						
20. 27.	Boiler and machinery						
27. 28.	•						†'
	Credit						·
29.	International						
30.	Warranty						
31.	Reinsurance-nonproportional assumed property			1			†!
32.	Reinsurance-nonproportional assumed liability			<u>+</u> +			+!
33.	Reinsurance-nonproportional assumed financial lines						······
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	(
35.	TOTALS	87,844,943	0	405,002	0	15,804,009	72,445,93
DETAILS	OF WRITE-INS						
3401.							
3402.							
3403.							
3498.	Sum. Of remaining write-ins for Line 34 from overflow page		0		0	.0	
	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0	

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X] If yes: 1. The amount of such installment premiums \$ 2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROVIDENCE MUTUAL FIRE INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

		Losses Paid Les	LUSSES PAID AND IN		5	6	7	0
	1	2 Losses Paid Les	3	4	5	6	/	8 Percentage of Losses
Line of Business	' Direct Business	2 Reinsurance Assumed	Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	(Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire	1,418,168		2,169	1,435,329	206,122			
2.1 Allied lines	519.058	30.330	14.935	534.453	135.694		513.864	
2.2 Multiple peril crop					100,004	130,203		
2.3 Federal flood				0	0	0	0	
2.4 Private crop				0		0	0	
2.5 Private flood				0	0	0	0	
3. Farmowners multiple peril						0	0	
4. Homeowners multiple peril		.106.395	1,091,583	19,953,088				
5.1 Commercial multiple peril (non-liability portion)			1,166,114		5,439,795	4,398,946		
 Commercial multiple peril (non-liability portion) Commercial multiple peril (liability portion) 			244,790				4,253,426	
6. Mortgage guaranty								
 Mongage guaranty Ocean marine 							0	
					.57,923			
9. Inland marine 10. Financial guaranty						43,000		4
	·····				······	······	0	
11.1 Medical professional liability-occurrence				·····	·····	·····Ň ŀ·	0	
1.2 Medical professional liability-claims-made				0	0		0	
2. Earthquake				0	0	0	0	
13.1. Comprehensive (hospital and medical) individual				0	0	0	0	
13.2. Comprehensive (hospital and medical) group				0	0	0	0	
14. Credit accident and health (group and individual)				0	0	0	0	
15.1. Vision only				0	0	0	0	
15.2. Dental only				0		0	0	
5.3. Disability income				0		0	0	
5.4. Medicare supplement				0	0	0	0	
5.5. Medicaid Title XIX				0	0	0	0	
5.6. Medicare Title XVIII				0	0	0	0	
5.7. Long-term care				0	0	0	0	
5.8. Federal employees health benefits plan							0	
5.9. Other health							0	
	770.159		157					
7.1 Other liability-occurrence					1,365,679			
7.2 Other liability-claims-made					0		0	
7.3 Excess workers' compensation					0	0	0	
3.1 Products liability-occurrence				0	0	0	0	
8.2 Products liability-claims-made				0	0	0	0	
9.1 Private passenger auto no-fault (personal injury protection)				0	0	0	0	
9.2 Other private passenger auto liability		17						
9.3 Commercial auto no-fault (personal injury protection)				0	0	0	0	
9.4 Other commercial auto liability				486,554				
1.1 Private passenger auto physical damage			l					
1.2 Commercial auto physical damage	239.007			239.316				
2. Aircraft (all perils)								
B. Fidelity				0				
4. Surety				n l		n 1	0 0	
5. Burglary and theft	····						0	
7. Boiler and machinery							0 ^	
B. Credit				······	······	······		
Gredit International				······································	······	ÿ [
				······································	······	······································		
0. Warranty	····			·····	·····.	······č ŀ·	0	
1. Reinsurance-nonproportional assumed property				0	0	Õ	0	
2. Reinsurance-nonproportional assumed liability				0	0	0	0	
33. Reinsurance-nonproportional assumed financial lines			·····	0	0	0	0	
4. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	
5. TOTALS	47,364,026	202,972	2,519,748	45,047,250	35,941,739	34,250,558	46,738,431	
TAILS OF WRITE-INS								
1		l	l			l.		
2.								
3.	[
 Sum. of remaining write-ins for Line 34 from overflow page 	0		0	0	n	0	∩	
 Sum of remaining write-ins for Line 34 from overnow page Totals (Lines 3401 through 3403 + 3498) (Line 34 above) 				······	······	······		
. I otais (Lines 3401 tillough 3405 + 3490) (Line 34 above)	0	U	0	U	U	0	0	

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROVIDENCE MUTUAL FIRE INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reporte	d Losses		I	ncurred But Not Reported		8	9
	1	2	3	4	5	6	7		
		Reinsurance	Deduct Reinsurance	Net Losses Excl. Incurred But Not Reported		Reinsurance	Reinsurance	Net Losses Unpaid	Net Unpaid Loss Adjustment
Line of Business	Direct	Assumed	Recoverable	(Cols. 1+2-3)	Direct	Assumed	Ceded	(Cols. 4+5+6-7)	Expenses
1. Fire									
2.1 Allied lines									
.2 Multiple peril crop				Ω				۵	
.3 Federal flood								0	
.4 Private crop				Ω				۵۵	
5 Private flood								0	
. Farmowners multiple peril				0				0	
. Homeowners multiple peril			1,693,573						
1 Commercial multiple peril (non-liability portion)			1,073,719						
2 Commercial multiple peril (liability portion)									
. Mortgage guaranty				Ω				0	
. Ocean marine								0	
Inland marine									
Financial guaranty								0	
1 Medical professional liability-occurrence				ο				۵	
2 Medical professional liability-claims-made				ρ				ρ	
Earthquake								D	
.1 Comprehensive (hospital and medical) individual								a)0	
2 Comprehensive (hospital and medical) group								a)0	
Credit accident and health (group and individual)								0	
1 Vision only				ρ				a)0	
.2 Dental only								a)0	
.3 Disability income								(a)0	
6.4 Medicare supplement				0				a) 0	
.5 Medicaid Title XIX				0				(a) 0	
.6 Medicare Title XVIII				0				a) 0	
.7 Long-term care				0				(a) 0	
.8 Federal employees health benefits plan				Õ				a) 0	
.9 Other health				0				(a) 0	
. Workers' compensation				0					
.1 Other liability-occurrence		78.602			1,014,275		.425,000	1,365,679	
.2 Other liability-claims-made				0				0,000,000	
 2.3 Excess workers' compensation				0				0	
.1 Products liability-occurrence				0				0	
.2 Products liability-claims-made				0				0	
.1 Private passenger auto no-fault (personal injury protection)	·····			0				0	
.2 Other private passenger auto liability						1			
0.3 Commercial auto no-fault (personal injury protection)								0	
.4 Other commercial auto liability		31.446			.125,000	13.884			
.1 Private passenger auto hability									
.2 Commercial auto physical damage									
Aircraft (all perils)									4
. Alicial (ali penis)									
. Surety								D	
				-+ ^V				U	
Burglary and theft								D	
Boiler and machinery				-+ ^V				V	
Credit International				-+ÿ				0	
International				-+ÿ				D	
Warranty Reinsurance-nonproportional assumed property								0	
Reinsuránce-nonproportional assumed property Reinsurance-nonproportional assumed liability				.μρ	XXX			Ô	
Reinsurance-nonproportional assumed liability				.μρ	XXX			Ô	
Reinsurance-nonproportional assumed financial lines	XXX			. ۱	XXX			D	
Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0	
TÕTALS	27,927,015	191,243	3,908,356	24,209,902	13,693,968	94,869	2,057,000	35,941,739	10,319
AILS OF WRITE-INS									
 Sum. of remaining write-ins for Line 34 from overflow page 	······	0	 N	· · · · · · · · · · · · · · · · · · ·				0	
 Totals (Lines 3401 through 3403 + 3498) (Line 34 above) 	^ · · · · ·	D ۱	D N	0		۰ n	ň ľ		
ncluding \$		0	0	· · · · · ·	Ū	0	0	0	L

UNDERWRITING AND INVESTMENT EXHIBIT

	PART 3	- EXPENSES			
		1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1.	Claim adjustment services:				
	1.1 Direct	6,212,868			
	1.2 Reinsurance assumed				
	1.3 Reinsurance ceded	898,906			898,906
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	5, 337, 530	0	0	5, 337, 530
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent				
	2.2 Reinsurance assumed, excluding contingent				
	2.3 Reinsurance ceded, excluding contingent		1,268,642		1,268,642
	2.4 Contingent-direct				
	2.5 Contingent-reinsurance assumed				0
	2.6 Contingent-reinsurance ceded				
	2.7 Policy and membership fees				0
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)	0		0	
3.	Allowances to manager and agents				0
4.	Advertising				
	Boards, bureaus and associations				
	Surveys and underwriting reports				1 , 197 , 094
	Audit of assureds' records				
8.	Salary and related items:				
	8.1 Salaries				
	8.2 Payroll taxes				
	Employee relations and welfare				
	Insurance				
	Directors' fees				
	Travel and travel items				
	Rent and rent items		,	<i>'</i>	
	Equipment				
	Cost or depreciation of EDP equipment and software				
	Printing and stationery		· · ·	· · · · · ·	
	Postage, telephone and telegraph, exchange and express				
	Legal and auditing	80,854	184,480	342,946	608,280
	Totals (Lines 3 to 18)				
	Taxes, licenses and fees:			1,000,002	
20.	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$		1 083 707		1 083 707
	20.2 Insurance department licenses and fees				
	20.3 Gross guaranty association assessments				0
	20.4 All other (excluding federal and foreign income and real estate) 20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)		1 090 707		1,983,707
04	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)				
	Real estate expenses				
					, , , , , , , , , , , , , , , , , , , ,
	Reimbursements by uninsured plans				0 2 264 567
	Aggregate write-ins for miscellaneous expenses		1,460,193	164,408	2,264,567
	Total expenses incurred			1,944,107 (a)	
	Less unpaid expenses-current year				
	Add unpaid expenses-prior year				
	Amounts receivable relating to uninsured plans, prior year		0	0	0
	Amounts receivable relating to uninsured plans, current year				0
	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	8,640,061	31,264,975	1,950,331	41,855,367
	LS OF WRITE-INS				
2401.	Software Maintenance		635,602		
	Outside Services	·		,	
	FAIR Plan - CAR - MAERP				
2498.	Summary of remaining write-ins for Line 24 from overflow page				
2499.	Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	639,966	1,460,193	164,408	2,264,567

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

EXHIBIT OF NET INVESTMENT INCOME

			1 Collected During Year	Durir	2 arned ng Year
1.	U.S. Government bonds	(a)			
1.1	Bonds exempt from U.S. tax	(a)			
1.2	Other bonds (unaffiliated)				3,441,188
1.3	Bonds of affiliates				
2.1	Preferred stocks (unaffiliated)				
2.11	Preferred stocks of affiliates				
2.2	Common stocks (unaffiliated)		1,517,742		1,539,866
2.21	Common stocks of affiliates		0		
3.	Mortgage loans				
4.	Real estate	(d)			
5.	Contract loans				
6.	Cash, cash equivalents and short-term investments	(e)			
7.	Derivative instruments	(f)			
8.	Other invested assets				
9.	Aggregate write-ins for investment income				
10.	Total gross investment income		5,300,465		5,318,548
11.	Investment expenses			(a)	1,944,107
12.	Investment taxes, licenses and fees, excluding federal income taxes				
13.	Interest expense				
14.	Depreciation on real estate and other invested assets				
15.	Agregate write-ins for deductions from investment income				
16.	Total deductions (Lines 11 through 15)				
17.	Net investment income (Line 10 minus Line 16)				3,265,897
	LS OF WRITE-INS				-,,
0901.	Pools & Associations				
0902.					
0903.					
	Summary of remaining write-ins for Line 9 from overflow page				0
	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		92,771		92.771
					- /
1501.					
1502.					
1503.					
1598.	Summary of remaining write-ins for Line 15 from overflow page				0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)				0
(b) Incl	udes \$		0 paid for accrued	I dividends o	n purchases.

	\dots accidat of discount less φ	and less \$	paid for accrued dividends on purchases.
			paid for accrued interest on purchases.
(d) Includes \$120,000	for company's occupancy	of its own buildings; and excludes \$	interest on encumbrances.
(e) Includes \$	accrual of discount less \$	amortization of premium and less \$	paid for accrued interest on purchases.
(f) Includes \$	accrual of discount less \$	amortization of premium.	
(g) Includes \$	investment expenses and	\$investment taxes, licenses and fe	es, excluding federal income taxes, attributable to
segregated and Separate A	Accounts.		

 interest on capital notes. depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds			0		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)					
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates		0	0	0	0
2.2	Common stocks (unaffiliated)		0	2,440,638	7,348,471	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	۵	0	0		0
5.	-			0		
6.	Cash, cash equivalents and short-term investments			0	0	0
7.	Derivative instruments			0		
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	2,345,949	0	2,345,949	7,348,471	0
DETAI	LS OF WRITE-INS					
0901.				0		
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	0	0	0	0	0

EXHIBIT OF NONADMITTED ASSETS

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks	0	0	0
	2.2 Common stocks	0	0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	0	0	0
	3.2 Other than first liens	0	0	0
4	Real estate (Schedule A):			
	4.1 Properties occupied by the company	0	0	0
	4.2 Properties held for the production of income		0	
	4.2 Properties held for sale			0
-		0		
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and			
	short-term investments (Schedule DA)		0 .	0
6.	Contract loans	0	0	0
7.	Derivatives (Schedule DB)	0	0	0
8.	Other invested assets (Schedule BA)	0	0	0
9.	Receivables for securities	0	0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11.	Aggregate write-ins for invested assets	0	0	0
	Subtotals, cash and invested assets (Lines 1 to 11)		0	0
1	Title plants (for Title insurers only)		0	0
1	Investment income due and accrued		0	0
	Premiums and considerations:			
10.				
	15.1 Uncollected premiums and agents' balances in the course of			16,026
	collection			
	15.2 Deferred premiums, agents' balances and installments booked but deferred			
	and not yet due		0	0
	15.3 Accrued retrospective premiums and contracts subject to redetermination	0	0	0
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers		0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0
	16.3 Other amounts receivable under reinsurance contracts	0	0 .	0
17.	Amounts receivable relating to uninsured plans	0	0	0
18.1	Current federal and foreign income tax recoverable and interest thereon	0	0	0
	Net deferred tax asset		0	0
19.	Guaranty funds receivable or on deposit	0	0	0
	Electronic data processing equipment and software			
	Furniture and equipment, including health care delivery assets			
	Net adjustment in assets and liabilities due to foreign exchange rates			0
	Receivables from parent, subsidiaries and affiliates		0	0
	Health care and other amounts receivable			
	Aggregate write-ins for other-than-invested assets			0
26.	Total assets excluding Separate Accounts, Segregated Accounts and	070 040	4.17 005	70,050
	Protected Cell Accounts (Lines 12 to 25)			
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28.	Total (Lines 26 and 27)	370,612	447,265	76,653
DETAII	LS OF WRITE-INS			
1101.			0	0
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0
	POOLS & ASSOCIATIONS		-	0
2502.				
2503.				~
1	Summary of remaining write-ins for Line 25 from overflow page			0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	107 , 185	107,185	0

- 1. Summary of Significant Accounting Policies and Going Concern
 - A) Accounting Practices

The accompanying financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the State of Rhode Island Department of Business Regulation Insurance Division. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP) has been adopted as prescribed or permitted practices by the State of Rhode Island Department of Business Regulation Insurance Division.

The Company, with the explicit permission of the State of Rhode Island Department of Business Regulation Insurance Division, records its' investment in an unaudited wholly owned subsidiary as an admitted asset. If the investment was non-admitted, common stocks and statutory surplus would be decreased by \$1,173,694 as of December 31, 2023 and December 31, 2022, respectively.

Net Income	<u>2023</u>	<u>2022</u>
Company state basis (Page 4, Line 20, Columns 1 & 2)	(15,410,657)	(5,748,125)
State prescribed practices	0	0
State permitted practices	0	0
NAIC SAP	(15,410,657)	(5,748,125)
Surplus		
Company state basis (Page 3, Line 37, Columns 1 & 2)	85,354,449	93,339,982
State prescribed practices	0	0
State permitted practices (SSAP 97)	(1,173,694)	<u>(1,173,694)</u>
NAIC SAP	84,180,755	92,166,288

B) Use of Estimates in Preparation of the Financial Statements

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

C) Accounting Policies

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by semi-monthly pro-rata methods for direct and ceded business.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition the Company uses the following accounting policies:

- 1. Short-term investments are stated at amortized cost.
- 2. Bonds not backed by other loans are stated at either amortized cost using the interest method or the lower of amortized cost or fair market value.
- 3. Unaffiliated common stocks are stated at fair market value.
- 4. Unaffiliated preferred stocks are stated at fair market value.
- 5. The Company does not hold mortgage loans.
- 6. Loan-backed securities, including Mortgage-Backed Securities and Asset-Backed Securities, are stated at either amortized cost or the lower of amortized cost or fair value, using the interest method. Prepayment assumptions are reviewed on a periodic basis. If changes in prepayments are deemed necessary, securities are revalued based upon the new prepayment assumptions. The retrospective adjustment method is used to revalue all securities except for interest only securities, securities where the yield had become negative or securities where an other than temporary impairment was recognized as adopted under SSAP No. 43R, that are valued using the prospective method.
- 7. Common stocks of uncombined subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the equity basis.
- 8. Real estate is stated at cost less accumulated depreciation.
- 9. The Company does not hold derivative instruments.
- 10. The Company does utilize anticipated investment income as a factor in premium deficiency calculations.
- 11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessary based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- 12. The Company has not modified its capitalization policy from the prior period.
- D) Going Concern

Management has determined there is no substantial doubt about the entity's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

There have been no accounting changes or corrections of errors during the statement periods.

- 3. Business Combinations and Goodwill Not applicable.
- 4. Discontinued Operations Not applicable.
- 5. Investments
 - A) Mortgage Loans Not applicable.
 - B) Debt Restructuring Not applicable.
 - C) Reverse Mortgages Not applicable.
 - D) Loan-Backed Securities
 - 1) Prepayment assumptions for Mortgage-Backed Securities and Asset-Backed Securities were generated using a third-party prepayment model. The multi-factor model captures house price change trends, housing turnover, borrower default, and refinance incentive, among other factors.
 - 2) Other-than-temporary impairments were \$0 and \$0 at both December 31, 2023 and December 31, 2022, respectively.
 - 3) Not Applicable.
 - All impaired securities (fair value is less than cost or amortized cost) for which an other than temporary 4) impairment has not been recognized in earnings.

	Fair Value	Unrealized Losses
Unrealized losses less than 12 months	509,018	(7,416)
Unrealized losses greater than 12 months	33,174,315	(3,079,274)
Total	33,683,333	(3,086,690)

- 5) Loan backed securities in an unrealized loss position are reviewed to determine whether other-thantemporary impairments should be recognized. The Company asserts that it has the intent and ability to hold these securities long enough to allow the cost basis of these securities to be recovered.
- E) Dollar Repurchase Agreements and/or Securities Lending Transactions Not applicable.
- F) Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable.
- G) Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable.
- H) Repurchase Agreements Transactions Accounted for as a Sale Not applicable.
- I) Reverse Repurchase Agreements Transactions Accounted for as a Sale Not applicable.
- J) Real Estate Not applicable.
- K) Low-Income Housing Tax Credits Not applicable.
- L) Restricted Assets

United States treasury securities and cash with a carrying values of \$398,126 and \$400,037 at December 31, 2023 and December 31, 2022, respectively, were on deposit with the State of Rhode Island, as required by law.

- M) Working Capital Finance Investments Not applicable.
- N) Offsetting and Netting of Assets and Liabilities Not applicable.
- O) 5GI Securities Not applicable.
- P) Short Sales Not applicable.

- Q) Prepayment Penalty and Accelerated Fees Not applicable.
- 6. Joint Ventures, Partnerships and Limited Liability Companies Not applicable.

7. Investment Income

- A) Investment income due and accrued with amounts over 90 day past due is non-admitted.
- B) The Company had no investment income due and accrued excluded from surplus as of December 31, 2023 and 2022.
- C) Gross interest income at December 31, 2023 totaled \$735,829 all of which are included in admitted assets.
- D) Aggregate Deferred Interest None
- E) The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance totaled \$39,749.

8. Derivative Instruments

Not applicable.

9. Income Taxes

A. 1. Components of the net deferred income tax asset or net deferred tax liability;

December 31, 2023	Ordinary	<u>Capital</u>	<u>Total</u>
(a) Gross deferred tax assets	8,218,887	0	8,218,887
(b) Statutory Valuation Allowance Adjustments	(5,046,566)	0	(5,046,566)
(c) Adjusted gross deferred tax assets (1a-1b)	3,172,321	0	3,172,321
(d) Deferred tax assets nonadmitted	0	0	0
(e) Subtotal net admitted deferred tax assets (1c-1d)	3,172,321	0	3,172,321
(f) Deferred tax liabilities	(119,531)	(3,052,790)	(3,172,321)
(g) Net admitted deferred tax assets / (net deferred tax liabilities) (1e-1f)	3,052,790	(3,052,790)	0
December 31, 2022			
(a) Gross deferred tax assets	4,952,980	0	3,749,883
(b) Statutory Valuation Allowance Adjustments	(3,321,440)	0	(3,321,440)
(c) Adjusted gross deferred tax assets (1a-1b)	1,631,540	0	1,631,540
(d) Deferred tax assets nonadmitted	0	0	0
(e) Subtotal net admitted deferred tax assets (1c-1d)	1,631,540	0	1,631,540
(f) Deferred tax liabilities	(121,929)	(1,509,611)	(1,631,540)
(g) Net admitted deferred tax assets / (net deferred tax liabilities) (1e-1f)	1,509,611	(1,509,611)	0
Change			
(a) Gross deferred tax assets	3,265,907	0	3,265,907
(b) Statutory Valuation Allowance Adjustments	(1,725,126)	0	(1,725,126)
(c) Adjusted gross deferred tax assets (1a-1b)	1,540,781	0	1,540,781
(d) Deferred tax assets nonadmitted	0	0	0
(e) Subtotal net admitted deferred tax assets (1c-1d)	1,540,781	0	1,540,781
(f) Deferred tax liabilities	2,398	(1,543,179)	(1,540,781)
(g) Net admitted deferred tax assets / (net deferred tax liabilities) (1e-1f)	1,543,179	(1,543,179)	0
2. Admission Calculation Components			
December 31, 2023	<u>Ordinary</u>	<u>Capital</u>	Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks (11a)	0	0	0
(b) Adjusted gross DTAs expected to be realized after application of			
the threshold limitations	0	0	0
(Lesser of 11bi or 11bii)	0	0	0
1. Adjusted gross DTAs expected to be realized following the			
balance sheet date (11bi)	N/A	N/A	0
2. Adjusted gross DTAs allowed per limitation threshold (11bii)	N/A	N/A	12,803,167
Lesser of (b)1. or (b)2.	0	0	0
(c) Adjusted gross DTAs offset by gross DTLs (11c)	3,172,321	0	3,172,321
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101	3,172,321	0	3,172,321

NOTES TO THE FIANCIAL STATEMENTS

	<u>Ordinary</u>	<u>Capital</u>	<u>Total</u>
December 31, 2022			
(a) Federal income taxes paid in prior years recoverable through loss	0	0	0
carrybacks (11a) (b) Adjusted gross DTAs expected to be realized after application of	0	0	0
the threshold limitations	0	0	0
(Lesser of 11bi or 11bii)	0	0	0
1. Adjusted gross DTAs expected to be realized following the			
balance sheet date (11bi)	N/A	N/A	0
2. Adjusted gross DTAs allowed per limitation threshold (11bii) Lesser of (b)1. or (b)2.	N/A 0	N/A 0	14,000,997 0
(c) Adjusted gross DTAs offset by gross DTLs (11c)	1,631,540	0	1,631,540
(d) Deferred Tax Assets Admitted as the result of application of	1,001,010	0	1,001,010
SSAP No. 101	1,631,540	0	1,631,540
Change	<u>Ordinary</u>	<u>Capital</u>	<u>Total</u>
(a) Federal income taxes paid in prior years recoverable through loss	-	-	
carrybacks (11a)	0	0	0
(b) Adjusted gross DTAs expected to be realized after application of	0	0	0
the threshold limitations (Lesser of 11bi or 11bii)	0	0 0	0 0
1. Adjusted gross DTAs expected to be realized following	0	0	0
the balance sheet date (11bi)	N/A	N/A	(1,197,830)
2. Adjusted gross DTAs allowed per limitation threshold			
(11bii)	N/A	N/A	0
Lesser of (b)1. or (b)2. (c) Adjusted gross DTAs offset by gross DTLs (11c)	0 1,540,781	0 0	0 1,540,781
(d) Deferred Tax Assets Admitted as the result of application of	1,340,781	0	1,540,781
SSAP No. 101	1,540,781	0	1,540,781
3. Disclosure of ratios used for threshold limitations (for 11b);	12/31/23	12/31/22	
(a) Ratio percentage used to determine recovery period and threshold	12/31/25	12/31/22	
limitation amount	786%	918	%
(b) Amount of adjusted capital and surplus used to determine recovery			
period threshold limitation in 2(b)2 above	85,354,449	93,339,98	32
4. Impact of Tax Planning Strategies on the Determination of:			
D	Ordinary	<u>Capital</u>	<u>Total</u>
December 31, 2023 (a) Adjusted gross deferred tax assets	Percentage 0	Percentage 0	Percentage 0
(a) Adjusted gross deferred tax assets (Percentage of total adjusted gross deferred tax assets)	N/A	N/A	0%
(b) Net admitted adjusted gross deferred tax assets	0	0	0
(Percentage of total net admitted adjusted gross deferred tax			
assets)	N/A	N/A	0%
(c) Does the Company's tax-planning strategies include the use of reinsurance?	Yes	No X	
D 1 21 2022			
December 31, 2022	0	^	0
 (a) Adjusted gross deferred tax assets (Percentage of total adjusted gross deferred tax assets) 	0 N/A	0 N/A	0 0%
(b) Net admitted adjusted gross deferred tax assets)	0	0	0
(Percentage of total net admitted adjusted gross deferred tax	Ũ	0	0
assets)	N/A	N/A	0%
Change			
(a) Adjusted gross deferred tax assets	0	0	0
(Percentage of total adjusted gross deferred tax assets)	N/A	N/A	0%
(b) Net admitted adjusted gross deferred tax assets	0	0	0
(Percentage of total net admitted adjusted gross deferred tax assets)	N/A	N/A	0%
asocis <i>j</i>	1N/A	1N/A	070

B. Unrecognized deferred tax liabilities(1) There are no temporary difference for which deferred tax liabilities are not recognized.

NOTES TO THE FIANCIAL STATEMENTS

C. Current income taxes incurred consist of the following major components:

1	Current tax expense incurred (a) Current year federal tax expense (benefit)- ordinary income	<u>12/31/23</u> 0	<u>12/31/22</u> 0	<u>Change</u> 0
	(b) Current year foreign tax expense (benefit)- ordinary income	0	0	0
	(c) Subtotal	0	0	0
	(d) Current year tax expense (benefit) - net realized capital gains	0	0	0
	(losses) (e) Utilization of operating loss carry forwards	0 0	0 0	0 0
	(f) Tax on Capital Gains	0	0	0
	(g) Federal and foreign income taxes incurred	0	0	0
2	Defense dimensional and the bilities are side of the fall string			
2	Deferred income tax assets and liabilities consist of the following major components:	<u>12/31/23</u>	12/31/22	Change
	Deferred tax assets:	12/31/25	12/31/22	<u>enange</u>
	(a) Ordinary			
	(1) Discounting of unpaid losses and loss adjustment expenses	533,195	488,872	(44,323)
	(2) Unearned premium reserve	1,837,865	1,650,770	(187,095)
	(3) Fixed Assets	0	9,363	9,363
	(4) Compensation and benefits accruals	347,194	331,986	(15,208)
	(5) Receivables nonadmitted	11,382	14,750	3,368
	(6) Net operating loss carryforward	5,085,676	2,003,178	(3,082,498)
	(7) Tax Credit C/F	0	0	0
	 (8) Anticipated Salvage and Subrogation (9) Other (including items (50), a factal and increased) 	295,524	342,260	46,736
	(9) Other (including items <5% of total ordinary tax assets Subtotal	108,051	<u>111,801</u> 4,952,980	3,750
	(b) Statutory Valuation Allowance Adjustment	8,218,8887 (5,046,566)	(3,321,440)	(3,265,907) 1,725,126
	(c) Nonadmitted ordinary deferred tax assets	(5,040,500)	(3,321,440)	1,725,120
	(d) Admitted ordinary deferred tax assets	3,172,321	1,631,540	(1,540,781)
	(e) Capital	5,172,521	1,051,510	(1,510,701)
	(1) Investments	0	0	0
	(2) Unrealized capital losses	0	0	0
	(3) Other (including items <5% of ordinary tax liabilities	0	0	0
	Subtotal	0	0	0
	(f) Statutory Valuation Allowance Adjustment	0	0	0
	(g) Nonadmitted capital deferred tax assets	0	0	0
	(h) Admitted capital deferred tax assets	0	0	0
	(i) Admitted deferred tax assets	3,172,321	1,631,540	(1,540,781)
3	Deferred tax liabilities:			
5	(a) Ordinary			
	(1) Fixed Assets	(7,254)	0	7,254
	(2) Other (including items<5% of ordinary tax liabilities)	(112,277)	(121,929)	(9,652)
	Subtotal	(119,531)	(121,929)	(2,398)
	(b) Capital		(1 - 0 - 1 - 1 - 1	
	(1) Unrealized capital gains	(3,052,790)	(1,509,611)	1,543,179
	(2) Other (including items<5% of ordinary tax liabilities)	0	0	0
	Subtotal	(3,052,790)	(1,509,611)	1,543,179
	(c) Deferred tax liabilities	(3,172,321)	(1,631,540)	1,540,781
	()		(-,,)	
4	Net deferred tax asset (liability)	0	0	0

The valuation allowance adjustment to gross deferred tax assets as of December 31, 2023 and December 31, 2022 was \$5,046,566 and \$3,321,440, respectively. The net change in the total valuation allowance adjustment for the periods ended December 31, 2023 and December 31, 2022 was an increase of \$1,725,126 and an increase of \$3,321,440, respectively. The valuation allowance adjustment for the year ended December 31, 2023 relates to entity's significant pre-tax book and taxable loss along with the entity's projected future pre-tax book losses.

The realization of the deferred tax asset is dependent upon the Company's ability to generate sufficient taxable income in future periods. Based on historical results and the prospects for future current operations, management anticipates that it is more likely than not that future taxable income will not be sufficient for the realization the remaining deferred tax assets.

On August 16, 2022, the Inflation Reduction Act of 2022 (Act) was signed into law. The Act includes a new corporate alternative minimum tax (CAMT). Based upon information available as of December 31, 2023, the Company has determined that it is a nonapplicable reporting entity with respect to CAMT, meaning that it will not be required to calculate or pay CAMT in 2023.

The change in the net deferred income taxes is comprised of the following (this analysis is exclusive of the nonadmitted DTAs as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement);

NOTES TO THE FIANCIAL STATEMENTS

Total deferred tax assets	<u>12/31/23</u> 8,218,887	<u>12/31/22</u> 4,952,980	<u>Change</u> 3,265,907
Total deferred tax liabilities	(3,172,321)	(1,631,540)	(1,540,781)
Net deferred tax assets/liabilities	5,046,566	3,321,440	1,725,126
Statutory valuation allowance adjustment	(5,046,566)	(3,321,440)	(1,725,126)
Net deferred tax assets/liabilities after SVA	0	0	0
Tax effect of unrealized gains/(losses)	(3,052,790)	(1,509,611)	(1,543,179)
Statutory valuation allowance adjustment	0	0	0
Change in net deferred income tax	3,052,790	1,509,611	1,543,179

D. Reconciliation of federal income tax rate to actual effective rate:

The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The significant items causing this difference are as follows;

	Tax effect	Effective
December 31, 2023	<u>21%</u>	Tax Rate
Income before taxes	(3,236,238)	21.0%
Dividends received deduction (net of proration)	(55,770)	0.4%
True-ups	(15,156)	0.1%
Change in valuation allowance	1,734,807	(11.3%)
Change in valuation allowance (tax credits)	(9,682)	0.1%
Change in Non-Admitted Assets	16,097	(0.1%)
Other, net	22,763	(0.2%)
	(1,543,179)	10.0%
Federal and foreign income taxes incurred	0	0.0%
Change in net deferred taxes	(1,543,179)	10.0%
	(1,543,179)	10.0%
December 31, 2022		
Provision at statutory rate	(1,207,106)	21.0%
Dividends received deduction (net of proration)	(49,386)	0.9%
True-ups	(1,565)	(0.0%)
Change in valuation allowance	3,272,837	(56.9%)
Change in valuation allowance (tax credits)	48,603	(0.9%)
Change in Non-Admitted Assets	8,152	(0.1%)
Other, net	19,122	(0.3%)
	2,090,657	(36.4%)
Federal and foreign income taxes incurred	0	0.0%
Change in net deferred taxes	2,090,657	(36.4%)
	2,090,657	(36.4%)

E. Carryforward, recoverable taxes and IRC section 6603 deposits;

On December 22, 2017, H.R. 1, the Tax Cuts and Jobs Bill Act (the Act) was enacted into law. The Act eliminated Corporate Alternative Minimum Taxes and established a method for companies to recover the AMT credit deferred tax asset by offsetting regular tax with the credit or receive a refund from the IRS over the next four years. The Company received a refund of \$403,116 in 2021. The Company expects additional AMT refund of \$148,828 in 2024 from a carryback claim under the CARES Act, which is included as part of income tax receivable.

1. As of December 31, 2023, there are the following net operating loss carryforwards available for tax purposes:

Origination Year	Expiration Year	<u>Amount</u>
2020	2040	3,289,995
2021		0
2022	2042	6,321,572
2023	2043	14,605,938
Total		24,217,506

As of December 31, 2023, there are the following net capital loss carryforwards available for tax purposes:

Origination Year	Expiration Year	Amount
2020		0
2021		0
2022		0
Total		0

2. The amount of Federal income taxes incurred that are available for recoupment in the event of future net losses are:

Year	<u>Ordinary</u>	<u>Capital</u>	<u>Total</u>
2022	0	0	0
2021	0	0	0

- 3. The aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Code are \$ 0.
- F. Consolidated federal income tax return
 - 1. The Company's federal income tax return is consolidated with The Providence Protection Insurance Company.
 - 2. The Company is included in a consolidated federal income tax return with its wholly owned subsidiary Providence Protection Insurance Company. The Company has a written agreement, approved by the Company's Board of Directors, which sets forth the manner in which the total combined federal income tax is allocated to each entity which is a party to the consolidation. Pursuant to this agreement, the Company has the enforceable right to recoup federal income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income taxes.
 - 3. The Company's income tax returns that remain open to examination are for the years 2020 and subsequent.
- 10. Information Concerning Parent, Subsidiaries and Affiliates
 - A) Nature of Relationships
 - The Company is not directly or indirectly owned or controlled by any other entity.
 - B-O) Not applicable.
- 11. Debt

Not applicable.

- 12. Retirement Plans, Deferred Compensation and Other Postretirement Benefit Plans A) Defined Benefit Plan
 - Not applicable.
 - B-D) Not applicable.
 - E) Defined Contribution Plan

The Company maintains a profit sharing and 401(k) savings plan to provide benefits for substantially all employees, including officers, upon retirement or, to the extent of vested amounts, upon termination of employment. The Company's contribution for the plan was \$707,578 and \$729,347 for 2023 and 2022, respectively.

The Company maintains a nonqualified excess benefit plan which is credited for benefits which exceed the government's restrictions on how much pre-tax investment an employee may make. In addition, the Company maintains nonqualified pension plans covering key employees. The Company expensed \$93,500 and \$93,500 in 2023 and 2021, respectively, relating to these plans.

F-I) Not applicable.

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

- A-E) Not applicable.
 - F) No restrictions have been placed upon the unassigned surplus funds and there are no outstanding unpaid advances to surplus as of the reporting periods.
- G-I) Not applicable.
 - J) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$14,710,789.
- K-M) Not applicable.
- 14. Contingencies
 - A) Contingent Commitments Not applicable.
 - B) Assessments

The Company is subject to guaranty fund assessments by the state in which it writes business. The Company has established a guaranty fund accrual which represents management's best estimate based on the information received by the Company as of the current reporting period.

NOTES TO THE FIANCIAL STATEMENTS

- C) Gain Contingencies Not applicable.
- D) Claims Relating to Extra Contractual Obligations & Bad Faith Losses Not applicable.
- E) Product Warranties Not applicable.
- F) Joint and Several Liability Not applicable.
- G) All Other Contingencies

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company.

15. Leases

The Company does not have any material lease obligations at this time.

- 16. Information about Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk Not applicable.
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities Not applicable.
- 18. Gain or Loss to the Insurer from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans Not applicable.
- 19. Direct Premium Written / Produced by Managing General Agents / Third Party Administrators Not applicable.

20. Fair Value Measurements

A) Fair Value Measurements at December 31, 2023.

The Company's valuation techniques are based on observable and unobservable inputs. Observable inputs reflect market data obtained pricing from independent sources based on trades of securities while unobservable inputs reflect the Company's market assumptions.

Level 1 – Observable inputs in the form of quoted process for identical instruments in active markets.

Level 2 – Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active or other inputs that are observable or can be derived from observable market data for substantially the full term of the assets and liabilities.

Level 3 – One or more unobservable inputs that are supported by little or no market activity and are significant to the fair value of the assets and liabilities. Level 3 assets and liabilities include financial instruments whose fair value is determined using internal models, as well as instruments for which the determination of fair value requires significant management judgment or estimation.

<u>Description</u>	Level 1	Level 2	Level 3	Net Asset <u>NAV</u>	Total
Cash and Cash Equivalents MM Mutual Funds	1,731,902	0	0	0	1,731,902
Bonds					
Industrial & Misc	0	0	0	0	0
SVO Identified Funds	0	0	0	0	0
Common Stock					
Industrial & Misc	39,711,834	98,200	20,533	0	39,830,567
Mutual Funds	948,008	0	0	0	948,008
Parent, Sub & Affiliate	0	0	1,173,694	0	1,173,694
Exchange Traded Funds	<u>10,333,323</u>	0	0	0	10,333,323
Total Assets as Fair Value	52,725,067	98,200	1,194,227	0	54,017,494

As of December 31, 2023, the common stocks in level 3 are privately held securities.

B) Not applicable.

C) Fair Value Measurements for All Financial Instruments at December 31, 2023.

Decemination	Aggregate	Admitted	T1 1	T1 2	T1 2	NT A X7
Description	Fair Value	Assets	Level 1	Level 2	Level 3	<u>NAV</u>
Bonds						
Governments	2,757,629	2,809,429	608,125	2,149,504	0	0
Industrial & Misc	61,716,179	65,265,416	0	61,716,179	0	0
Political Subdivisions	2,035,267	2,391,622	0	2,035,267	0	0
Special Revenue	23,405,901	26,253,468	0	23,405,901	0	0
States Terr & Poss	1,762,585	1,855,015	0	1,762,585	0	0
SVO Identified Funds	0	0	0	0	0	0
Total Bonds	91,677,561	98,574,950	608,125	91,069,436	0	0
Common Stock						
Industrial & Misc	39,830,566		39,711,833	98,200	20,533	0
Mutual Funds	948,008	948,008	948,008	0	0	0
Parent, Sub & Affiliate	1,173,694	1,173,694	0	0	1,173,694	0
Exchange Traded Funds	s <u>10,333,323</u>	10,333,323	<u>10,333,323</u>	0	0	0
Total Common Stock	52,285,591	52,178,591	50,993,164	98,200	1,194,227	
Short Term						
Special Revenue	0	0	0	0	0	0
Aggregate	Admitted			- 14		
Description	<u>Fair Value</u>	Assets	Level 1	Level 2	Level 3	<u>NAV</u>
Cash Equivalents						
Cash	1,374,216	1,374,216	1,374,216	0	0	0
Other MM Fund	1,731,902	1,731,902	1,731,902		0	0
Total Cash Equivalents	3,106,118	3,106,118	3,106,118	0	0	0
Total Cash Equivalents	5,100,110	5,100,110	5,100,118	0	0	0
Total Assets	147,069,270 1	153,859,659	54,707,407	91,167,636	1,194,227	0

- 21. Other Items
 - A) Unusual or Infrequent Items

Not applicable.

- B) Troubled Debt Restructuring: Debtors Not applicable.
- C) Other Disclosures

Assets in the amount of \$398,126 and \$400,037 at December 31, 2023 and 2021, respectively, were on deposit with government authorities as required by law.

- D) Business Interruption Insurance Recoveries Not applicable.
- E) State Transferable and Non-Transferable Tax Credits Not applicable.
- F) Subprime Mortgage Related Risk Exposure

The Company does not engage in direct subprime residential mortgage lending. The Company's exposure to subprime is limited to investments within the fixed income investment portfolio which contains securities collateralized by mortgages that have characteristics of subprime lending. Such characteristics include an interest rate above prime to borrowers who do not qualify for prime rate loans, borrowers with low credit ratings (FICO scores), unconventionally high initial loan-to-value ratios, and borrowers with less than conventional documentation of their income and / or net assets.

The Company minimizes risk exposure by holding securities which carry higher credit ratings and by monitoring the underlying collateral performance on an ongoing basis.

The chart below summarizes the Actual Cost, Book Adjusted Carrying Value and the Fair Value of subprime mortgage related risk exposure.

Cost	Book Adjusted Carrying Value		Fair Value
\$0	\$0	\$0	

- G) Insurance –Linked Securities (ILS) Contracts Not applicable.
- H) The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

Not applicable.

22. Events Subsequent

Not applicable.

- 23. Reinsurance
 - A) Unsecured Reinsurance Recoverables

The Company does not have any unsecured aggregate recoverables for losses; paid and unpaid including IBNR, loss adjustment expenses, and unearned premium that exceeds 3% of the Company's policyholder surplus.

B) Reinsurance Recoverable in Dispute

There are no individual reinsurance recoverables on paid and unpaid (including IBNR) losses in dispute by reason of notification, arbitration or litigation with any company which exceeds 5% of the Company's policyholder surplus or aggregate reinsurance recoverables on paid and unpaid (including IBNR) losses in dispute which exceed 10% of the Company's policyholder surplus.

C) Reinsurance Assumed and Ceded

			SUME				DED	_		_		
	R	EIN	SURAN	NCE		REINSU	JRANCE	3		Ν	JET	
	Premiu	m	Comn	nission	Pren	nium	Comm	ission	Pre	mium		
Commis	ssion											
	Reserv	e	Equ	uity	Res	erve	Equ	uity	Re	serve		Equity
	(1)		(2	2)	(3	3)	(4	-)	((5)		(6)
Affiliates	\$	0	\$	0	\$	0	\$	0	\$	0	\$	0
All Other	245,90)4	48,	370	2,38	80,749	191	,111	(2,13	4,845)	(14	2,741)
Total	245,90)4	48,	370	2,38	80,749	191	,111	(2,13	4,845)	(14	2,741)

Direct Unearned Premium Reserve \$43,758,686

D-K) Not applicable.

- 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination The Company was not involved in any retrospectively rated contracts during the statement periods.
- 25. Change in Incurred Losses and Loss Adjustment Expenses

The estimated cost of loss and loss adjustment expenses attributable to insured events of prior years increased by \$2,139,000 during 2023, compared to a decrease of \$2,727,000 during 2022. The increase / decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

- 26. Intercompany Pooling Arrangements Not applicable.
- 27. Structured Settlements

The Company has not purchased any annuities under which the claimant is payee but for which the Company is contingently liable.

- 28. Health Care Receivables Not applicable.
- 29. Participating Policies Not applicable.
- 30. Premium Deficiency Reserves Not applicable.
- 31. High Deductibles Not applicable.
- 32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses Not applicable.
- 33. Asbestos/Environmental Reserves The Company has minor exposure to asbestos and / or environmental claims.
- 34. Subscriber Savings Accounts Not applicable.
- 35. Multiple Peril Crop Insurance Not applicable.

36. Financial Guaranty Insurance Not applicable.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROVIDENCE MUTUAL FIRE INSURANCE COMPANY GENERAL INTERROGATORIES PART 1 - COMMON INTERROGATORIES

GENERAL

		GENERAL					
1.1	Is the reporting entity a member of an Insurance Holdir which is an insurer?	ng Company System consisting	of two or more affiliated	persons, one	or more of	Yes []	K] No []
12	If yes, complete Schedule Y, Parts 1, 1A, 2 and 3. If yes, did the reporting entity register and file with its dom	niciliary State Insurance Commi	ssioner Director or Superi	ntendent or wi	th such		
1.2	regulatory official of the state of domicile of the principal	al insurer in the Holding Comp	any System, a registration	statement pr	oviding		
	disclosure substantially similar to the standards adopted Insurance Holding Company System Regulatory Act ar				pject to		
	standards and disclosure requirements substantially simil		•] N/A []
1.3 1.4	State Regulating? Rhode Island Is the reporting entity publicly traded or a member of a pu] No [X]
1.5	If the response to 1.4 is yes, provide the CIK (Central Inde		for the entity/group.				
2.1	Has any change been made during the year of this state	ement in the charter, by-laws, a	rticles of incorporation, or	deed of settle			
2.2	reporting entity? If yes, date of change:] No [X]
3.1	State as of what date the latest financial examination of th	ne reporting entity was made or	is being made.				12/31/2020
3.2	State the as of date that the latest financial examination r	eport became available from ei	ther the state of domicile o	r the reporting	entity. This		
3.3	date should be the date of the examined balance sheet at State as of what date the latest financial examination repo	•	•	or the state of			12/31/2020
5.5	the reporting entity. This is the release date or completion				lance sheet		
2.4	date).						03/07/2022
3.4 3.5	By what department or departments? Rhode Island Have all financial statement adjustments within the late						
0.0	statement filed with Departments?			ouseequein ii	Yes] N/A [X]
3.6	Have all of the recommendations within the latest financia	al examination report been com	blied with?		Yes	[X]No[] N/A []
4.1	During the period covered by this statement, did any a	gent, broker, sales representa	ive, non-affiliated sales/se	ervice organiza	ation or any		
	combination thereof under common control (other than	salaried employees of the re	porting entity) receive cree				
	control a substantial part (more than 20 percent of any m		ales of new business?			Yes [] No [X]
		4.12 r	enewals?			Yes [] No [X]
4.2	During the period covered by this statement, did any s affiliate, receive credit or commissions for or control a s						
	direct premiums) of:	ubstantial part (more than 20	bercent of any major line		easured on		
			ales of new business?			Yes [] No [X]
5.1	Here the reporting optity been a party to a margar or concern		enewals?			Yes [] No [X]] No [X]
5.1	Has the reporting entity been a party to a merger or conso If yes, complete and file the merger history data file with the	e ,	ed by this statement?			165 [] NO [X]
5.2	If yes, provide the name of the entity, NAIC company co	de, and state of domicile (use	two letter state abbreviation	on) for any en	tity that has		
	ceased to exist as a result of the merger or consolidation.						
			2	3			
	Name o		NAIC Company Code				
61	Has the reporting entity had any Certificates of Authority,	licenses or registrations (inclu	ding corporate registration	n. if applicable) suspended		
0.1	or revoked by any governmental entity during the reportin	g period?	5 1 5	<i>,</i>	/ 1	Yes [] No [X]
6.2	If yes, give full information						
6.2 7.1	If yes, give full information Does any foreign (non-United States) person or entity dire					Yes [Yes [] No[X]] No[X]
6.2 7.1	If yes, give full information						
6.2 7.1	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per	ectly or indirectly control 10% or erson(s) or entity(s); or if the e	more of the reporting entit	y? rocal, the nati	onality of its	Yes [] No [X]
6.2 7.1	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control	ectly or indirectly control 10% or erson(s) or entity(s); or if the e	more of the reporting entit	y? rocal, the nati	onality of its	Yes [] No [X]
6.2 7.1	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per manager or attorney-in-fact and identify in-fact).	ectly or indirectly control 10% or erson(s) or entity(s); or if the e	more of the reporting entit ntity is a mutual or recipi dual, corporation, governr	y? rocal, the nati	onality of its	Yes [] No [X]
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6.2 7.1	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per manager or attorney-in-fact and identify in-fact).	ectly or indirectly control 10% or erson(s) or entity(s); or if the e	more of the reporting entit ntity is a mutual or recipi dual, corporation, governr	y? rocal, the nati nent, manage	onality of its	Yes [] No [X]
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6.2 7.1	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per manager or attorney-in-fact and identify in-fact).	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv	more of the reporting entit mity is a mutual or recipi dual, corporation, governr 2 Type of Entity	y? rocal, the nati nent, manage	onality of its	Yes [] No [X]
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6.2 7.1	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per manager or attorney-in-fact and identify in-fact).	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv	more of the reporting entit mity is a mutual or recipi dual, corporation, governr 2 Type of Entity	y? rocal, the nati nent, manage	onality of its	Yes [] No [X]
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6.2 7.1 7.2	If yes, give full information Does any foreign (non-United States) person or entity directly fives, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign permanager or attorney-in-fact and identify in-fact).	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv	more of the reporting entit intity is a mutual or recipi dual, corporation, governr 2 Type of Entity	y? rocal, the nati nent, manage	onality of its r or attorney	Yes [] No [X]
6.2 7.1 7.2 8.1 8.2 8.3	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality Is the company a subsidiary of a depository institution hol If response to 8.1 is yes, please identify the name of the D Is the company affiliated with one or more banks, thrifts of	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv	more of the reporting entit ntity is a mutual or recipi dual, corporation, governr 2 Type of Entity	y? rocal, the nati nent, manage	onality of its r or attorney	Yes [] No [X]
6.2 7.1 7.2 8.1 8.2	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality Is the company a subsidiary of a depository institution hol If response to 8.1 is yes, please identify the name of the D	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv	more of the reporting entit ntity is a mutual or recip dual, corporation, governr 2 Type of Entity C itself, regulated by the Fe	y? rocal, the nati nent, manage , , ederal Reserve	onality of its r or attorney	Yes [] No [X] 0.0 %] No [X]
6.2 7.1 7.2 8.1 8.2 8.3	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality Is the company a subsidiary of a depository institution hol If response to 8.1 is yes, please identify the name of the D Is the company affiliated with one or more banks, thrifts on If response to 8.3 is yes, please provide the names and lo financial regulatory services agency [i.e. the Federal Ress Federal Deposit Insurance Corporation (FDIC) and the Se	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv	more of the reporting entit intity is a mutual or recipi dual, corporation, governr 2 Type of Entity C itself, regulated by the Fe ain office) of any affiliates r	y? rocal, the nati nent, manage , , ederal Reserve regulated by a ency (OCC), t	onality of its r or attorney	Yes [] No [X] D.O %] No [X]
6.2 7.1 7.2 8.1 8.2 8.3	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality Is the company a subsidiary of a depository institution hol If response to 8.1 is yes, please identify the name of the D Is the company affiliated with one or more banks, thrifts on If response to 8.3 is yes, please provide the names and lo financial regulatory services agency [i.e. the Federal Reso Federal Deposit Insurance Corporation (FDIC) and the Se regulator.	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv	more of the reporting entit ntity is a mutual or recipi dual, corporation, governr 2 Type of Entity C itself, regulated by the Fe ain office) of any affiliates r the Comptroller of the Curr (SEC)] and identify the aff	y? rocal, the nati nent, manage , , , , , , , , , , , , , , , , , , ,	onality of its r or attorney Board? federal he y federal	Yes [- Yes [Yes [] No [X] D.O %] No [X]
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6.2 7.1 7.2 8.1 8.2 8.3	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality Is the company a subsidiary of a depository institution hol If response to 8.1 is yes, please identify the name of the D Is the company affiliated with one or more banks, thrifts on If response to 8.3 is yes, please provide the names and lo financial regulatory services agency [i.e. the Federal Reso Federal Deposit Insurance Corporation (FDIC) and the Se regulator.	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv	more of the reporting entit ntity is a mutual or recipi dual, corporation, governr 2 Type of Entity C itself, regulated by the Fe ain office) of any affiliates r the Comptroller of the Curr (SEC)] and identify the aff	y? rocal, the nati nent, manage , , , , , , , , , , , , , , , , , , ,	onality of its r or attorney Board? federal he y federal	Yes [- Yes [Yes [] No [X] 0.0 %] No [X]
6.2 7.1 7.2 8.1 8.2 8.3	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality Is the company a subsidiary of a depository institution hol If response to 8.1 is yes, please identify the name of the D Is the company affiliated with one or more banks, thrifts on If response to 8.3 is yes, please provide the names and lo financial regulatory services agency [i.e. the Federal Ress Federal Deposit Insurance Corporation (FDIC) and the Seregulator. 1	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv ding company (DIHC) or a DIHC DIHC. r securities firms? pocations (city and state of the m erve Board (FRB), the Office of ecurities Exchange Commission	more of the reporting entit intity is a mutual or recipi dual, corporation, governing 2 Type of Entity C itself, regulated by the Fe ain office) of any affiliates r the Comptroller of the Curr (SEC)] and identify the aff	y? rocal, the nati nent, manage y ederal Reserve regulated by a rency (OCC), t filiate's primar	onality of its r or attorney Beard? federal he y federal	Yes [Yes [Yes [6] No [X] 0.0 %] No [X]
 6.2 7.1 7.2 8.1 8.2 8.3 8.4 	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality Is the company a subsidiary of a depository institution hol If response to 8.1 is yes, please identify the name of the D Is the company affiliated with one or more banks, thrifts on If response to 8.3 is yes, please provide the names and loc financial regulatory services agency [i.e. the Federal Ress Federal Deposit Insurance Corporation (FDIC) and the Seregulator. 1 Affiliate Name	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv ding company (DIHC) or a DIHC DIHC. r securities firms? occations (city and state of the m erve Board (FRB), the Office of ecurities Exchange Commission 2 Location (City, State)	more of the reporting entit intity is a mutual or recipindual, corporation, governmindual, governmindual, governmindual, governmindual, gover	y? rocal, the nati nent, manage , ederal Reserve regulated by a rency (OCC), t filiate's primar	onality of its r or attorney	Yes [Yes [Yes [6] No [X] 0.0 %] No [X]
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 6.2 7.1 7.2 8.1 8.2 8.3 8.4 8.5 8.6 9. 	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality Is the company a subsidiary of a depository institution hol If response to 8.1 is yes, please identify the name of the D Is the company affiliated with one or more banks, thrifts on If response to 8.3 is yes, please provide the names and lo financial regulatory services agency [i.e. the Federal Reserve Federal Deposit Insurance Corporation (FDIC) and the Ser regulator. 1 Sthe reporting entity a depository institution holding compo of Federal Reserve System or a subsidiary of the deposit If response to 8.5 is no, is the reporting entity a company to theFederal Reserve Board's capital rule? What is the name and address of the independent certifie KPMG LLP, One Financial Plaza, Suite 2300, Providence Has the insurer been granted any exemptions to the proh	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv ding company (DIHC) or a DIHC DIHC. r securities firms? ocations (city and state of the m erve Board (FRB), the Office of ecurities Exchange Commission 2 2 Location (City, State) pany with significant insurance ory institution holding company' or subsidiary of a company that d public accountant or accounti RI, 02903 ibited non-audit services provid	more of the reporting entity intity is a mutual or recipindual, corporation, governmindual, governmindual, governmindual, governmindual, corporation, governmindual, governmindual, corporation, governmindual, governmind	y? rocal, the nati nent, manage , ederal Reserve regulated by a ency (OCC), t filiate's primar 4 OCC the Board of Go subject the annual au dent public ac	onality of its r or attorney Beard? federal he y federal 5 FDIC vernors Yes udit?	Yes [Yes [Yes [G SEC Yes [] No [X] 0.0 %] No [X]] No [X]] No [X]
 6.2 7.1 7.2 8.1 8.2 8.3 8.4 8.5 8.6 9. 10.1 	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality 	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv ding company (DIHC) or a DIHO DIHC. r securities firms? coations (city and state of the m erve Board (FRB), the Office of ecurities Exchange Commission 2 Location (City, State) 2 pany with significant insurance ory institution holding company' or subsidiary of a company that d public accountant or accounti RI, 02903 ibited non-audit services provid ncial Reporting Model Regulati	more of the reporting entity intity is a mutual or recipi dual, corporation, governing 2 Type of Entity 2 C itself, regulated by the Fe ain office) of any affiliates r the Comptroller of the Curr (SEC)] and identify the aff 3 FRB 0 perations as defined by th has otherwise been made ing firm retained to conduct	y? rocal, the nati nent, manage , ederal Reserve regulated by a ency (OCC), t filiate's primar 4 OCC the Board of Go subject the annual au dent public ac	onality of its r or attorney Beard? federal he y federal 5 FDIC vernors Yes udit?	Yes [Yes [Yes [G SEC Yes [] No [X] 0.0 %] No [X]] No [X]] No [X]
 6.2 7.1 7.2 8.1 8.2 8.3 8.4 8.5 8.6 9. 10.1 	If yes, give full information	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv ding company (DIHC) or a DIHO DIHC. r securities firms? coations (city and state of the m erve Board (FRB), the Office of ecurities Exchange Commission 2 Location (City, State) 2 pany with significant insurance ory institution holding company' or subsidiary of a company that d public accountant or accounti RI, 02903 ibited non-audit services provid ncial Reporting Model Regulati	more of the reporting entity intity is a mutual or recipi dual, corporation, governing 2 Type of Entity 2 C itself, regulated by the Fe ain office) of any affiliates r the Comptroller of the Curr (SEC)] and identify the aff 3 FRB 0 perations as defined by th has otherwise been made ing firm retained to conduct	y? rocal, the nati nent, manage , ederal Reserve regulated by a ency (OCC), t filiate's primar 4 OCC the Board of Go subject the annual au dent public ac	onality of its r or attorney Beard? federal he y federal 5 FDIC vernors Yes udit?	Yes [Yes [Yes [6 SEC Yes [] No [] No [X] 0.0 %] No [X]] No [X]] No [X]] No [X]] N/A [X]
6.2 7.1 7.2 8.1 8.2 8.3 8.4 8.5 8.6 9. 10.1 10.2	If yes, give full information Does any foreign (non-United States) person or entity dire If yes, 7.21 State the percentage of foreign control 7.22 State the nationality(s) of the foreign per- manager or attorney-in-fact and identify in-fact). 1 Nationality 	ectly or indirectly control 10% or erson(s) or entity(s); or if the e the type of entity(s) (e.g., indiv ding company (DIHC) or a DIHO DIHC. r securities firms? ocations (city and state of the m erve Board (FRB), the Office of ecurities Exchange Commission 2 Location (City, State) pany with significant insurance or or subsidiary of a company that d public accountant or accounti RI, 02903 ibited non-audit services provid ncial Reporting Model Regulati to this exemption: o the other requirements of th	more of the reporting entity intity is a mutual or recipindual, corporation, governmindual, governmindual, corporation, governmindual, corporation, governmindual,	y? rocal, the nati nent, manage , , ederal Reserve regulated by a rency (OCC), t filiate's primary 4 OCC a subject t the annual au dent public ac ubstantially sin	onality of its r or attorney	Yes [Yes [Yes [6 SEC Yes [] No [] No [X] 0.0 %] No [X]] No [X]] No [X]] No [X]] N/A [X]

PART 1 - COMMON INTERROGATORIES

10.4	If the response to 10.3 is yes, provide inform	nation related to this exemption:							
	Has the reporting entity established an Aud If the response to 10.5 is no or n/a, please		miciliary state in	surance laws?	Yes [X] No [] N	N/A []
	What is the name, address and affiliatio consulting firm) of the individual providing the I. Sterling, FCAS, MAAA, KPMG LLP, Thr Does the reporting entity own any securities	ne statement of áctuarial opinion/certific ee Radnor Corporate Center, Suite 105 s of a real estate holding company or ot	cation? 5, 100 Matsonfor therwise hold rea 12.11 Name of r 12.12 Number of	d Road, Radnor, PA 19087 al estate indirectly? real estate holding company of parcels involved	 	Yes [0
12.2	If yes, provide explanation		12.13 Total bool	k/adjusted carrying value	\$				
13. 13.1	FOR UNITED STATES BRANCHES OF AL What changes have been made during the		ne United States	trustees of the reporting entity?					
13.3 13.4 14.1	Does this statement contain all business tra Have there been any changes made to any If answer to (13.3) is yes, has the domiciliar Are the senior officers (principal executive similar functions) of the reporting entity sub a. Honest and ethical conduct, including the relationships; b. Full, fair, accurate, timely and understand c. Compliance with applicable governmentate d. The prompt internal reporting of violation e. Accountability for adherence to the code. If the response to 14.1 is no, please explain	of the trust indentures during the year's y or entry state approved the changes? officer, principal financial officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, principal officer, princip	? ipal accounting the following sta int conflicts of ir required to be fil	officer or controller, or persons perforr andards? tterest between personal and professi led by the reporting entity;	0	Yes [Yes [] No [Yes []] N	No [N/A [x]]]
	Has the code of ethics for senior managers If the response to 14.2 is yes, provide infor					Yes []	No [X]
	Have any provisions of the code of ethics b If the response to 14.3 is yes, provide the n		cers?			Yes []	No [X]
	Is the reporting entity the beneficiary of a Le SVO Bank List? If the response to 15.1 is yes, indicate the A bank of the Letter of Credit and describe the	American Bankers Association (ABA) R	outing Number a	and the name of the issuing or confirmi		Yes []	No [X]
	1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name		3 s That Can Trigger the Letter of Credit		4			
		BOARD OF D		S					
16.	Is the purchase or sale of all investments thereof?	of the reporting entity passed upon ei	ther by the boar	rd of directors or a subordinate comm	ttee	Yes [X]	No []
17.	Does the reporting entity keep a complete thereof?	e permanent record of the proceedings	s of its board of	f directors and all subordinate commit	iees	Yes [X]	No [1
18.	Has the reporting entity an established pro the part of any of its officers, directors, tru such person?					Yes []]
10	Has this statement been prepared using a t	FINANCIAL		acialas (o.g. Constally Assented					
	Accounting Principles)? Total amount loaned during the year (inclus			20.11 To directors or other officers 20.12 To stockholders not officers 20.13 Trustees, supreme or grand (Fraternal only)	\$	Yes [
20.2	Total amount of loans outstanding at the er policy loans):	d of year (inclusive of Separate Accour	nts, exclusive of	· · · · ·	\$ \$				
21.1	Were any assets reported in this statement obligation being reported in the statement?	subject to a contractual obligation to tra	ansfer to anothe			Yes [
21.2	If yes, state the amount thereof at December	•	21.21 Rented fro 21.22 Borrowed 21.23 Leased fro	from others	\$				
22.1	Does this statement include payments for a		21.24 Other I Statement Inst	<i>ructions</i> other than guaranty fund or	\$				
	guaranty association assessments? If answer is yes:		22.21 Amount p	paid as losses or risk adjustment paid as expenses	\$	Yes [
23.1	Does the reporting entity report any amount		ates on Page 2	•		Yes []	No [X]
23.2 24.1	If yes, indicate any amounts receivable from Does the insurer utilize third parties to pay a full within 90 days?			the third parties are not settled in	\$	Yes [
24.2	If the response to 24.1 is yes, identify the th	ne response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.							

1 2 Name of Third-Party Is the Third-Party Agent a Related Party (Yes/No)

PART 1 - COMMON INTERROGATORIES

INVESTMENT

25.01	Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in		
	the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)	Yes [X]	No
25.02	If no, give full and complete information, relating thereto		

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

25.04	For the reporting entity's securities lending program Capital Instructions.	report amount of collateral for conforming programs as outlined in the Risk-Based و	à)
25.05	For the reporting entity's securities lending program,	report amount of collateral for other programs.	3			()
		(domestic securities) and 105% (foreign securities) from the counterparty at the	Yes [] [No [] NA	[X]
25.07	Does the reporting entity non-admit when the collate	ral received from the counterparty falls below 100%?	Yes [1 [No [] NA	[X]
25.08	Does the reporting entity or the reporting entity's sec conduct securities lending?	urities lending agent utilize the Master Securities Lending Agreement (MSLA) to	Yes [] [No [] NA	[X]
25.09		state the amount of the following as of December 31 of the current year: eral assets reported on Schedule DL, Parts 1 and 2	\$				0
	25.092 Total book/adjusted carrying value	of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$				0
	25.093 Total payable for securities lending	g reported on the liability page	\$				0
26.1 26.2				Ŷ	/es [] N	o [X]
	26.2 ⁻	Subject to repurchase agreements	\$				
	26.22	2 Subject to reverse repurchase agreements	\$				
	26.23	Subject to dollar repurchase agreements	\$				
	26.24	Subject to reverse dollar repurchase agreements	\$				
	26.25	Placed under option agreements	\$				
	26.26	E Letter stock or securities restricted as to sale – excluding FHLB Capital Stock	\$				
	26.27	′ FHLB Capital Stock	\$				
	26.28	On deposit with states	\$				
	26.29	On deposit with other regulatory bodies	\$				
	26.30	Pledged as collateral – excluding collateral pledged to an FHLB	\$				

20.31	Pledged as collateral to FHLB – including assets backing funding agreements	Ф
26.32	Other	\$

26.3 For category (26.26) provide the following:

	1 Nature of Restriction	2 Description	3 Amou	nt	
		······			
27.1	Does the reporting entity have any hedging transactions reported on S	Schedule DB?	Yes	[] No [X]
27.2	If yes, has a comprehensive description of the hedging program beer If no, attach a description with this statement.	made available to the domiciliary state?	Yes [] No	[] N/A [X]
27.3	27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES Of Does the reporting entity utilize derivatives to hedge variable annuity rate sensitivity? If the response to 27.3 is YES, does the reporting entity utilize: 27.41 Special account 27.42 Permitted account 27.43 Other accounting	guarantees subject to fluctuations as a result of interest nting provision of SSAP No. 108 punting practice	Ye Ye Ye	s [] No s [] No	[X] [] [] []
27.5	 21 reserves and provides the impact of the hedging strate Financial Officer Certification has been obtained which in 	e domiciliary state.	t. fined	s[] No	[]
	Were any preferred stocks or bonds owned as of December 31 of the the issuer, convertible into equity? If yes, state the amount thereof at December 31 of the current year.	e current year mandatorily convertible into equity, or, at the option of	Yes \$	[] No [X]
29.	Excluding items in Schedule E – Part 3 – Special Deposits, real estate entity's offices, vaults or safety deposit boxes, were all stocks, bonds pursuant to a custodial agreement with a qualified bank or trust comp Considerations, F. Outsourcing of Critical Functions, Custodial or Saf Handbook?	and other securities, owned throughout the current year held any in accordance with Section 1, III – General Examination	Yes	[X] No []

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

1 Name of Custodian(s)	2 Custodian's Address
US Bank	1025 Connecticut Ave NW, Suite 517, Washington, DC 20036
	800 Boylston Street, 6th Floor, Boston MA 02199

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

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

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?29.04 If yes, give full and complete information relating thereto:

Yes [] No [X]

[]

PART 1 - COMMON INTERROGATORIES

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

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

1	2
Name of Firm or Individual	Affiliation
New England Asset Management	U
Northern Trust	U

29.0597 For those firms/individuals listed in the table for Question 29.05, 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?

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration	Name of Firm or	Legal Entity		Investment Management
Depository Number	Individual	Identifier (LEI)	Registered With	Agreement (IMA) Filed
105900	New England Asset Management	KUR85E5PS4GQFZTFC130	SEC FILE # 801-22445	NO
206890	Northern Trust	BEL4B8X7EHJU845Y2N39	SEC FILE # 801-33358	NO

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

30.2 If yes, complete the following schedule:

1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
30.2001 33939L-82-9	FLEXSHARES INT'L QUALITY DIVIDEND DYNAMIC INDEX	
30.2002 316146-18-2	FIDELITY SML CAP INDX-INS PR FSSNX	
30.2003 316146-26-5	FIDELITY MID CAP INDX-INS PR FSMDX	
30.2004 47103C-77-9	JANUS HNDRSN ENTERPRISE-S JGRTX	
30.2005 55273H-54-4	MFS RESEARCH INTERNAT-R3 MRSHX	124.721
		,
30.2999 TOTAL	10,580,147	

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

1	2	3 Amount of Mutual Fund's	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	Date of Valuation
FLEXSHARES INT'L QUALITY DIVIDEND DYNAMIC INDEX.	ASML Holding	4,310	
FLEXSHARES INT'L QUALITY DIVIDEND DYNAMIC INDEX	BHP		
FLEXSHARES INT'L QUALITY DIVIDEND DYNAMIC INDEX FLEXSHARES INT'L QUALITY DIVIDEND	L'OREAL SA Common Stock		
DYNAMIC INDEX	Royal Bank of Canada	1,510	
DYNAMIC INDEX	CIE Financiere Richemont	1,460	
FIDELITY SML CAP INDX-INS PR	Super Micro Computer		
FSSNX FIDELITY SML CAP INDX-INS PR	Matador Resources		
FSSNX			
FSSNX			
FSSNX FIDELITY MID CAP INDX-INS PR			
FSMDX FIDELITY MID CAP INDX-INS PR			
FSMDX FIDELITY MID CAP INDX-INS PR			
FSMDX FIDELITY MID CAP INDX-INS PR			
FSMDX FIDELITY MID CAP INDX-INS PR	-		
FSMDX JANUS HNDRSN ENTERPRISE-S JGRTX			
JANUS HNDRSN ENTERPRISE-S JGRTX			
JANUS HNDRSN ENTERPRISE-S JGRTX			
JANUS HNDRSN ENTERPRISE-S JGRTX			
JANUS HNDRSN ENTERPRISE-S JGRTX			
MFS RESEARCH INTERNAT-R3 MRSHX	Linde PLC		
MFS RESEARCH INTERNAT-R3 MRSHX			
MFS RESEARCH INTERNAT-R3 MRSHX	Schneider Electric S.E		
MFS RESEARCH INTERNAT-R3 MRSHX	Nestle SA		
MFS RESEARCH INTERNAT-R3 MRSHX	Roche Holding AG		

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

Γ		1	2	3
				Excess of Statement
				over Fair Value (-),
		Statement (Admitted)		or Fair Value
		Value	Fair Value	over Statement (+)
Γ	31.1 Bonds			

Yes [X] No []

Yes [X] No []

Yes [X] No []

PART 1 - COMMON INTERROGATORIES

			PART 1 - CC	DMMON IN	TERROGATORIES			
	31.2 Preferred St 31.3 Totals	ocks			91,677,561	(6,897,38	0	
.4		or methods utili	zed in determining the fair value		• . , • , • • • .	(0,000,000	-/	
۰1	Was the rate used to a	alculate fair val	ue determined by a broker or c	ustodian for any	of the securities in Schedule	02	Yes [] No [X
			reporting entity have a copy of	-] 10 [1
	for all brokers or custo						Yes [] No [
2.3	If the answer to 32.2 i value for Schedule D:	s no, describe t	he reporting entity's process fo	or determining a	reliable pricing source for p	urposes of disclosure of	fair	
	Have all the filing required in the filing re	irements of the	Purposes and Procedures Mar	nual of the NAIC	Investment Analysis Office t	been followed?	Yes []	X] No[
34.	a.Documentation n FE or PL security b.Issuer or obligor	ecessary to per is not available is current on all in actual expect	contracted interest and principa ation of ultimate payment of all	security does not al payments.	exist or an NAIC CRP credi		Yes [] No [
5.	 a. The security was b. The reporting en c. The NAIC Desig which is shown or regulators. d. The reporting en 	s purchased pric tity is holding can nation was deriv on a current priv tity is not permi	te reporting entity is certifying the or to January 1, 2018. apital commensurate with the N red from the credit rating assign ate letter rating held by the insu- ted to share this credit rating of the DLOL countries?	AIC Designatior ned by an NAIC urer and availab	reported for the security. CRP in its legal capacity as a le for examination by state in	an NRSRO	Yes [1 No [
	Has the reporting entit						163 [JNO
36.	 By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund: a. The shares were purchased prior to January 1, 2019. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019. d. The fund only or predominantly holds bonds in its portfolio. e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO. f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed. Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?] No [
7.	(identified through a c a. The investment b. If the investment renewal complet c. If the investment of the transactic d. Short-term and a criteria in 37.a -	bde (%) in those s a liquid asset is with a nonre ed at the discre is with a related n for which doc cash equivalent 37.c are reporte	equivalent investments with co provide investment schedules), the rep that can be terminated by the rep ated party or nonaffiliated then tion of all involved parties. If party or affiliate, then the repo- umentation is available for regu- investments that have been rer d as long-term investments.	porting entity is of eporting entity of it reflects an arr orting entity has lator review. newed/rolled from	certifying to the following: n the current maturity date. ns-length transaction with completed robust re-underwr n the prior period that do not	iting meet the	Yes [] No	[] NA [
1	Does the reporting enti	-				u:	Yes [] No [
			schedule are they reported?				100 [][
	•		irectly accept cryptocurrencies				Yes [] No [
.2	If the response to 39.1	is yes, are the o	ryptocurrencies held directly or	r are they immed	liately converted to U.S. dolla	ars?		
			39.21 Held directly				Yes [] No [
			39.22 Immediately c	onverted to U.S.	dollars		Yes [] No [
.3	If the response to 38.1	or 39.1 is yes, l	st all cryptocurrencies accepted	d for payments o	of premiums or that are held	directly.		
		1 Name of Crypto	currency		2 Immediately Converted to Directly Held, or Bot		3 Accepted for P of Premiu	· ·
l				l				
	List the name of the	organization a	ions, service organizations and nd the amount paid if any suc nd statistical or rating bureaus o	ch payment rep	resented 25% or more of t	\$ he total payments to tra	ade	
				1 Ime		2 Amount Paid]	
		INSURANCE SER				\$		
	Amount of payments f List the name of the fi the period covered by	rm and the amo	es, if any? unt paid if any such payment re	epresented 25%	or more of the total paymen	ts for legal expenses dur		
				1		2]	
		LOCKE LORD	Na	me		Amount Paid	-	
		L					-	
	List the name of the fi	m and the amo	in connection with matters befor unt paid if any such payment re officers, or departments of gov	epresented 25%	or more of the total payment	expenditures in connect		
				1		2]	
			Na	me		Amount Paid	-	
						¢	-	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROVIDENCE MUTUAL FIRE INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X] If yes, indicate premium earned on U. S. business only. 1.2 \$ 0 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? 1.3 \$ 1.31 Reason for excluding 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$. 1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$. 0 1.6 Individual policies: Most current three years: 1.61 Total premium earned \$ 0 0 1.62 Total incurred claims \$ 1.63 Number of covered lives 0 All years prior to most current three years: 0 1.64 Total premium earned \$.... 1.65 Total incurred claims \$ 0 1.66 Number of covered lives 0 1.7 Group policies: Most current three years: ٥ 1.71 Total premium earned \$. 1.72 Total incurred claims 0 \$ 1.73 Number of covered lives ...0 All years prior to most current three years: 0 1.74 Total premium earned \$..... 0 1.75 Total incurred claims \$..... 0 1.76 Number of covered lives 2. Health Test: 1 2 Prior Year Current Year0 2.1 Premium Numerator \$ \$ 2.2 Premium Denominator .67,991,296 .65,650,695 \$ \$0.0000.000 23 Premium Ratio (2.1/2.2) Reserve Numerator 0 2.4 \$ \$ 2.5 Reserve Denominator \$ \$0.00 Reserve Ratio (2.4/2.5) 2.6 3.1 Did the reporting entity issue participating policies during the calendar year? ... Yes [] No [X] 3.2 If yes, provide the amount of premium written for participating and/or no-participating policies during the calendar year: 3.21 Participating policies..... \$... 3.22 Non-participating policies..... \$.... 4. For Mutual reporting entities and Reciprocal Exchanges only: 4.1 Does the reporting entity issue assessable policies?...] No [X] Yes [Yes [X] No [4.2 Does the reporting entity issue non-assessable policies?..... 1 If assessable policies are issued, what is the extent of the contingent liability of the policyholders?..... 4.3 % 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. \$

5.1	For Reciprocal Exchanges Only: Does the exchange appoint local agents? If yes, is the commission paid:		Yes [] No []
		5.21 Out of Attorney's-in-fact compensation	Yes [] No [] N/A []
		5.22 As a direct expense of the exchange	Yes [] No [] N/A []
5.3	What expenses of the Exchange are not paid out of the compensation of the At	torney-in-fact?	
5.4 5.5	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conc If yes, give full information	litions, been deferred?	Yes [] No [X]

GENERAL INTERROGATORIES PART 2 - PROPERTY & CASUALTY INTERROGATORIES

6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss:						
6.2	N/A - the company does not write workers compensation insurance						
6.3	The Company uses computer modeling software to estimate its probable maximum loss arising from a hurricane						
6.4	The Company maintains a catastrophe reinsurance program to protect it from excessive loss arising from a catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes	ΓX	1	No	ſĬ	1
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss		L	,			
7.1	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes	ſ	1	No	I X I	1
	If yes, indicate the number of reinsurance contracts containing such provisions						-
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes	[]	No	[]]
	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes	[]	No	[X]]
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year- end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:						
	 (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; 						
	 (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity) 						
	during the period); or						
	(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity	Yes	[]	No	[X]]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:						
	 (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or 		_	_			_
9.3	its affiliates in a separate reinsurance contract. If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:	Yes	[]	No	[X]	1
	(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;						
	(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.						
9.4	Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:						
	(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or						
9.5	(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is	Yes	[]	No	[X]	1
9.6	treated differently for GAAP and SAP. The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:						
	(a) The entity does not utilize reinsurance; or, (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or	Yes	[[X]	
	(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.	Yes Yes	ו [[X] [X]	
10.	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	Yes [X] No	[] N/.	A []]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

11.1 11.2	Has the reporting entity guaranteed policies issued by any other entity and now in force:		Yes	[]	No [X]
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for: 12.11 Unpaid losses.						
	12.12 Unpaid underwriting expenses (including loss adjustment expenses)						
	Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	\$					
	If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?		Yes [] No	[X]	N/A []
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement: 12.41 From						
	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpai losses under loss deductible features of commercial policies?	id				No [X	
12.6	If yes, state the amount thereof at December 31 of current year: 12.61 Letters of Credit.						
	12.62 Collateral and other funds	\$					
13.1	Largest net aggregate amount insured in any one risk (excluding workers' compensation):	\$			(600,000)
	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?					No [X	
13.3	State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.						2
14.1	Is the reporting entity a cedant in a multiple cedant reinsurance contract?		Yes	ſ	1	No [X	1
14.2	If yes, please describe the method of allocating and recording reinsurance among the cedants:						
14.3	If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?		Yes	[1	No [1
14.4 14.5	If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? If the answer to 14.4 is no, please explain:		Yes	[No []
15.1	Has the reporting entity guaranteed any financed premium accounts?		Yes	[]	No [X]
15.2	If yes, give full information						
16.1	Does the reporting entity write any warranty business?		Yes	[]	No [X]
	If yes, disclose the following information for each of the following types of warranty coverage:						

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home	\$	\$	\$	\$	\$
16.12 Products	\$	\$	\$	\$	\$
16.13 Automobile	\$	\$	\$	\$	\$
16.14 Other*	\$	\$	\$	\$	\$

* Disclose type of coverage:

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROVIDENCE MUTUAL FIRE INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

Show amounts in whole o	1 2023	2 2022	3 2021	4	5 2019
romiums Writton (Page & Part 1P, Cala 1, 2, 8, 2)	2023	2022	2021	2020	2019
18.1, 18.2, 19.1, 19.2 & 19.3 & 19.4)					
	8,999,152	8,539,274	9,690,529	12,066,711	
Property and liability combined lines (Lines 3, 4, 5,	70 097 907	61 179 350	59 961 074	64 383 264	
All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28					
29, 30 & 34)	0	0	0	0	
	0	0	0	0	ſ
			81 007 841	•	
niums Written (Page 8, Part 1B, Col. 6)	,,	,,			,,
iability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3,					
18.1, 18.2, 19.1, 19.2 & 19.3 & 19.4)	7 ,758 , 134				
Property and liability combined lines			8,000,540	10,899,001	
Lines 3, 4, 5, 8, 22 & 27)					
All other lines					
	0	0	0	0	
Lines 31, 32 & 33)	0	0	0	0	(
Fotal (Line 35)					
nt of Income (Page 4)					
Net underwriting gain (loss) (Line 8)	(20,651,480)	(9, 156, 072)	(5,980,257)	(12,700,423)	
Net investment gain (loss) (Line 11)	5,611,845				
Fotal other income (Line 15)	(3/1,022)	(/ /	(/ /	(/ /	(144,17
	U	U	N	U	
Line 19)	0	0	(436,068)	(168,521)	(363,78
Net income (Line 20)	(15,410,657)	(5,748,125)	8,993,615	(9,852,372)	
Sheet Lines (Pages 2 and 3)					
Total admitted assets excluding protected cell	101 000 501	101 700 501	000 010 750	207 274 250	040 404 54
			206,618,753	207,374,358	
$20.1 \ln course of collection (Line 15.1)$	805 867	681 706	541 567	578 909	
20.2 Deferred and not vet due (Line 15.2)	15,675,558				
20.3 Accrued retrospective premiums (Line 15.3)	0				
Fotal liabilities excluding protected coll		00, 100, 570			405 044 00
business (Page 3, Line 26)					
Losses (Page 3, Line 1)	10 310 060			40,020,140	
Inearned premiums (Page 3, Line 9)	43 758 686				
Capital paid up (Page 3, Lines 30 & 31)					
Surplus as regards policyholders (Page 3, Line 37)					
ow (Page 5)					
Net cash from operations (Line 11)	(11,713,646)	(13,410,372)	(12,510,227)	(6,668,814)	(190,95
	05 054 440	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			
Fotal adjusted capital				100,019,934	
	10,000,007	10, 103,000	11,070,740	12,073,103	12,312,30
-					
Col. 3) x 100.0					
Stocks (Lines 2.1 & 2.2)					
Mortgage loans on real estate (Lines 3.1 and 3.2)					0.
					1.
Line 5)	2.0	1.0		1.8	2.
Contract loans (Line 6)		0.0		0.0	0.
Derivatives (Line 7)	0.0	0.0	0.0		0.
Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.
Securities lending reinvested collateral assets (Line					0.
					0.
Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.
Cash, cash equivalents and invested assets (Line					
Affiliated hands (Sah D. Summany Line 12, Cal. 1)	0	0	0	0	
Affiliated preferred stocks					
Sch. D, Summary, Line 18, Col. 1)	0	0	0	0	
Affiliated common stocks					
	1,1/3,694	1,1/3,694	1,1/3,694	1,1/3,/94	1,1/3,89
n Schedule DA Verification. Col 5 Line 10)	n	n	n	n	
Affiliated mortgage loans on real estate		Õ			
All other affiliated	0	0	0	0	
All other affiliated	1,173,694	1,173,694	1,173,694	1,173,794	1,173,89
LOTAL INVESTMENT IN DAFENT INCLUDED IN LINES 42 TO 471		_	~		
above		0	0	0	
LOTAL INVESTMENT IN DAFENT INCLUDED IN LINES 42 TO 471		0	Q	Q	
	Property lines (Lines 1, 2, 9, 12, 21 & 26)	remiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) Lability lines (Lines 11, 11, 2, 16, 17, 1, 17, 2, 17, 3, No perty lines (Lines 1, 2, 9, 12, 21 & 26). Yoperty and liability combined lines (Lines 3, 4, 5, 8, 22 & 27). No ther lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 9, 30 & 34). Operty and liability combined lines (Lines 31, 32 & 0 Vorperty and liability combined lines (Lines 31, 32 & 0 Sill (Line 35). 1, 18, 2, 19, 11, 12, 2, 16, 33, 14, 15, 23, 24, 28, 29, 30 & 34) Property lines (Lines 1, 1, 12, 2, 16, 34, 14, 17, 17, 2, 17, 3, 18, 14, 17, 12, 28, 13, 34, 14, 12, 28, 13, 28, 184). Property and liability combined lines Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34) Coll and the income (Lines 31, 32, 4, 33). 0 Cotal Cher income (Line 15).	remiums Written (Page 8, Part 1B, Cols. 1, 2 & 3) 9, 152, 886 9, 533, 212 iability innes (Lines 1, 1, 1, 12, 16, 17, 1, 172, 17.3, 9, 152, 886 9, 533, 212 roperty innes (Lines 1, 2, 9, 12, 21 & 26) 8, 999, 152 8, 539, 274 roperty and lability combined lines (Lines 3, 1, 32 & 0 0 0 9, 08 & 34) 0 0 0 9, 08 & 34) 0 0 0 0 and solution lability lines (Lines 1, 1, 12, 16, 17, 1, 17.2, 17.3, 7, 758, 134 8, 369, 195 0 10 at Lines 11, 11, 2, 16, 17, 1, 17.2, 17.3, 7, 758, 134 8, 369, 195 0 0 10 at Lines 1, 2, 9, 1, 22 & 26, 20, 7, 736, 176 7, 746, 745 3 0 0 10 at Lines 1, 2, 9, 1, 22 & 26, 21, 28, 20, 30 & 34) 0 0 0 0 10 at Lines 3, 32 & 33) 0 0 0 0 0 10 at Line 3, 32 & 33) 0 0 0 0 0 10 at Conset (Page 4) 120 (E61, 480) (9, 166, 072) 161 (Line 35) 10, 13, 41, 52, 52, 42, 82, 30, 30 & 34) 0 0 0 10 at Conse	remiume Writen (Page 8, Pert 19, Cole. 1: 2.8.3) 9, 152, 866 9, 539, 712 11, 356, 258 8.1, 192, 101, 110 2.8, 103, 24 10, 41, 172, 173, 39, 152, 866 9, 539, 712 11, 156, 258 9, 659, 572 9, 659, 576, 572 8, 66, 566 570, 575, 566 68, 269, 946 79, 257, 586 8, 100, 7, 641 10, 164, 849 10, 164, 849 10, 164, 849 10, 164, 849 10, 164, 849 10, 164, 849 10, 164, 849 10, 164, 849 10, 164, 849 10, 164, 849 10, 10, 10, 10, 10, 10, 10, 10, 10, 10,	Derminis Written (Page 8, Part 18, Cole, 12, & 3) Job 12, 200 Job 22, 200 </td

FIVE-YEAR HISTORICAL DATA

		1	tinued) 2	3	4	5
		2023	2022	2021	2020	2019
apita	al and Surplus Accounts (Page 4)					
51	Net unrealized capital gains (losses) (Line 24)	5 805 201	(10 018 778)	2 058 306	6 880 587	6 257 60
	Net unrealized capital gains (losses) (Line 24) Dividends to stockholders (Line 35)		0		0,000,007	
	Dividends to stockholders (Line 35) Change in surplus as regards policyholders for the					
55.	year (Line 38)	(7 , 985 , 533)	(17,779,741)	11,099,789	(4,319,712)	
ross	Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3,					
	18.1, 18.2, 19.1, 19.2 & 19.3 & 19.4)	7,656,749	10 , 387 , 827	10,005,214	10,933,461	
	Property lines (Lines 1, 2, 9, 12, 21 & 26)	6,606,731	6,142,772	6,491,111	7 ,467 ,656	
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	33 303 518	31 011 596	32 265 008	32 341 125	27 008 0
57	All other lines					
57.	(Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58.	Nonproportional reinsurance lines					
	(Lines 31, 32 & 33)	0	0	0	0	
59.	· Total (Line 35)	47 , 566 , 998				
et Lo	osses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3,					
	18.1, 18.2, 19.1, 19.2 & 19.3 & 19.4)					
	Property lines (Lines 1, 2, 9, 12, 21 & 26)	6,589,627	6,127,372	6,435,570	7,442,487	
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	30 801 031	27 062 407	20 248 215	20, 250, 257	23 100 1
63	All other lines					23,400,1
03.	(Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)		0	.0		
64.						
	Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	
65.	. Total (Line 35)	45,047,250			46 , 744 , 207	
66.	divided by Page 4, Line 1) x 100.0 . Premiums earned (Line 1)					
67.	Losses incurred (Line 2)					
	Loss expenses incurred (Line 3)					9
69.	. Other underwriting expenses incurred (Line 4)	46.8				
70.	. Net underwriting gain (loss) (Line 8)	(30.4)	(13.9)	(8.4)	(15.6)	(5
ther	Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by					
72.	Page 8, Part 1B, Col. 6, Line 35 x 100.0)		45.8		41.8	
	earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)					
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3,					
	(Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)		69.9	60.4	77 . 1	
ne Y	/ear Loss Development (\$000 omitted)					
	Development in estimated losses and loss		(1,815)			
74.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)	2,323	(1,815)	(2,993)	2,722	
74.	Development in estimated losses and loss					
74. 75.	 Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior 					
74. 75. wo Y	 Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 	2.5	(1.6)	(3.0)	2.6	(1
74. 75. wo Y 76.	 Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) 	2.5	(1.6)	(3.0)	2.6	(1
74. 75. wo Y 76.	 Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) Percent of development of losses and loss 	2.5	(1.6)	(3.0)	2.6	(1
74. 75. wo Y 76.	 Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0) Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12) 	2.5	(1.6)	(3.0)	2.6	(1

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

					(\$	000 Omitted						
	Pr	emiums Earn						kpense Paym				12
Years in	1	2	3			1	and Cost		and Other	10	11	
Which				Loss Pa	-	Containmer	t Payments	Payn		-		Number of
Premiums	.			4	5	6	7	8	9	Salvage	Total Net	Claims
Were Earned and Losses				D . ()		D . ()		D ¹ ()		and	Paid (Cols.	Reported
Were Incurre	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrogation Received	4 - 5 + 6 - 7 + 8 - 9)	Direct and Assumed
were incurre	Assumed	Cedeu	(COIS. 1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	7+0-9)	Assumed
1. Prior		XXX	XXX		0	6	0	12	0	0	100	XXX
2. 2014		11,818	67 , 345		1,794			5,194		1,092	42,095	xxx
3. 2015		14,760	70,170		23,849				1,701	1,650		xxx
4. 2016		12,961	77 ,740	43,349	3,176			9 , 386	3 , 255	1,924	47 , 230	xxx
5. 2017			79,442			1,237		6,836				xxx
6. 2018		14 , 480	85,881		1,161	1,505		7,911				xxx
7. 2019		14 , 269	85,914		2,495	1 , 179			70	2,679		xxx
8. 2020		14 , 133	81,578	51,345	4 , 598		9	7 ,313		1,949		xxx
9. 2021		13,873	71,608				0		45	2,206	46 , 438	xxx
10. 2022		13,848	65,651		1,634	135	0	5,919		1,363		xxx
11. 2023	83,500	15,509	67,991	28,918	1,314	11	0	4,369	37	609	31,947	XXX
12. Totals	xxx	xxx	xxx	459,571	44,942	8,240	277	70,690	5,476	18,321	487,806	xxx

		Losses	Unnaid		Defens	e and Cost (Containment	Unnaid	Adjusting Ung		23	24	25
	Case	Basis	Bulk +	IBNR	Case		Bulk +		21	22		Total	Number of
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded	Salvage and Subrog- ation Anticipated	Net Losses and Expenses Unpaid	Claims Outstand- ing Direct and Assumed
1	82	0	0	0	0	0	11	0	9	1	0	101	xxx
2	404		0	0	0	0	19	0		3	0	438	xxx
3		0	0	0	0	0	46	0	7	0	0		XXX
4		0	3	0	0	0		0	1,569	0	0	1,921	xxx
5		0		101	0	0	120	0	68	15	0	1,022	XXX
6		0		103	0	0	167	6		9	0	1,390	xxx
7	1,968	0		103	0	0		8		7	0	2,886	XXX
8	3,088		675	104	0	0	613	124		14	0	3 , 501	xxx
9	2,747	213	1,306	206	0	0				24	0	4 , 495	XXX
10	4, 179	433	2,449		0	0	467	0	1,123	112	0	7 , 364	XXX
11.	13,855	2,420	7,775	1,131	0	0	38	0	5,188	533	0	22,772	xxx
12.	28,118	3,908	13,789	2,057	0	0	2,392	177	8,822	718	0	46,261	xxx

	Losses and	Total Loss Expense	es Incurred		.oss Expense F ed/Premiums E		Nontabula	r Discount	34 Inter-	Net Balar Reserves At	nce Sheet iter Discount
	26	27	28	29	30	31	32	33	Company Pooling	35	36 Loss
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Participation Percentage	Losses Unpaid	Expenses Unpaid
1	xxx	XXX	xxx	xxx	xxx	xxx	0	0	xxx.		19
2	44 , 451	1,918					0	0			65
3							0	0			53
4	55,617	6,466		61.3			0	0			1,591
5		4,364	51,877	61.0			0	0			173
6	65,084	1,336	63,748		9.2		0	0		1 , 150	240
7	61,318	2,710		61.2			0	0		2,393	
8	63,911	5,743					0	0		2,848	653
9		1,466					0	0			
10		2,535	46,498	61.7			0	0		5,886	1,478
11.	60,154	5,435	54,719	72.0	35.0	80.5	0	0		18,079	4,693
12.	xxx	XXX	XXX	xxx	xxx	xxx	0	0	xxx	35,942	10,319

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE PROVIDENCE MUTUAL FIRE INSURANCE COMPANY

SCHEDULE	P - PART 2 -	SUMMARY

	INC	CURRED NET	LOSSES AN	D DEFENSE	AND COST C (\$000 OI		NT EXPENSE	S REPORTEI	D AT YEAR E	ND	DEVELO	OPMENT
Years in Which	1	2	3	4	5	6	7	8	9	10	11	12
Losses Were Incurred	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	One Year	Two Year
1. Prior	16 , 996		14 ,753	14,269	13,820	13 , 390	13,024	13,002	13,170	13,171	1	
2. 2014	39 , 158	37 , 252	36,927		36 , 905				37 ,093	37 , 321	228	
3. 2015	XXX	52,031	51 , 172	50 , 155	50 , 146	50 , 152		50,314	49,944	50,062	118	(252)
4. 2016	XXX	xxx	46 , 337	42,338	41,083	40 , 785	41,592	41,244	41,527	41,451	(76)	
5. 2017	xxx	xxx	XXX	45,592	44 , 198	43,871		45 , 115	44 ,917	45 , 160	243	45
6. 2018	XXX	xxx	XXX	xxx	55 , 236	55 , 368		55 , 541	55,661	55,796	135	
7. 2019	xxx	xxx	xxx	xxx.	XXX	50 , 071		50 ,643	50 , 793	51,259	466	616
8. 2020	XXX	xxx	XXX	xxx	XXX	XXX		49 , 606	49,219	50,774	1,555	1 , 168
9. 2021	XXX	xxx	XXX	xxx	XXX	XXX	xxx	44 , 592	43,010	43,398		(1,194)
10. 2022	xxx	xxx	xxx	xxx	xxx	XXX	xxx	xxx	40 , 350		(735)	
11. 2023	XXX	xxx	xxx	xxx	XXX	XXX	xxx	xxx	xxx	45,732	xxx	xxx
										12. Totals	2,323	1,243

SCHEDULE P - PART 3 - SUMMARY

	CUMULAT	IVE PAID NE	T LOSSES AI	ND DEFENSE	AND COST OMIT		NT EXPENSI	ES REPORTE	D AT YEAR I	END (\$000	11	12 Number of
Years in Which	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With	Claims Closed
Losses Were	0044	0045	0040	0017	0040	0040		0004	0000	0000	Loss	Without Loss
Incurred	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	Payment	Payment
1. Prior		5 , 508	9,932	10,930	11,804	12,281	12,441	12,622	12,990	13,078	xxx	xxx
2. 2014	22 , 335	29,613	32 , 444		35,214				36 , 566	36,929	XXX	XXX
3. 2015	XXX	31,790	42,410	44,947	47 , 789	48,371	48,849	49 , 350	49 , 686	49,698	xxx	XXX
4. 2016	XXX	xxx	26,421	35,741	37 , 572		40 , 188	40 , 600	40,946	41,099	xxx	xxx
5. 2017	XXX	xxx	XXX		35,976		40,829	42,719	43,812	44 , 191	xxx	XXX
6. 2018	XXX	XXX	XXX	xxx	33,755	45,266	48 , 126	50,932	54 , 039	54 , 485	xxx	XXX
7. 2019	XXX	XXX	XXX	XXX	XXX			42,877	46 , 653	48,561	XXX	XXX
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	31,882	41,745	44,936	47 , 437	XXX	XXX
9. 2021	XXX	xxx	XXX	XXX	XXX	XXX	xxx		35,406		XXX	XXX
10. 2022	XXX	xxx	XXX	XXX	XXX	XXX	xxx	xxx	24 , 163	33,262	xxx	XXX
11. 2023	XXX	xxx	XXX	XXX	xxx	XXX	XXX	xxx	XXX	27,615	XXX	xxx

SCHEDULE P - PART 4 - SUMMARY

Years in Which	BULK AND IE	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
Losses Were Incurred	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	7,487		2,795	1,878		452	76	69	15	11
2. 2014	7,241	2,772	1,787			411	447	67	37	19
3. 2015	xxx		2,856	1,811		570	515	476	34	46
4. 2016	xxx	XXX	7 , 530	2,797	1,545	855	513			25
5. 2017	xxx	XXX	XXX	7 ,723	2,690			723		543
6. 2018	xxx	XXX	xxx.	XXX	6,863	2,799	1,895	1,060	536	587
7. 2019	xxx	XXX	xxx	xxx.			2,196	1,670	959	730
8. 2020	xxx	XXX	XXX	XXX	xxx	XXX	5,919	2,161	1,422	1,060
9. 2021	xxx	XXX	XXX	XXX	xxx	XXX	xxx	5,872	2,504	1,637
10. 2022	xxx	XXX	XXX	XXX	xxx	XXX	xxx	xxx	7 , 157	2,607
11. 2023	xxx	XXX	xxx	xxx	XXX	XXX	xxx	XXX	xxx	6,682

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated By States And Territories 1 Gross Premiums, Including 4 5 6 7 8												
		1	1	Gross Premiur Policy and Mem Less Return P Premiums on Take	ns, Including bership Fees remiums and Policies Not	4 Dividends Paid	5	6	7	8 Finance and	9 Direct Premium Written for Federal	
	States, etc.	Sta	tive atus	2 Direct Premiums	3 Direct Premiums	or Credited to Policyholders on Direct	Direct Losses Paid (Deducting	Direct Losses	Direct Losses	Service Charges Not Included in	Purchasing Groups (Included in	
1	Alabama A	(a	a) N	Written	Earned	Business	Salvage)	Incurred	Unpaid 0	Premiums	Col. 2)	
	Alaska A		N		0	0	0	0	0	0		
	ArizonaA		۷k	0	0	0	0	0	0	0		
	Arkansas		N	0	0	0	0	0	0	0		
5. 6.	California C Colorado C		N		0	0	0	0	0	0		
	Connecticut C					0						
	Delaware D		۱	0	0	0	0	0	0	0		
	Dist. ColumbiaD Florida		N	0	0	0	0	0	0	0		
11.			N		0	0	0	0	0	0		
	Hawaii H		N		0	0	0	0	0	0		
	Idaho ID		۱	0	0	0	0	0	0	0		
14.	Illinois IL Indiana IN		N	0	0	0	0	0	0	0		
	Indiana IN Iowa IA		N	0	0	0	0	0	0	0		
	Kansas K	St	N	Ö		0	0	0	0	0		
	Kentucky K		۱	<u>0</u>	0	Ô	Ô	Ô	Ô	0		
	Louisiana La Maine M		۹			0			0 	0 		
20.			N.		2,950,503							
	Massachusetts M					0		7,049,142	5,922,015			
	Michigan M		۷	0	0	0	0	0	0	0		
	Minnesota M Mississippi M		N	0	0	0	0	0	0	0		
	Missouri M		N I		0	0	0	0	0	0		
	Montana M		N		0	0	0	0	0	0		
	Nebraska N		۱	0	0	0	0	0	0	0		
	Nevada N		N	0 	<u>6</u> ,933,276	0	0.,4,586,615		0 4,302,185	0		
	New Hampshire N New JerseyN					0						
	New MexicoN		N			0	0,700,000		0			
33.	New York N		L	2,832,360		0		1,846,061	1 , 520 , 121	1,800		
	No.Carolina N		N	0	0	0	0	0	0	0		
	No.Dakota N OhioO		N		0	0	0	0	0	0		
			N		0	0	0	0	0	0		
38.	OregonO	R!	N	0	0	0	0	0	0	0		
	PennsylvaniaP		N		0	0	0	0	0	0		
40.	Rhode Island R So. Carolina S		N	14 , 425 , 140	13,739,876	0	8,695,451 0	8,665,949	7 ,543 ,036 0			
42.	So. DakotaS		N			0	0		0	0		
43.	TennesseeT		۷k	0	0	0	0	0	0	0		
44.	Texas		۷	0	0	0	0	0	0	0		
	UtahU VermontV		٩	U	U	0 N	0	0 N	0	U	•••••	
	VirginiaV		V		0	0	0		0	0		
48.	Washington W	/A	v	0	0	0	0	0	0	0		
	West Virginia W		N	0	0	0	0	0	0	0		
	Wisconsin W Wyoming W		N	U	U	0 N	0 N	0	U	0		
	American Samoa A		N	ŏ	0	0	0	0				
53.	Guam G	U	۱	0	0	0	0	0	0	0		
	Puerto Rico P	R!N	۷	0	0	0	0	0	0	0		
55.	U.S. Virgin Islands		N	0	Ο	n	0	0	n	n		
56.	Northern Mariana	· !	•		0	0	0			0		
	Islands M		N	0	0	0	0	0	0	0		
	Canada C	AN. h	۷k	0	0	0	0	0	0	0		
58.	Aggregate other alienO	т х	xx	0	Ο	0	0	0	0	0	n	
59.	Totals		XX	87,844,943	83,103,200	0	47,364,028	50,016,311	41,620,983	207,088	0	
	LS OF WRITE-INS											
58001. 58002			XX									
58003.			xx[
	Sum. of remaining											
58000	write-ins for Line 58 from overflow page Totals (Lines 58001	xx	xx	0	0	0	0	0	ο	0	۵	
20999.	Totals (Lines 58001 through 58003 + 589 (Line 58 above)		xx	0	0	0	0	0	0	0	0	
L			~	U	0	0	0	0	U U	0	0	

(a) Active Status Counts

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

(b) Explanation of basis of allocation of premiums by states, etc.

Direct underwriting activity is compiled on an individual state basis.

 1. L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG
 8
 4. Q – Qualified – Qualified or accredited reinsurer

 2. R – Registered – Non-domiciled RRGs
 5. D – Domestic Surplus Lines Insurer (DSLI) – Reporting entities authorized to write surplus lines in the state of domicile

 3. E – Eligible – Reporting entities eligible or approved to write surplus lines in the state (other their state of domicile
 6. N – None of the above – Not allowed to write business in the state of the00 ...0 state49

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

