

**QUARTERLY STATEMENT
OF THE
Delta Dental Plan of New Mexico, Inc.**

**of
Albuquerque
in the state of
New Mexico**

**TO THE
Insurance Department
OF THE STATE OF
New Mexico**

**FOR THE QUARTER ENDED
SEPTEMBER 30, 2020**

2020



QUARTERLY STATEMENT
AS OF SEPTEMBER 30, 2020
OF THE CONDITION AND AFFAIRS OF THE
Delta Dental Plan of New Mexico, Inc.

NAIC Group Code 0477 (Current Period) , 0477 (Prior Period) NAIC Company Code 47287 Employer's ID Number 85-0224562

Organized under the Laws of New Mexico , State of Domicile or Port of Entry NM

Country of Domicile United States of America

Licensed as business type: Life, Accident & Health[] Property/Casualty[] Hospital, Medical & Dental Service or Indemnity[]
 Dental Service Corporation[X] Vision Service Corporation[] Health Maintenance Organization[]
 Other[] Is HMO Federally Qualified? Yes[] No[] N/A[X]

Incorporated/Organized 05/01/1971 Commenced Business 05/01/1971

Statutory Home Office 100 Sun Avenue NE, Suite 400 , Albuquerque, NM, 87109
 (Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 100 Sun Avenue NE, Suite 400
 (Street and Number) Albuquerque, NM, 87109 (City or Town, State, Country and Zip Code)
(505)883-4777 (Area Code) (Telephone Number)

Mail Address 100 Sun Avenue NE, Suite 400 , Albuquerque, NM, 87109
 (Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 100 Sun Avenue NE, Suite 400
 (Street and Number) Albuquerque, NM, 87109 (City or Town, State, Country and Zip Code)
(505)883-4777 (Area Code) (Telephone Number)

Internet Web Site Address deltadentalnm.com

Statutory Statement Contact Glenn R. Simon, CPA, CGMA (Name) (517)347-5405 (Area Code)(Telephone Number)(Extension)
gsimon@deltadentalmi.com (E-Mail Address) (517)347-5125 (Fax Number)

OFFICERS

| Name | Title |
|---------------------------------|-----------------------------------|
| Lou Volk III | President & CEO |
| Amy Lyn Basel, CPA, CGMA | CFO & Treasurer |
| Christine Nielsen Nathe RDH, MS | Vice Chairperson |
| James Dean Trujillo, CPA | Chairperson |
| Sue Ellen Jenkins | VP, General Counsel & Secretary # |

OTHERS

JoLou Trujillo-Ottino, VP of Sales & Marketing

DIRECTORS OR TRUSTEES

Robin Dozier Otten #
 David James Martinez, DDS
 Robert Lee Simmons
 Ralph Edward McElmurry, DDS
 James Dean Trujillo, CPA
 Christine Nielsen Nathe, RDH, MS
 Fred Cisneros #

State of Michigan
 County of Ingham 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 above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

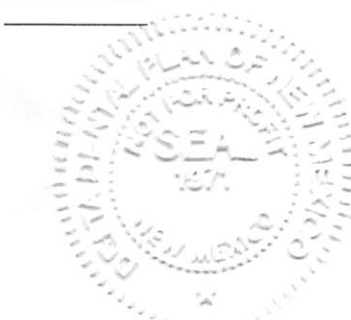
| | | |
|---|--|---|
| <u>Amy Lyn Basel</u> (Signature) Amy Lyn Basel, CPA, CGMA (Printed Name) 1. CFO (Title) | <u>Sue E. Jenkins</u> (Signature) Sue Ellen Jenkins (Printed Name) 2. VP & General Counsel (Title) | _____ (Signature) _____ (Printed Name) 3. _____ (Title) |
|---|--|---|

Subscribed and sworn to before me this 4th day of Nov, 2020

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

Elizabeth Balmer
 (Notary Public Signature)

ELIZABETH BALMER
NOTARY PUBLIC - STATE OF MICHIGAN
COUNTY OF INGHAM
 My Commission Expires March 30, 2023
 Acting in the County of _____



ASSETS

| | Current Statement Date | | | 4 December 31 Prior Year Net Admitted Assets |
|---|------------------------|----------------------------|--|---|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds | 30,219,869 | | 30,219,869 | 29,512,914 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | | | | |
| 2.2 Common stocks | 29,094,897 | | 29,094,897 | 22,818,887 |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | | | | |
| 3.2 Other than first liens | | | | |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$.....0 encumbrances) | | | | |
| 4.2 Properties held for the production of income (less \$.....0 encumbrances) | | | | |
| 4.3 Properties held for sale (less \$.....0 encumbrances) | | | | |
| 5. Cash (\$.....947,296), cash equivalents (\$.....2,452,037) and short-term investments (\$.....0) | 3,399,333 | | 3,399,333 | 4,181,572 |
| 6. Contract loans (including \$.....0 premium notes) | | | | |
| 7. Derivatives | | | | |
| 8. Other invested assets | | | | |
| 9. Receivables for securities | | | | |
| 10. Securities lending reinvested collateral assets | | | | |
| 11. Aggregate write-ins for invested assets | 68,868 | | 68,868 | 149,879 |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 62,782,967 | | 62,782,967 | 56,663,252 |
| 13. Title plants less \$.....0 charged off (for Title insurers only) | | | | |
| 14. Investment income due and accrued | 197,422 | | 197,422 | 136,334 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | 526,794 | 306 | 526,488 | 564,301 |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums) | | | | |
| 15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0) | | | | |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | | | | |
| 16.2 Funds held by or deposited with reinsured companies | | | | |
| 16.3 Other amounts receivable under reinsurance contracts | | | | |
| 17. Amounts receivable relating to uninsured plans | 3,130,007 | | 3,130,007 | 3,090,776 |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | | | | |
| 18.2 Net deferred tax asset | | | | |
| 19. Guaranty funds receivable or on deposit | | | | |
| 20. Electronic data processing equipment and software | 92,499 | | 92,499 | 117,809 |
| 21. Furniture and equipment, including health care delivery assets (\$.....0) | 727,354 | 727,354 | | |
| 22. Net adjustments in assets and liabilities due to foreign exchange rates | | | | |
| 23. Receivables from parent, subsidiaries and affiliates | 400 | | 400 | 1,393 |
| 24. Health care (\$.....0) and other amounts receivable | | | | |
| 25. Aggregate write-ins for other-than-invested assets | 251,684 | 249,311 | 2,373 | |
| 26. TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 67,709,127 | 976,971 | 66,732,156 | 60,573,865 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | | |
| 28. TOTAL (Lines 26 and 27) | 67,709,127 | 976,971 | 66,732,156 | 60,573,865 |
| DETAILS OF WRITE-INS | | | | |
| 1101. Restricted deferred compensation trust | 68,868 | | 68,868 | 149,879 |
| 1102. | | | | |
| 1103. | | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | | | | |
| 1199. TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above) | 68,868 | | 68,868 | 149,879 |
| 2501. Prepaid expense | 249,311 | 249,311 | | |
| 2502. Miscellaneous receivable | 2,373 | | 2,373 | |
| 2503. | | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | | | | |
| 2599. TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) | 251,684 | 249,311 | 2,373 | |

LIABILITIES, CAPITAL AND SURPLUS

| | Current Period | | | Prior Year |
|--|----------------|----------------|------------|------------|
| | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
| 1. Claims unpaid (less \$.....0 reinsurance ceded) | 1,703,900 | | 1,703,900 | 1,323,300 |
| 2. Accrued medical incentive pool and bonus amounts | | | | |
| 3. Unpaid claims adjustment expenses | 90,012 | | 90,012 | 77,162 |
| 4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act | 101,933 | | 101,933 | 74,614 |
| 5. Aggregate life policy reserves | | | | |
| 6. Property/casualty unearned premium reserve | | | | |
| 7. Aggregate health claim reserves | | | | |
| 8. Premiums received in advance | 528,440 | | 528,440 | 224,267 |
| 9. General expenses due or accrued | 2,319,059 | | 2,319,059 | 1,361,545 |
| 10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses)) | | | | |
| 10.2 Net deferred tax liability | | | | |
| 11. Ceded reinsurance premiums payable | | | | |
| 12. Amounts withheld or retained for the account of others | 123,750 | | 123,750 | 57,052 |
| 13. Remittances and items not allocated | | | | |
| 14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current) | | | | |
| 15. Amounts due to parent, subsidiaries and affiliates | 553,359 | | 553,359 | 957,430 |
| 16. Derivatives | | | | |
| 17. Payable for securities | | | | 266,329 |
| 18. Payable for securities lending | | | | |
| 19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and \$.....0 certified reinsurers) | | | | |
| 20. Reinsurance in unauthorized and certified (\$.....0) companies | | | | |
| 21. Net adjustments in assets and liabilities due to foreign exchange rates | | | | |
| 22. Liability for amounts held under uninsured plans | 349,795 | | 349,795 | 721,268 |
| 23. Aggregate write-ins for other liabilities (including \$.....105,939 current) | 105,939 | | 105,939 | 80,746 |
| 24. Total liabilities (Lines 1 to 23) | 5,876,187 | | 5,876,187 | 5,143,713 |
| 25. Aggregate write-ins for special surplus funds | X X X | X X X | | 172,660 |
| 26. Common capital stock | X X X | X X X | | |
| 27. Preferred capital stock | X X X | X X X | | |
| 28. Gross paid in and contributed surplus | X X X | X X X | | |
| 29. Surplus notes | X X X | X X X | | |
| 30. Aggregate write-ins for other-than-special surplus funds | X X X | X X X | 247,673 | 246,569 |
| 31. Unassigned funds (surplus) | X X X | X X X | 60,608,296 | 55,010,923 |
| 32. Less treasury stock, at cost: | | | | |
| 32.10 shares common (value included in Line 26 \$.....0) | X X X | X X X | | |
| 32.20 shares preferred (value included in Line 27 \$.....0) | X X X | X X X | | |
| 33. Total capital and surplus (Lines 25 to 31 minus Line 32) | X X X | X X X | 60,855,969 | 55,430,152 |
| 34. Total Liabilities, capital and surplus (Lines 24 and 33) | X X X | X X X | 66,732,156 | 60,573,865 |
| DETAILS OF WRITE-INS | | | | |
| 2301. Uninsured claim admin fee reserve | 105,939 | | 105,939 | 80,746 |
| 2302. | | | | |
| 2303. | | | | |
| 2398. Summary of remaining write-ins for Line 23 from overflow page | | | | |
| 2399. TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above) | 105,939 | | 105,939 | 80,746 |
| 2501. 2020 ACA Fees | X X X | X X X | | 172,660 |
| 2502. | X X X | X X X | | |
| 2503. | X X X | X X X | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | X X X | X X X | | |
| 2599. TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) | X X X | X X X | | 172,660 |
| 3001. Statutory reserve | X X X | X X X | 247,673 | 246,569 |
| 3002. | X X X | X X X | | |
| 3003. | X X X | X X X | | |
| 3098. Summary of remaining write-ins for Line 30 from overflow page | X X X | X X X | | |
| 3099. TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above) | X X X | X X X | 247,673 | 246,569 |

STATEMENT OF REVENUE AND EXPENSES

| | Current Year To Date | | Prior Year To Date | Prior Year Ended December 31 |
|---|----------------------|------------|--------------------|------------------------------|
| | 1 Uncovered | 2 Total | 3 Total | 4 Total |
| 1. Member Months | X X X | 1,480,805 | 1,349,428 | 1,800,031 |
| 2. Net premium income (including \$.....0 non-health premium income) | X X X | 39,784,771 | 40,931,415 | 54,610,391 |
| 3. Change in unearned premium reserves and reserves for rate credits | X X X | | | |
| 4. Fee-for-service (net of \$.....0 medical expenses) | X X X | | | |
| 5. Risk revenue | X X X | | | |
| 6. Aggregate write-ins for other health care related revenues | X X X | 9,396 | 9,016 | 10,829 |
| 7. Aggregate write-ins for other non-health revenues | X X X | | | |
| 8. Total revenues (Lines 2 to 7) | X X X | 39,794,167 | 40,940,431 | 54,621,220 |
| Hospital and Medical: | | | | |
| 9. Hospital/medical benefits | | | | |
| 10. Other professional services | | 29,943,258 | 33,370,979 | 43,439,064 |
| 11. Outside referrals | | | | |
| 12. Emergency room and out-of-area | | | | |
| 13. Prescription drugs | | | | |
| 14. Aggregate write-ins for other hospital and medical | | | | |
| 15. Incentive pool, withhold adjustments and bonus amounts | | | | |
| 16. Subtotal (Lines 9 to 15) | | 29,943,258 | 33,370,979 | 43,439,064 |
| Less: | | | | |
| 17. Net reinsurance recoveries | | | | |
| 18. Total hospital and medical (Lines 16 minus 17) | | 29,943,258 | 33,370,979 | 43,439,064 |
| 19. Non-health claims (net) | | | | |
| 20. Claims adjustment expenses, including \$.....308,678 cost containment expenses | | 861,409 | 1,069,639 | 945,905 |
| 21. General administrative expenses | | 7,155,473 | 4,808,538 | 7,843,245 |
| 22. Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only) | | | | |
| 23. Total underwriting deductions (Lines 18 through 22) | | 37,960,140 | 39,249,156 | 52,228,214 |
| 24. Net underwriting gain or (loss) (Lines 8 minus 23) | X X X | 1,834,027 | 1,691,275 | 2,393,006 |
| 25. Net investment income earned | | 1,034,213 | 1,159,431 | 1,436,735 |
| 26. Net realized capital gains (losses) less capital gains tax of \$.....0 | | 2,066,045 | 102,182 | 217,582 |
| 27. Net investment gains or (losses) (Lines 25 plus 26) | | 3,100,258 | 1,261,613 | 1,654,317 |
| 28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)] | | 1,511 | 1,301 | 1,299 |
| 29. Aggregate write-ins for other income or expenses | | 12,953 | 10,725 | 12,267 |
| 30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) | X X X | 4,948,749 | 2,964,914 | 4,060,889 |
| 31. Federal and foreign income taxes incurred | X X X | | | |
| 32. Net income (loss) (Lines 30 minus 31) | X X X | 4,948,749 | 2,964,914 | 4,060,889 |
| DETAILS OF WRITE-INS | | | | |
| 0601. Dental Access Card | X X X | 9,396 | 9,016 | 10,829 |
| 0602. | X X X | | | |
| 0603. | X X X | | | |
| 0698. Summary of remaining write-ins for Line 6 from overflow page | X X X | | | |
| 0699. TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above) | X X X | 9,396 | 9,016 | 10,829 |
| 0701. | X X X | | | |
| 0702. | X X X | | | |
| 0703. | X X X | | | |
| 0798. Summary of remaining write-ins for Line 7 from overflow page | X X X | | | |
| 0799. TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above) | X X X | | | |
| 1401. | | | | |
| 1402. | | | | |
| 1403. | | | | |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | | | | |
| 1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above) | | | | |
| 2901. Miscellaneous Income | | 12,953 | 10,725 | 12,267 |
| 2902. | | | | |
| 2903. | | | | |
| 2998. Summary of remaining write-ins for Line 29 from overflow page | | | | |
| 2999. TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above) | | 12,953 | 10,725 | 12,267 |

STATEMENT OF REVENUE AND EXPENSES (Continued)

| | 1 | 2 | 3 |
|--|-------------------------|-----------------------|------------------------------------|
| | Current Year To Date | Prior Year To Date | Prior Year Ended December 31 |
| CAPITAL & SURPLUS ACCOUNT | | | |
| 33. Capital and surplus prior reporting year | 55,430,152 | 48,975,361 | 48,975,361 |
| 34. Net income or (loss) from Line 32 | 4,948,749 | 2,964,914 | 4,060,889 |
| 35. Change in valuation basis of aggregate policy and claim reserves | | | |
| 36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0 | 1,259,631 | 1,718,761 | 2,398,926 |
| 37. Change in net unrealized foreign exchange capital gain or (loss) | | | |
| 38. Change in net deferred income tax | | | |
| 39. Change in nonadmitted assets | (782,563) | 17,389 | (5,024) |
| 40. Change in unauthorized and certified reinsurance | | | |
| 41. Change in treasury stock | | | |
| 42. Change in surplus notes | | | |
| 43. Cumulative effect of changes in accounting principles | | | |
| 44. Capital Changes: | | | |
| 44.1 Paid in | | | |
| 44.2 Transferred from surplus (Stock Dividend) | | | |
| 44.3 Transferred to surplus | | | |
| 45. Surplus adjustments: | | | |
| 45.1 Paid in | | | |
| 45.2 Transferred to capital (Stock Dividend) | | | |
| 45.3 Transferred from capital | | | |
| 46. Dividends to stockholders | | | |
| 47. Aggregate write-ins for gains or (losses) in surplus | | | |
| 48. Net change in capital and surplus (Lines 34 to 47) | 5,425,817 | 4,701,064 | 6,454,791 |
| 49. Capital and surplus end of reporting period (Line 33 plus 48) | 60,855,969 | 53,676,425 | 55,430,152 |
| DETAILS OF WRITE-INS | | | |
| 4701. | | | |
| 4702. | | | |
| 4703. | | | |
| 4798. Summary of remaining write-ins for Line 47 from overflow page | | | |
| 4799. TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above) | | | |

CASH FLOW

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|---------------------------------|-------------------------------|---|
| Cash from Operations | | | |
| 1. Premiums collected net of reinsurance | 40,153,944 | 41,557,227 | 54,145,534 |
| 2. Net investment income | 1,146,755 | 944,147 | 1,452,247 |
| 3. Miscellaneous income | 9,396 | | 10,829 |
| 4. TOTAL (Lines 1 to 3) | 41,310,095 | 42,501,374 | 55,608,610 |
| 5. Benefit and loss related payments | 29,549,705 | 33,142,453 | 43,233,197 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 7,833,596 | 6,982,765 | 9,196,431 |
| 8. Dividends paid to policyholders | | | |
| 9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses) | | | |
| 10. TOTAL (Lines 5 through 9) | 37,383,301 | 40,125,218 | 52,429,628 |
| 11. Net cash from operations (Line 4 minus Line 10) | 3,926,794 | 2,376,156 | 3,178,982 |
| Cash from Investments | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 12.1 Bonds | 20,427,892 | 27,098,587 | 32,626,883 |
| 12.2 Stocks | 10,705,102 | 929,846 | 4,487,811 |
| 12.3 Mortgage loans | | | |
| 12.4 Real estate | | | |
| 12.5 Other invested assets | 81,011 | 139,047 | 130,785 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | | | |
| 12.7 Miscellaneous proceeds | | 111,816 | 287,164 |
| 12.8 TOTAL investment proceeds (Lines 12.1 to 12.7) | 31,214,005 | 28,279,296 | 37,532,643 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds | 20,849,863 | 29,731,067 | 33,488,612 |
| 13.2 Stocks | 14,114,046 | 3,226,606 | 9,312,180 |
| 13.3 Mortgage loans | | | |
| 13.4 Real estate | | | |
| 13.5 Other invested assets | | | |
| 13.6 Miscellaneous applications | 266,331 | | |
| 13.7 TOTAL investments acquired (Lines 13.1 to 13.6) | 35,230,240 | 32,957,673 | 42,800,792 |
| 14. Net increase (or decrease) in contract loans and premium notes | | | |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | (4,016,235) | (4,678,377) | (5,268,149) |
| Cash from Financing and Miscellaneous Sources | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes | | | |
| 16.2 Capital and paid in surplus, less treasury stock | | | |
| 16.3 Borrowed funds | | | |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | | | |
| 16.5 Dividends to stockholders | | | |
| 16.6 Other cash provided (applied) | (692,798) | 43,847 | 23,146 |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5 plus Line 16.6) | (692,798) | 43,847 | 23,146 |
| 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) | (782,239) | (2,258,374) | (2,066,021) |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year | 4,181,572 | 6,247,593 | 6,247,593 |
| 19.2 End of period (Line 18 plus Line 19.1) | 3,399,333 | 3,989,219 | 4,181,572 |

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

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

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

| | 1 Total | Comprehensive (Hospital & Medical) | | 4 Medicare Supplement | 5 Vision Only | 6 Dental Only | 7 Federal Employees Health Benefits Plan | 8 Title XVIII Medicare | 9 Title XIX Medicaid | 10 Other |
|---|------------|------------------------------------|------------|--------------------------|------------------|------------------|---|---------------------------|-------------------------|-------------|
| | | 2 Individual | 3 Group | | | | | | | |
| Total Members at end of: | | | | | | | | | | |
| 1. Prior Year | 150,732 | | | | 7 | 150,725 | | | | |
| 2. First Quarter | 156,296 | | | | 218 | 156,078 | | | | |
| 3. Second Quarter | 156,036 | | | | 334 | 155,702 | | | | |
| 4. Third Quarter | 183,567 | | | | 509 | 183,058 | | | | |
| 5. Current Year | | | | | | | | | | |
| 6. Current Year Member Months | 1,480,805 | | | | 2,666 | 1,478,139 | | | | |
| Total Member Ambulatory Encounters for Period: | | | | | | | | | | |
| 7. Physician | | | | | | | | | | |
| 8. Non-Physician | | | | | | | | | | |
| 9. Total | | | | | | | | | | |
| 10. Hospital Patient Days Incurred | | | | | | | | | | |
| 11. Number of Inpatient Admissions | | | | | | | | | | |
| 12. Health Premiums Written (a) | 39,784,771 | | | | 125,823 | 39,658,948 | | | | |
| 13. Life Premiums Direct | | | | | | | | | | |
| 14. Property/Casualty Premiums Written | | | | | | | | | | |
| 15. Health Premiums Earned | 39,784,771 | | | | 125,823 | 39,658,948 | | | | |
| 16. Property/Casualty Premiums Earned | | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services | 29,562,658 | | | | 30,804 | 29,531,854 | | | | |
| 18. Amount Incurred for Provision of Health Care Services | 29,943,258 | | | | 30,804 | 29,912,454 | | | | |

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

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

Aging Analysis of Unpaid Claims

| 1 Account | 2 1 - 30 Days | 3 31 - 60 Days | 4 61 - 90 Days | 5 91 - 120 days | 6 Over 120 Days | 7 Total |
|--|------------------|-------------------|-------------------|--------------------|--------------------|------------|
| 0199999 Individually Listed Claims Unpaid | | | | | | |
| 0299999 Aggregate Accounts Not Individually Listed - Uncovered | | | | | | |
| 0399999 Aggregate Accounts Not Individually Listed - Covered | 403,824 | 3,067 | 1,022 | 613 | 409 | 408,935 |
| 0499999 Subtotals | 403,824 | 3,067 | 1,022 | 613 | 409 | 408,935 |
| 0599999 Unreported claims and other claim reserves | | | | | | 1,294,965 |
| 0699999 Total Amounts Withheld | | | | | | |
| 0799999 Total Claims Unpaid | | | | | | 1,703,900 |
| 0899999 Accrued Medical Incentive Pool And Bonus Amounts | | | | | | |

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

| | Claims Paid Year to Date | | Liability End of Current Quarter | | 5 | 6 |
|---|---|------------------------------------|---------------------------------------|------------------------------------|--|--|
| | 1 | 2 | 3 | 4 | Claims Incurred in Prior Years (Columns 1+3) | Estimated Claim Reserve and Claim Liability Dec 31 of Prior Year |
| | On Claims Incurred Prior to January 1 of Current Year | On Claims Incurred During the Year | On Claims Unpaid Dec 31 of Prior Year | On Claims Incurred During the Year | | |
| 1. Comprehensive (hospital & medical) | | | | | | |
| 2. Medicare Supplement | | | | | | |
| 3. Dental only | 1,022,293 | 28,509,561 | 22,000 | 1,681,900 | 1,044,293 | 1,323,300 |
| 4. Vision only | | 30,804 | | | | |
| 5. Federal Employees Health Benefits Plan | | | | | | |
| 6. Title XVIII - Medicare | | | | | | |
| 7. Title XIX - Medicaid | | | | | | |
| 8. Other health | | | | | | |
| 9. Health subtotal (Lines 1 to 8) | 1,022,293 | 28,540,365 | 22,000 | 1,681,900 | 1,044,293 | 1,323,300 |
| 10. Healthcare receivables (a) | | | | | | |
| 11. Other non-health | | | | | | |
| 12. Medical incentive pools and bonus amounts | | | | | | |
| 13. Totals (Lines 9 - 10 + 11 + 12) | 1,022,293 | 28,540,365 | 22,000 | 1,681,900 | 1,044,293 | 1,323,300 |

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

Notes to Financial Statement

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of Delta Dental Plan of New Mexico (the Company) are presented on the basis of accounting practices prescribed or permitted by the New Mexico Office of the Superintendent of Insurance in accordance with the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual*.

The New Mexico Office of the Superintendent of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of New Mexico for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the New Mexico Insurance Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures* manual has been adopted as a component of prescribed or permitted practices by the state of New Mexico. The state has not adopted any accounting practices that differ from those found in NAIC SAP with regards to completion of Delta Dental Plan of New Mexico's financial statements.

| Description | SSAP# | F/S Page | F/S Line # | 9/30/2020 | 12/31/2019 |
|-----------------------------------|-------|----------|------------|--------------|--------------|
| Net Income, NM | | | | \$4,948,749 | \$4,060,889 |
| Effect of NM prescribed practices | | | | - | - |
| Effect of NM permitted practices | | | | - | - |
| Net income, NAIC SAP | | | | \$4,948,749 | \$4,060,889 |
| | | | | | |
| Description | SSAP# | F/S Page | F/S Line # | 9/30/2020 | 12/31/2019 |
| Statutory Surplus, NM | | | | \$60,855,969 | \$55,430,152 |
| Effect of NM prescribed practices | | | | - | - |
| Effect of NM permitted practices | | | | - | - |
| Policyholders Surplus, NAIC SAP | | | | \$60,855,969 | \$55,430,152 |

B. Use of Estimates in the 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 Policy

Health premiums are earned ratably over the terms of the related insurance contracts or policies. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred.

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 amortized cost using the interest method.
- (3) Common stocks are recorded at market value.
- (4) Preferred stocks are stated in accordance with the guidance provided in SSAP No. 32.
- (5) No mortgage loans on real estate are held as of September 30, 2020 and 2019.
- (6) Loan backed securities are stated at amortized cost. The retrospective adjustment method is used to value MBS's and the scientific interest method is used to value CMO's.
- (7) The Company carries its investment in a non-insurance affiliate at the audited GAAP equity basis adjusted to a statutory equity basis.
- (8) The Company has no ownership interest in joint ventures, partnership or limited liability companies as of September 30, 2020 and 2019.
- (9) No derivatives are held as of September 30, 2020 and 2019.
- (10) Not applicable.
- (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 necessarily 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 liability 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.
- (13) Not applicable

C. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

The Company had no accounting changes or correction of errors during fiscal years 2020 and 2019.

Notes to Financial Statement

3. Business Combinations and Goodwill

The Company had no goodwill on its books and no business combinations occurred during 2020 and 2019.

4. Discontinued Operations

The Company had no discontinued operations during the fiscal years ending September 30, 2020 and 2019.

5. Investments

- A. The Company owned no mortgage loans.
 B. The Company had no investments in restructured debt.
 C. The Company had no investments in reverse mortgages.
 D. The Company had no investments in loan backed securities that are recorded at other-than-temporarily impaired values.
 E. The Company had no repurchase agreements or securities lending agreements.
 F. The Company does not have investments in real estate.
 G. None.
 H. None.
 I. None.
 J. None.
 K. None.
 L. Restricted Assets

(1) Restricted Assets (Including Pledged)

| Restricted Asset Category | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|--|---|---|----------------------------------|---|--|---|---|
| | Total Gross (Admitted & Nonadmitted) Restricted from Current Year | Total Gross (Admitted & Nonadmitted) Restricted from Prior Year | Increase/ (Decrease) (1 minus 2) | Total Current Year Nonadmitted Restricted | Total Current Year Admitted Restricted (1 minus 4) | Gross (Admitted & Nonadmitted) Restricted | Admitted Restricted to Total Admitted Asset (b) |
| a. Subject to contractual obligation for which liability is not shown | \$ - | \$ - | \$ - | \$ - | \$ - | 0.00% | 0.00% |
| b. Collateral held under security lending agreements | | | | | | | |
| c. Subject to repurchase agreements | | | | | | | |
| d. Subject to reserve repurchase agreement | | | | | | | |
| e. Subject to dollar repurchase agreements | | | | | | | |
| f. Subject to dollar reserve repurchase agreements | | | | | | | |
| g. Placed under option contracts | | | | | | | |
| h. Letter stock or securities restricted as to sale - excluding FHLB capital stock | | | | | | | |
| i. FHLB capital stock | | | | | | | |
| j. On deposit with state | 247,673 | 246,569 | 1,104 | - | 247,673 | 0.37% | 0.37% |
| k. On deposit with other regulatory bodies | | | | | | | |
| l. Pledged as collateral to FHLB (including assets backing funding agreements) | | | | | | | |
| m. Pledged as collateral not captured in other categories | | | | | | | |
| n. Other restricted assets | | | | | | | |
| o. Total Restricted Assets | \$ 247,673 | \$ 246,569 | \$ 1,104 | \$ - | \$ 247,673 | 0.37% | 0.37% |

2,3 & 4 – Not applicable

M-Q. Not applicable.

Notes to Financial Statement

R. Prepayment Penalty and Acceleration Fees

General Account

| | | | |
|---|----|---|--|
| (1) Number of CUSIPS | | - | |
| (2) Aggregate Amount of Investment Income | \$ | - | |

6. Joint Ventures, Partnerships and Limited Liability Companies

The Company has no investments in joint ventures, partnerships or limited liability companies.

7. Investment Income

No due and accrued income was excluded from surplus in 2020 and 2019.

8. Derivative Instruments

The Company held no derivative instruments in 2020 and 2019.

9. Income Taxes

The Company is exempt from federal income taxes under provisions of Section 501(c) (4) of the Internal Revenue.

10. Information Concerning Parent, Subsidiaries and Affiliates

No change.

11. Debt

No change.

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

No Change.

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

No change.

14. Contingencies

The Company, along with the Delta Dental Plan Association (DDPA), Delta USA and other independent DDPA member companies, is defending a collection of lawsuits that have been filed in district courts across the country and consolidated into one case in the United States District Court for the Northern District of Illinois. The plaintiffs, representing the purported classes of dental providers, allege that various Association member company licensing standards violate federal antitrust laws. The Company believes the claims are meritless and intends to vigorously defend the case. At this point, it is too early in the proceedings to determine the outcome of the matter or the range or amount of any potential loss.

15. Leases

No change.

16. Information About Financial Instruments With Off-Balance Sheet Risk And Financial Instruments With Concentrations of Credit Risk

No change.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A. The Company had no transfers of receivables reported as sales.
- B. The Company had no transfer or servicing of Financial Assets.
- C. The Company was not involved in any wash sales during the periods presented in these statements.

18. Gains or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans

No change.

19. Direct Premiums Written/Produced by Managing General Agents/Third Party Administrators

No change.

Notes to Financial Statement

20. Fair Value Measurements

A.

1. Fair Value Measurements at Reporting Date

| Description | (Level 1) | (Level 2) | (Level 3) | Total | Net Asset Values (NAV) Included in Level 2 |
|---|---------------------|------------|------------|---------------------|--|
| a. Assets at fair value | | | | | |
| Perpetual Preferred stock | | | | | |
| Industrial & Misc | \$0 | \$0 | \$0 | \$0 | |
| Parent, Subs, and Affiliate | 0 | 0 | 0 | \$0 | \$0 |
| Total Perpetual Preferred Stocks | \$0 | \$0 | \$0 | \$0 | \$0 |
| Bonds | | | | | |
| U.S. Governments | \$0 | \$0 | \$0 | \$0 | \$0 |
| Industrial & Misc | 2,712,501 | 0 | 0 | 2,712,501 | 0 |
| Hybrid Securities | 0 | 0 | 0 | 0 | 0 |
| Parent, Subs, and Affiliate | 0 | 0 | 0 | 0 | 0 |
| Total Bonds | \$2,712,501 | \$0 | \$0 | \$2,712,501 | \$0 |
| Common stock | | | | | |
| Industrial & Misc | \$23,094,856 | \$0 | \$0 | \$23,094,856 | \$0 |
| Parent, Subs, and Affiliate | 0 | 0 | 0 | 0 | 0 |
| Total Common Stocks | \$23,094,856 | \$0 | \$0 | \$23,094,856 | \$0 |
| Derivative assets | | | | | |
| Interest rate contracts | \$0 | \$0 | \$0 | \$0 | \$0 |
| Foreign exchange contracts | 0 | 0 | 0 | 0 | 0 |
| Credit contracts | 0 | 0 | 0 | 0 | 0 |
| Commodity futures contracts | 0 | 0 | 0 | 0 | 0 |
| Commodity forward contracts | 0 | 0 | 0 | 0 | 0 |
| Total Derivatives | \$0 | \$0 | \$0 | \$0 | \$0 |
| Separate account assets | \$0 | \$0 | \$0 | \$0 | \$0 |
| Total assets at fair value | \$25,807,357 | \$0 | \$0 | \$25,807,357 | \$0 |
| b. Liabilities at fair value | | | | | |
| Derivative liabilities | \$0 | \$0 | \$0 | \$0 | \$0 |
| Total liabilities at fair value | \$0 | \$0 | \$0 | \$0 | \$0 |

2. None

3. None

4. None

5. None

B. None

C. Financial Instruments

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | Net Asset Value (NAV) | Net Practicable (Carrying Value) |
|------------------------------|----------------------|-----------------|--------------|---------------|-----------|-----------------------|----------------------------------|
| Bonds | \$ 30,956,922 | \$ 30,219,869 | \$ 2,712,501 | \$ 28,244,421 | \$ - | \$ - | \$ - |
| Common Stock | 23,094,856 | 23,094,856 | 23,094,856 | - | - | - | - |
| Perpetual Preferred Stock | - | - | - | - | - | - | - |
| Mortgage Loans | - | - | - | - | - | - | - |

D. None

21. Other Items

Due to COVID-19, the Company returned unused premium to groups in June 2020 in the amount of \$4.4M.

Notes to Financial Statement

22. Events Subsequent

The large-scale COVID-19 pandemic has not yet impacted the Company's workforce or business operations, but may cause disruptions in commerce and economic activity if the pandemic expands over an extended period of time.

23. Reinsurance

The Company has no ceded reinsurance agreements.

24. Retrospectively Rated Contracts & Contracts Subject to Re-determination

No change.

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2019 were \$1,400,462. In September 30, 2020, \$1,099,455 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Remaining reserves for prior years are now \$22,000 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$279,007 favorable prior-year loss development since September 30, 2020 to December 31, 2019. This 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. The business to which this relates does not include retrospectively rated policies, therefore there was no return premium accrued as a result of the prior year effects.

26. Intercompany Pooling Arrangements

The Company had no intercompany pooling arrangements during 2020 and 2019.

27. Structured Settlements

Not applicable.

28. Health Care Receivables

The Company reported no pharmaceutical rebate receivables or risk sharing receivables in 2020 and 2019.

29. Participating Policies

The Company did not have participating contracts in 2020 and 2019.

30. Premium Deficiency Reserves

| | |
|---|-----------|
| 1. Liability carried for premium deficiency reserves | \$ 0 |
| 2. Date of the most recent evaluation of this liability | 9/30/2020 |
| 3. Was anticipated investment income utilized in the calculation? | Yes No X |

31. Anticipated Salvage and Subrogation

No change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes[] No[X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes[] No[] N/A[X]

- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes[] No[X]
- 2.2 If yes, date of change:

- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes[X] No[]
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes[] No[X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes:
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes[] No[X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes[] No[X]
If yes, complete and file the merger history data file with the NAIC.
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

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

- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2019
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2016
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 02/07/2018
- 6.4 By what department or departments?
New Mexico Office of Superintendent of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes[] No[] N/A[X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes[X] No[] N/A[]

- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes[] No[X]
- 7.2 If yes, give full information

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes[] No[X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes[] No[X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

| 1 Affiliate Name | 2 Location (City, State) | 3 FRB | 4 OCC | 5 FDIC | 6 SEC |
|---------------------|-----------------------------|----------------|----------------|----------------|----------------|
| | | No | No | No | No |

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes[X] No[]
 - (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - (c) Compliance with applicable governmental laws, rules and regulations;
 - (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended? Yes[] No[X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes[] No[X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

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

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes[] No[X]
- 11.2 If yes, give full and complete information relating thereto:

- 12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$ 0
- 13. Amount of real estate and mortgages held in short-term investments: \$ 0

- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes[X] No[]

GENERAL INTERROGATORIES (Continued)

INVESTMENT

14.2 If yes, please complete the following:

| | 1 Prior Year-End Book/Adjusted Carrying Value | 2 Current Quarter Book/Adjusted Carrying Value |
|---|--|---|
| 14.21 Bonds | | |
| 14.22 Preferred Stock | | |
| 14.23 Common Stock | 3,873,197 | 6,000,041 |
| 14.24 Short-Term Investments | | |
| 14.25 Mortgages Loans on Real Estate | | |
| 14.26 All Other | | |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | 3,873,197 | 6,000,041 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | | |

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

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0
 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0
 16.3 Total payable for securities lending reported on the liability page \$ 0

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes[X] No[]

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

| 1 Name of Custodian(s) | 2 Custodian Address |
|---------------------------|--|
| Bank of America | 135 S. LaSalle St. Chicago, IL 60603 |

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes[] No[X]

17.4 If yes, give full and complete information relating thereto:

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

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

| 1 Name of Firm or Individual | 2 Affiliation |
|--|------------------|
| Red Cedar Investment Management. LLC | A |
| Amy L Basel | A |
| Goran M. Jurkovic | A |

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

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

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

| 1 Central Registration Depository Number | 2 Name of Firm or Individual | 3 Legal Entity Identifier (LEI) | 4 Registered With | 5 Investment Management Agreement (IMA) Filed |
|--|--|---------------------------------------|-------------------------|---|
| 170939 | Red Cedar Investment Management. LLC | n/a | SEC | NO |

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes[X] No[]

18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
 a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 b. Issuer or obligor is current on all contracted interest and principal payments.
 c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
 Has the reporting entity self-designated 5GI securities? Yes[] No[X]

GENERAL INTERROGATORIES (Continued)

20. By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities? Yes[] No[X]
21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The 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? Yes[] No[X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

- | | |
|---|---------------|
| 1. Operating Percentages: | |
| 1.1 A&H loss percent | 76.000% |
| 1.2 A&H cost containment percent | 1.000% |
| 1.3 A&H expense percent excluding cost containment expenses | 18.000% |
| 2.1 Do you act as a custodian for health savings accounts? | Yes[] No[X] |
| 2.2 If yes, please provide the amount of custodial funds held as of the reporting date. | \$..... 0 |
| 2.3 Do you act as an administrator for health savings accounts? | Yes[] No[X] |
| 2.4 If yes, please provide the balance of the funds administered as of the reporting date. | \$..... 0 |
| 3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? | Yes[] No[X] |
| 3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? | Yes[] No[X] |

SCHEDULE S - CEDED REINSURANCE
Showing All New Reinsurance Treaties - Current Year to Date

| 1 NAIC Company Code | 2 ID Number | 3 Effective Date | 4 Name of Reinsurer | 5 Domiciliary Jurisdiction | 6 Type of Reinsurance Ceded | 7 Type of Business Ceded | 8 Type of Reinsurer | 9 Certified Reinsurer Rating (1 through 6) | 10 Effective Date of Certified Reinsurer Rating |
|------------------------------|-------------------|------------------------|------------------------|----------------------------------|--------------------------------------|-----------------------------------|---------------------------|---|--|
| | | | NONE | | | | | | |

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

| State, Etc. | 1 Active Status (a) | Direct Business Only | | | | | | | |
|--|------------------------|-----------------------------------|---------------------------|-------------------------|---|---|---------------------------------|--------------------------------|-----------------------------|
| | | 2 Accident and Health Premiums | 3 Medicare Title XVIII | 4 Medicaid Title XIX | 5 Federal Employees Health Benefits Program Premiums | 6 Life and Annuity Premiums and Other Considerations | 7 Property/Casualty Premiums | 8 Total Columns 2 Through 7 | 9 Deposit-Type Contracts |
| 1. Alabama (AL) | N | | | | | | | | |
| 2. Alaska (AK) | N | | | | | | | | |
| 3. Arizona (AZ) | N | | | | | | | | |
| 4. Arkansas (AR) | N | | | | | | | | |
| 5. California (CA) | N | | | | | | | | |
| 6. Colorado (CO) | N | | | | | | | | |
| 7. Connecticut (CT) | N | | | | | | | | |
| 8. Delaware (DE) | N | | | | | | | | |
| 9. District of Columbia (DC) | N | | | | | | | | |
| 10. Florida (FL) | N | | | | | | | | |
| 11. Georgia (GA) | N | | | | | | | | |
| 12. Hawaii (HI) | N | | | | | | | | |
| 13. Idaho (ID) | N | | | | | | | | |
| 14. Illinois (IL) | N | | | | | | | | |
| 15. Indiana (IN) | N | | | | | | | | |
| 16. Iowa (IA) | N | | | | | | | | |
| 17. Kansas (KS) | N | | | | | | | | |
| 18. Kentucky (KY) | N | | | | | | | | |
| 19. Louisiana (LA) | N | | | | | | | | |
| 20. Maine (ME) | N | | | | | | | | |
| 21. Maryland (MD) | N | | | | | | | | |
| 22. Massachusetts (MA) | N | | | | | | | | |
| 23. Michigan (MI) | N | | | | | | | | |
| 24. Minnesota (MN) | N | | | | | | | | |
| 25. Mississippi (MS) | N | | | | | | | | |
| 26. Missouri (MO) | N | | | | | | | | |
| 27. Montana (MT) | N | | | | | | | | |
| 28. Nebraska (NE) | N | | | | | | | | |
| 29. Nevada (NV) | N | | | | | | | | |
| 30. New Hampshire (NH) | N | | | | | | | | |
| 31. New Jersey (NJ) | N | | | | | | | | |
| 32. New Mexico (NM) | L | 39,784,771 | | | | | | 39,784,771 | |
| 33. New York (NY) | N | | | | | | | | |
| 34. North Carolina (NC) | N | | | | | | | | |
| 35. North Dakota (ND) | N | | | | | | | | |
| 36. Ohio (OH) | N | | | | | | | | |
| 37. Oklahoma (OK) | N | | | | | | | | |
| 38. Oregon (OR) | N | | | | | | | | |
| 39. Pennsylvania (PA) | N | | | | | | | | |
| 40. Rhode Island (RI) | N | | | | | | | | |
| 41. South Carolina (SC) | N | | | | | | | | |
| 42. South Dakota (SD) | N | | | | | | | | |
| 43. Tennessee (TN) | N | | | | | | | | |
| 44. Texas (TX) | N | | | | | | | | |
| 45. Utah (UT) | N | | | | | | | | |
| 46. Vermont (VT) | N | | | | | | | | |
| 47. Virginia (VA) | N | | | | | | | | |
| 48. Washington (WA) | N | | | | | | | | |
| 49. West Virginia (WV) | N | | | | | | | | |
| 50. Wisconsin (WI) | N | | | | | | | | |
| 51. Wyoming (WY) | N | | | | | | | | |
| 52. American Samoa (AS) | N | | | | | | | | |
| 53. Guam (GU) | N | | | | | | | | |
| 54. Puerto Rico (PR) | N | | | | | | | | |
| 55. U.S. Virgin Islands (VI) | N | | | | | | | | |
| 56. Northern Mariana Islands (MP) | N | | | | | | | | |
| 57. Canada (CAN) | N | | | | | | | | |
| 58. Aggregate other alien (OT) | X X X | | | | | | | | |
| 59. Subtotal | X X X | 39,784,771 | | | | | | 39,784,771 | |
| 60. Reporting entity contributions for Employee Benefit Plans | X X X | | | | | | | | |
| 61. Total (Direct Business) | X X X | 39,784,771 | | | | | | 39,784,771 | |
| DETAILS OF WRITE-INS | | | | | | | | | |
| 58001. | X X X | | | | | | | | |
| 58002. | X X X | | | | | | | | |
| 58003. | X X X | | | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | X X X | | | | | | | | |
| 58999. TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above) | X X X | | | | | | | | |

(a) Active Status Counts:

- L Licensed or Chartered - Licensed insurance carrier or domiciled RRG
- E Eligible - Reporting entities eligible or approved to write surplus lines in the state
- N None of the above - Not allowed to write business in the state

1

- R Registered - Non-domiciled RRGs
- Q Qualified - Qualified or accredited reinsurer

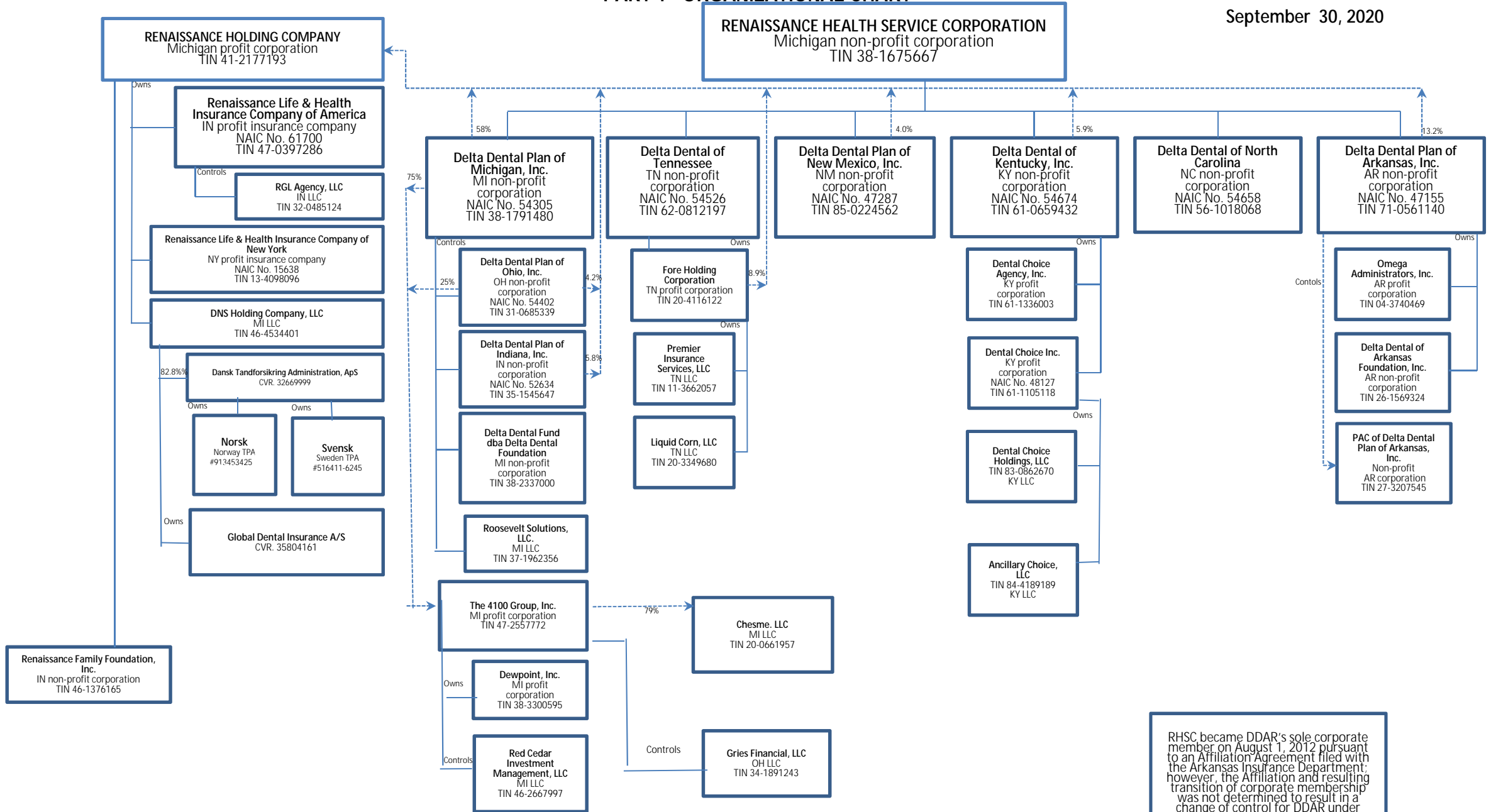
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SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

ORGANIZATIONAL CHART
September 30, 2020



RHSC became DDAR's sole corporate member on August 1, 2012 pursuant to an Affiliation Agreement filed with the Arkansas Insurance Department; however, the Affiliation and resulting transition of corporate membership was not determined to result in a change of control for DDAR under Arkansas law based on review and discussion at that time.

Q15

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|--|-------------------|------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | FEDERAL RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity / Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies) / Person(s) | Is an SCA Filing Required? (Y/N) | * |
| | | 0 | 38-1675667 | | | | Renaissance Health Service Corporation | MI | UDP | | | | | N | |
| | | 0 | 46-1376165 | | | | Renaissance Family Foundation, Inc. | IN | NIA | | | | | N | |
| | | 0 | 41-2177193 | | | | Renaissance Holding Company | MI | NIA | Delta Dental Plan of Michigan, Inc. | Ownership | 58.0 | Renaissance Health Service Corporation | Y | |
| | | 0 | 41-2177193 | | | | Renaissance Holding Company | MI | NIA | Delta Dental Plan of Ohio, Inc. | Ownership | 4.2 | Renaissance Health Service Corporation | Y | |
| | | 0 | 41-2177193 | | | | Renaissance Holding Company | MI | NIA | Delta Dental Plan of Indiana, Inc. | Ownership | 5.8 | Renaissance Health Service Corporation | Y | |
| | | 0 | 41-2177193 | | | | Renaissance Holding Company | MI | NIA | Fore Holding Corporation | Ownership | 8.9 | Renaissance Health Service Corporation | N | |
| | | 0 | 41-2177193 | | | | Renaissance Holding Company | MI | NIA | Delta Dental of Kentucky, Inc. | Ownership | 5.9 | Renaissance Health Service Corporation | Y | |
| | | 0 | 41-2177193 | | | | Renaissance Holding Company | MI | NIA | Delta Dental Plan of New Mexico, Inc. | Ownership | 4.0 | Renaissance Health Service Corporation | N | |
| | | 0 | 41-2177193 | | | | Renaissance Holding Company | MI | NIA | Delta Dental Plan of Arkansas, Inc. | Ownership | 13.2 | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 61700 | 47-0397286 | | | | Renaissance Life & Health Insurance Company of America | IN | IA | Renaissance Holding Company | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | 0 | 32-0485124 | | | | RGL Agency, LLC | IN | NIA | Renaissance Life & Health Insurance Company of America | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 15638 | 13-4098096 | | | | Renaissance Life & Health Insurance Company of New York | NY | IA | Renaissance Holding Company | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | 0 | 46-4534401 | | | | DNS Holding Company, LLC | MI | NIA | Renaissance Holding Company | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | 0 | 32669999 | | | | Dansk Tandforsikring Administration ApS | DNK | NIA | DNS Holding Company, LLC | Ownership | 82.8 | Renaissance Health Service Corporation | N | |
| | | 0 | 35804161 | | | | Global Dental Company A/S | DNK | NIA | DNS Holding Company, LLC | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 54305 | 38-1791480 | | | | Delta Dental Plan of Michigan, Inc. | MI | IA | Renaissance Health Service Corporation | Board of Directors | | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 54402 | 31-0685339 | | | | Delta Dental Plan of Ohio, Inc. | OH | IA | Delta Dental Plan of Michigan, Inc. | Board of Directors | | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 52634 | 35-1545647 | | | | Delta Dental Plan of Indiana, Inc. | IN | IA | Delta Dental Plan of Michigan, Inc. | Board of Directors | | Renaissance Health Service Corporation | N | |
| | | 0 | 38-2337000 | | | | Delta Dental Fund dba Delta Dental Foundation | MI | NIA | Delta Dental Plan of Michigan, Inc. | Board of Directors | | Renaissance Health Service Corporation | N | |
| | | 0 | 46-2667997 | | | | Red Cedar Investment Management, LLC | MI | NIA | The 4100 Group, Inc. | Board of Directors | | Renaissance Health Service Corporation | N | |
| | | 0 | 47-2557772 | | | | The 4100 Group, Inc. | MI | NIA | Delta Dental Plan of Michigan, Inc. | Ownership | 75.0 | Renaissance Health Service Corporation | Y | |
| | | 0 | 47-2557772 | | | | The 4100 Group, Inc. | MI | NIA | Delta Dental Plan of Ohio, Inc. | Ownership | 25.0 | Renaissance Health Service Corporation | Y | |
| | | 0 | 38-3300595 | | | | Dewpoint, Inc. | MI | NIA | The 4100 Group, Inc. | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 54526 | 62-0812197 | | | | Delta Dental of Tennessee | TN | IA | Renaissance Health Service Corporation | Board of Directors | | Renaissance Health Service Corporation | N | |
| | | 0 | 20-4116122 | | | | Fore Holding Corporation | TN | NIA | Delta Dental of Tennessee | Ownership | 100.0 | Renaissance Health Service Corporation | Y | |
| | | 0 | 11-3662057 | | | | Premier Insurance Services, LLC | TN | NIA | Delta Dental of Tennessee | Ownership | 100.0 | Renaissance Health Service Corporation | N | |

Q16

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|------------|--|-------------------|-------------|--------------|-----|--|---|----------------------|----------------------------------|--|--|--|--|----------------------------------|----|
| Group Code | Group Name | NAIC Company Code | ID Number | FEDERAL RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries or Affiliates | Domiciliary Location | Relationship to Reporting Entity | Directly Controlled by (Name of Entity / Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percentage | Ultimate Controlling Entity(ies) / Person(s) | Is an SCA Filing Required? (Y/N) | * |
| | | 0 | 20-3349680 | | | | Liquid Corn, LLC | TN | NIA | Delta Dental of Tennessee | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 47287 | 85-0224562 | | | | Delta Dental Plan of New Mexico, Inc. | NM | RE | Renaissance Health Service Corporation | Board of Directors | | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 54674 | 61-0659432 | | | | Delta Dental of Kentucky, Inc. | KY | IA | Renaissance Health Service Corporation | Board of Directors | | Renaissance Health Service Corporation | N | |
| | | 0 | 61-1336003 | | | | Dental Choice Agency, Inc. | KY | NIA | Delta Dental of Kentucky, Inc. | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | | 48127 | | | | Dental Choice Inc. | KY | NIA | Delta Dental of Kentucky, Inc. | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 54658 | 56-1018068 | | | | Delta Dental of North Carolina | NC | IA | Renaissance Health Service Corporation | Board of Directors | | Renaissance Health Service Corporation | N | |
| 477 | Renaissance Health Service Corporation | 47155 | 71-0561140 | | | | Delta Dental Plan of Arkansas, Inc. | AR | IA | | | | | N | |
| | | 0 | 04-3740469 | | | | Omega Administrators, Inc. | AR | NIA | Delta Dental Plan of Arkansas, Inc. | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | 0 | 26-1569324 | | | | Delta Dental of Arkansas Foundation, Inc. | AR | NIA | Delta Dental Plan of Arkansas, Inc. | Board of Directors | | Renaissance Health Service Corporation | N | |
| | | 00000 | 83-0862670 | | | | Dental Choice Holdings, LLC | KY | NIA | Delta Choice Inc | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | 00000 | 20-0661957 | | | | Chesme, LLC | MI | NIA | The 4100 Group, Inc. | Ownership | 79.0 | Renaissance Health Service Corporation | N | |
| | | 00000 | 27-3207545 | | | | PAC of Delta Dental Plan of Arkansas, Inc. | AR | NIA | Delta Dental Plan of Arkansas, Inc. | Board of Directors | | Renaissance Health Service Corporation | N | |
| | | 0 | 91-3453245 | | | | Norsk | DNK | NIA | Dansk Tandforsikring Administration ApS | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | 0 | 51-64116245 | | | | Svensk | SWE | NIA | Dansk Tandforsikring Administration ApS | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | 00000 | 37-1962356 | | | | Roosevelt Solutions, LLC | MI | IA | Delta Dental Plan of Michigan, Inc. | Board of Directors | | Renaissance Health Service Corporation | N | |
| | | 00000 | 34-1891243 | | | | Gries Financial, LLC | OH | NIA | The 4100 Group, Inc | Ownership | 100.0 | Renaissance Health Service Corporation | N | |
| | | 00000 | 84-4189189 | | | | Ancillary Choice, LLC | KY | NIA | Delta Choice Inc | Ownership | 100.0 | Renaissance Health Service Corporation | N | |

Q16.1

| Asterisk | Explanation |
|----------|---|
| 0000001 | RHSC became DDAR's sole corporate member on August 1, 2012 pursuant to an Affiliation Agreement filed with the Arkansas Insurance Department; however, the Affiliation and resulting transition of corporate membership was not determined to result in a chang |

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

RESPONSE

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

No

Explanations:

Bar Codes:

Medicare Part D Coverage Supplement



47287202036500003

2020

Document Code: 365

OVERFLOW PAGE FOR WRITE-INS

STATEMENT AS OF **September 30, 2020** OF THE **Delta Dental Plan of New Mexico, Inc.**
SCHEDULE A - VERIFICATION

Real Estate

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

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

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

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value, December 31 of prior year | | 100,000 |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | | |
| 4. Accrual of discount | | |
| 5. Unrealized valuation increase (decrease) | | |
| 6. Total gain (loss) on disposals | | |
| 7. Deduct amounts received on disposals | | 100,000 |
| 8. Deduct amortization of premium and depreciation | | |
| 9. Total foreign exchange change in book/adjusted carrying value | | |
| 10. Deduct current year's other-than-temporary impairment recognized | | |
| 11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10) | | |
| 12. Deduct total nonadmitted amounts | | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | | |

SCHEDULE D - VERIFICATION

Bonds and Stocks

| | 1 Year To Date | 2 Prior Year Ended December 31 |
|--|-------------------|--------------------------------------|
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 52,331,801 | 44,066,724 |
| 2. Cost of bonds and stocks acquired | 34,963,909 | 42,800,792 |
| 3. Accrual of discount | 107,179 | 146,448 |
| 4. Unrealized valuation increase (decrease) | 1,259,630 | 2,410,682 |
| 5. Total gain (loss) on disposals | 2,066,046 | 217,582 |
| 6. Deduct consideration for bonds and stocks disposed of | 31,132,994 | 37,114,694 |
| 7. Deduct amortization of premium | 280,805 | 198,058 |
| 8. Total foreign exchange change in book/adjusted carrying value | | |
| 9. Deduct current year's other-than-temporary impairment recognized | | |
| 10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees | | 2,325 |
| 11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9 + 10) | 59,314,766 | 52,331,801 |
| 12. Deduct total nonadmitted amounts | | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 59,314,766 | 52,331,801 |

SCHEDULE D - PART 1B

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

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|---|--|---|---|---|--|---|--|--|
| NAIC Designation | Book/Adjusted Carrying Value Beginning of Current Quarter | Acquisitions During Current Quarter | Dispositions During Current Quarter | Non-Trading Activity During Current Quarter | Book/Adjusted Carrying Value End of First Quarter | Book/Adjusted Carrying Value End of Second Quarter | Book/Adjusted Carrying Value End of Third Quarter | Book/Adjusted Carrying Value December 31 Prior Year |
| BONDS | | | | | | | | |
| 1. NAIC 1 (a) | 22,248,536 | 5,049,532 | 3,502,587 | 73,160 | 21,016,670 | 22,248,536 | 23,868,641 | 20,968,017 |
| 2. NAIC 2 (a) | 6,845,214 | 1,063,695 | 1,636,284 | (106,118) | 8,576,036 | 6,845,214 | 6,166,507 | 7,572,052 |
| 3. NAIC 3 (a) | 185,597 | | 671 | (205) | 527,589 | 185,597 | 184,721 | 527,784 |
| 4. NAIC 4 (a) | | | | | 390,051 | | | 445,064 |
| 5. NAIC 5 (a) | | | | | | | | |
| 6. NAIC 6 (a) | | | | | | | | |
| 7. Total Bonds | 29,279,347 | 6,113,227 | 5,139,542 | (33,163) | 30,510,346 | 29,279,347 | 30,219,869 | 29,512,917 |
| PREFERRED STOCK | | | | | | | | |
| 8. NAIC 1 | | | | | | | | |
| 9. NAIC 2 | | | | | | | | |
| 10. NAIC 3 | | | | | | | | |
| 11. NAIC 4 | | | | | | | | |
| 12. NAIC 5 | | | | | | | | |
| 13. NAIC 6 | | | | | | | | |
| 14. Total Preferred Stock | | | | | | | | |
| 15. Total Bonds & Preferred Stock | 29,279,347 | 6,113,227 | 5,139,542 | (33,163) | 30,510,346 | 29,279,347 | 30,219,869 | 29,512,917 |

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

SI03 Schedule DA Part 1 NONE

SI03 Schedule DA Verification NONE

SI04 Schedule DB - Part A Verification NONE

SI04 Schedule DB - Part B Verification NONE

SI05 Schedule DB Part C Section 1 NONE

SI06 Schedule DB Part C Section 2 NONE

SI07 Schedule DB - Verification NONE

SCHEDULE E - PART 2 - VERIFICATION**(Cash Equivalents)**

| | | 1 | 2 |
|-----|--|--------------|---------------------------------|
| | | Year To Date | Prior Year Ended December 31 |
| 1. | Book/adjusted carrying value, December 31 of prior year | 3,416,198 | 3,744,149 |
| 2. | Cost of cash equivalents acquired | 24,238,787 | 30,924,149 |
| 3. | Accrual of discount | | |
| 4. | Unrealized valuation increase (decrease) | | |
| 5. | Total gain (loss) on disposals | | |
| 6. | Deduct consideration received on disposals | 25,202,948 | 31,252,100 |
| 7. | Deduct amortization of premium | | |
| 8. | Total foreign exchange change in book/adjusted carrying value | | |
| 9. | Deduct current year's other-than-temporary impairment recognized | | |
| 10. | Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9) | 2,452,037 | 3,416,198 |
| 11. | Deduct total nonadmitted amounts | | |
| 12. | Statement value at end of current period (Line 10 minus Line 11) | 2,452,037 | 3,416,198 |

E01 Schedule A Part 2 NONE

E01 Schedule A Part 3 NONE

E02 Schedule B Part 2 NONE

E02 Schedule B Part 3 NONE

E03 Schedule BA Part 2 NONE

E03 Schedule BA Part 3 NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--|--|---------|---------------|-------------------|---------------------------|-------------|-----------|---|--|
| CUSIP Identification | Description | Foreign | Date Acquired | Name of Vendor | Number of Shares of Stock | Actual Cost | Par Value | Paid for Accrued Interest and Dividends | NAIC Designation and Administrative Symbol |
| Bonds - U.S. Governments | | | | | | | | | |
| 912810SN9 | UNITED STATES TREAS BDS | | 09/22/2020 | Bank of America | X X X | 213,200 | 215,000 | 608 | 1 |
| 912828T26 | UNITED STATES TREAS NTS | | 09/22/2020 | Bank of America | X X X | 274,952 | 265,000 | 1,351 | 1 |
| 912828YF1 | UNITED STATES TREAS NTS | | 09/18/2020 | Bank of America | X X X | 565,127 | 550,000 | 799 | 1 |
| 912828ZJ2 | UNITED STATES TREAS NTS | | 07/15/2020 | Bank of America | X X X | 545,352 | 520,000 | 162 | 1 |
| 912828ZL7 | UNITED STATES TREAS NTS | | 09/08/2020 | Bank of America | X X X | 664,165 | 660,000 | 732 | 1 |
| 912828ZQ6 | UNITED STATES TREAS NTS | | 09/22/2020 | Bank of America | X X X | 789,921 | 790,000 | 1,287 | 1 |
| 0599999 | Subtotal - Bonds - U.S. Governments | | | | X X X | 3,052,717 | 3,000,000 | 4,939 | X X X |
| Bonds - U.S. Special Revenue, Special Assessment | | | | | | | | | |
| 31418DRS3 | FNMA UMBS LNG 30 YEAR | | 08/10/2020 | Bank of America | X X X | 283,545 | 269,082 | 224 | 1 |
| 31418DQ88 | FNMA UMBS LNG 30 YEAR | | 07/14/2020 | Bank of America | X X X | 540,856 | 518,768 | 468 | 1 |
| 30285FAE9 | FREMF MTG TR 2014-K40 144A | | 07/23/2020 | Bank of America | X X X | 276,211 | 250,000 | 760 | 1 |
| 3199999 | Subtotal - Bonds - U.S. Special Revenue, Special Assessment | | | | X X X | 1,100,612 | 1,037,849 | 1,452 | X X X |
| Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | | | | | |
| 00206RKE1 | AT&T INC | | 07/27/2020 | Bank of America | X X X | 271,623 | 270,000 | | 1FE |
| 44891PAC8 | HYUNDAI AUTO LEASE TR 2020-B 144A | | 09/18/2020 | Bank of America | X X X | 249,984 | 250,000 | | 1FE |
| 477854AA1 | JOHN D & CATHERINE T MACARTHUR | | 08/20/2020 | Bank of America | X X X | 75,000 | 75,000 | | 1FE |
| 478160CN2 | JOHNSON & JOHNSON | | 08/20/2020 | Bank of America | X X X | 149,837 | 150,000 | | 1FE |
| 89788MAC6 | TRUIST FINL CORP | | 08/01/2020 | Bank of America | X X X | 149,759 | 150,000 | | 1FE |
| 06368BGS1 | BANK MONTREAL QUE LW TIER II | C | 07/28/2020 | Bank of America | X X X | 22,243 | 20,000 | 95 | 2FE |
| 3899999 | Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | X X X | 918,446 | 915,000 | 95 | X X X |
| Bonds - SVO Identified Funds | | | | | | | | | |
| 78464A474 | SPDR SERIES TRUST | | 09/21/2020 | Bank of America | 33,139.000 | 1,041,452 | | | 2 |
| 8099999 | Subtotal - Bonds - SVO Identified Funds | | | | X X X | 1,041,452 | | | X X X |
| 8399997 | Subtotal - Bonds - Part 3 | | | | X X X | 6,113,227 | 4,952,849 | 6,486 | X X X |
| 8399998 | Summary Item from Part 5 for Bonds (N/A to Quarterly) | | | | X X X | X X X | X X X | X X X | X X X |
| 8399999 | Subtotal - Bonds | | | | X X X | 6,113,227 | 4,952,849 | 6,486 | X X X |
| 8999998 | Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly) | | | | X X X | X X X | X X X | X X X | X X X |
| 8999999 | Subtotal - Preferred Stocks | | | | X X X | X X X | X X X | X X X | X X X |
| Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded | | | | | | | | | |
| 002824100 | ABBOTT LABS | | 09/02/2020 | MORGAN STANLEY CO | 338.000 | 35,558 | X X X | | |
| 009158106 | AIR PRODS & CHEMS INC | | 09/14/2020 | MORGAN STANLEY CO | 99.000 | 29,231 | X X X | | |
| 023135106 | AMAZON COM INC | | 09/02/2020 | MERRILL LYNCH | 23.000 | 74,446 | X X X | | |
| 032654105 | ANALOG DEVICES INC | | 07/09/2020 | MORGAN STANLEY CO | 109.000 | 13,245 | X X X | | |
| 086516101 | BEST BUY INC | | 07/09/2020 | RAYMOND JAMES | 153.000 | 12,930 | X X X | | |
| 09247X101 | BLACKROCK INC | | 07/20/2020 | Bank of America | 30.000 | 17,484 | X X X | | |
| 11135F101 | BROADCOM INC COM | | 09/14/2020 | Bank of America | 105.000 | 38,639 | X X X | | |
| 172908105 | CINTAS CORP | | 09/02/2020 | Bank of America | 122.000 | 37,618 | X X X | | |
| 253393102 | DICKS SPORTING GOODS INC | | 09/14/2020 | Bank of America | 571.000 | 32,262 | X X X | | |
| 30303M102 | FACEBOOK INC | | 09/02/2020 | Bank of America | 379.000 | 96,920 | X X X | | |
| 437076102 | HOME DEPOT INC | | 07/09/2020 | Bank of America | 53.000 | 13,153 | X X X | | |
| 452308109 | ILLINOIS TOOL WKS INC | | 08/05/2020 | Bank of America | 77.000 | 14,486 | X X X | | |
| 57636Q104 | MASTERCARD INC | | 09/02/2020 | Bank of America | 42.000 | 15,068 | X X X | | |
| 654106103 | NIKE INC | | 09/02/2020 | Bank of America | 244.000 | 25,551 | X X X | | |
| 74340W103 | PROLOGIS INC | | 08/05/2020 | Bank of America | 272.000 | 28,602 | X X X | | |
| 824348106 | SHERWIN WILLIAMS CO | | 09/14/2020 | Bank of America | 41.000 | 28,152 | X X X | | |
| G1151C101 | ACCENTURE PLC IRELAND | C | 08/05/2020 | Bank of America | 214.000 | 47,539 | X X X | | |
| 9099999 | Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded | | | | X X X | 560,884 | X X X | | X X X |

QE04

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

| 1 CUSIP Identification | 2 Description | 3 Foreign | 4 Date Acquired | 5 Name of Vendor | 6 Number of Shares of Stock | 7 Actual Cost | 8 Par Value | 9 Paid for Accrued Interest and Dividends | 10 NAIC Designation and Administrative Symbol |
|-------------------------------------|---|--------------|--------------------|------------------------|-----------------------------------|------------------|----------------|--|--|
| Common Stocks - Mutual Funds | | | | | | | | | |
| 19766J623 | COLUMBIA FDS SER TR II MASS | | 08/20/2020 | Bank of America | 134,803.920 | 550,000 | X X X | | 1 |
| 464287622 | ISHARES TR | | 08/26/2020 | Bank of America | 2,854.000 | 552,130 | X X X | | 1 |
| 75644E103 | RED CEDAR FUND TRUST | | 09/30/2020 | Bank of America | 2,956.610 | 30,137 | X X X | | 1 |
| 80343J460 | SARATOGA ADVANTAGE TR | | 09/25/2020 | Bank of America | 5,744.440 | 62,369 | X X X | | 1 |
| 808524805 | SCHWAB INTL EQUITY | | 08/19/2020 | Bank of America | 10,114.000 | 324,199 | X X X | | 1 |
| 922908363 | VANGUARD INDEX FDS | | 07/28/2020 | Bank of America | 6,293.000 | 1,853,639 | X X X | | 1 |
| 922908850 | VANGUARD INDEX FDS | | 09/24/2020 | Bank of America | 141.450 | 5,614 | X X X | | 1 |
| 922042874 | VANGUARD INTL EQUITY INDEX FDS | | 07/28/2020 | Bank of America | 14,166.000 | 760,087 | X X X | | 1 |
| 92206C664 | VANGUARD SCOTTSDALE FDS | | 09/10/2020 | Bank of America | 5,772.000 | 703,095 | X X X | | 1 |
| 92206C730 | VANGUARD SCOTTSDALE FDS | | 08/06/2020 | Bank of America | 4,277.000 | 657,802 | X X X | | 1 |
| 9499999 | Subtotal - Common Stocks - Mutual Funds | | | | X X X | 5,499,072 | X X X | | X X X |
| 9799997 | Subtotal - Common Stocks - Part 3 | | | | X X X | 6,059,956 | X X X | | X X X |
| 9799998 | Summary Item from Part 5 for Common Stocks (N/A to Quarterly) | | | | X X X | X X X | X X X | X X X | X X X |
| 9799999 | Subtotal - Common Stocks | | | | X X X | 6,059,956 | X X X | | X X X |
| 9899999 | Subtotal - Preferred and Common Stocks | | | | X X X | 6,059,956 | X X X | | X X X |
| 9999999 | Total - Bonds, Preferred and Common Stocks | | | | X X X | 12,173,183 | X X X | 6,486 | X X X |

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of During the Current Quarter

| 1 CUSIP Identification | 2 Description | 3 F o r e i g n Date | 4 Disposal Date | 5 Name of Purchaser | 6 Number of Shares of Stock | 7 Consideration | 8 Par Value | 9 Actual Cost | 10 Prior Year Book/ Adjusted Carrying Value | Change in Book/Adjusted Carrying Value | | | | | 16 Book/ Adjusted Carrying Value at Disposal Date | 17 Foreign Exchange Gain (Loss) on Disposal | 18 Realized Gain (Loss) on Disposal | 19 Total Gain (Loss) on Disposal | 20 Bond Interest/ Stock Dividends Received During Year | 21 Stated Contractual Maturity Date | 22 NAIC Designation and Admini- strative Symbol | |
|--|---------------------------------|--|-----------------------|---------------------------|--------------------------------------|--------------------|-------------------|---------------------|--|--|--|---|---|--|--|---|--|---|---|---|--|-----|
| | | | | | | | | | | 11 Unrealized Valuation Increase/ (Decrease) | 12 Current Year's (Amortization)/ Accretion | 13 Current Year's Other Than Temporary Impairment Recognized | 14 Total Change in B./A.C.V. (11 + 12 - 13) | 15 Total Foreign Exchange Change in B./A.C.V. | | | | | | | | |
| Bonds - SVO Identified Funds | | | | | | | | | | | | | | | | | | | | | | |
| 92203J407 | VANGUARD CHARLOTTE FDS | | 08/26/2020 | Bank of America | 25,732.000 | 1,489,489 | | 1,385,561 | 1,455,917 | (70,355) | | | (70,355) | | 1,385,561 | | 103,928 | 103,928 | 8,445 | XXX | 2 | |
| 8099999 Subtotal - Bonds - SVO Identified Funds | | | | | XXX | 1,489,489 | | 1,385,561 | 1,455,917 | (70,355) | | | (70,355) | | 1,385,561 | | 103,928 | 103,928 | 8,445 | XXX | XXX | |
| 8399997 Subtotal - Bonds - Part 4 | | | | | XXX | 5,139,542 | 3,610,130 | 5,026,517 | 2,873,618 | (70,355) | (17,362) | | (87,717) | | 5,009,284 | | 130,258 | 130,258 | 43,411 | XXX | XXX | |
| 8399998 Summary Item from Part 5 for Bonds (N/A to Quarterly) | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 8399999 Subtotal - Bonds | | | | | XXX | 5,139,542 | 3,610,130 | 5,026,517 | 2,873,618 | (70,355) | (17,362) | | (87,717) | | 5,009,284 | | 130,258 | 130,258 | 43,411 | XXX | XXX | |
| 8999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly) | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 8999999 Subtotal - Preferred Stocks | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded | | | | | | | | | | | | | | | | | | | | | | |
| 03027X100 | AMERICAN TOWER CORP NEW | | 09/02/2020 | Bank of America | 96.000 | 24,207 | XXX | 23,999 | | | | | | 23,999 | | 209 | 209 | 260 | XXX | | | |
| 03076C106 | AMERIPRISE FINL INC | | 09/02/2020 | Bank of America | 225.000 | 35,449 | XXX | 25,715 | | | | | | 25,715 | | 9,734 | 9,734 | 373 | XXX | | | |
| 037833100 | APPLE INC | | 09/14/2020 | MORGAN STANLEY CO | 38.000 | 4,341 | XXX | 2,532 | | | | | | 2,532 | | 1,809 | 1,809 | 16 | XXX | | | |
| 060505104 | BANK AMER CORP | | 08/05/2020 | MORGAN STANLEY CO | 1,423.000 | 34,923 | XXX | 32,572 | | | | | | 32,572 | | 2,351 | 2,351 | 256 | XXX | | | |
| 166764100 | CHEVRON CORP NEW | | 09/02/2020 | Bank of America | 265.000 | 22,084 | XXX | 24,799 | | | | | | 24,799 | | (2,715) | (2,715) | 684 | XXX | | | |
| 22822V101 | CROWN CASTLE INTL CORP NEW | | 09/02/2020 | Bank of America | 168.000 | 27,476 | XXX | 27,425 | | | | | | 27,425 | | 51 | 51 | 302 | XXX | | | |
| 30040W108 | EVERSOURCE ENERGY | | 09/02/2020 | Bank of America | 125.000 | 10,703 | XXX | 10,776 | | | | | | 10,776 | | (73) | (73) | 71 | XXX | | | |
| 46625H100 | JPMORGAN CHASE & CO | | 09/02/2020 | Bank of America | 170.000 | 17,235 | XXX | 17,387 | | | | | | 17,387 | | (152) | (152) | 153 | XXX | | | |
| 518439104 | LAUDER ESTEE COS INC | | 07/09/2020 | Bank of America | 132.000 | 24,918 | XXX | 21,779 | | | | | | 21,779 | | 3,139 | 3,139 | | XXX | | | |
| 532457108 | LILLY ELI & CO | | 09/14/2020 | Bank of America | 230.000 | 34,269 | XXX | 34,943 | | | | | | 34,943 | | (674) | (674) | 340 | XXX | | | |
| 539830109 | LOCKHEED MARTIN CORP | | 09/02/2020 | Bank of America | 102.000 | 39,797 | XXX | 38,027 | | | | | | 38,027 | | 1,770 | 1,770 | 398 | XXX | | | |
| 580135101 | MCDONALDS CORP | | 07/09/2020 | Bank of America | 134.000 | 24,584 | XXX | 24,429 | | | | | | 24,429 | | 155 | 155 | 168 | XXX | | | |
| 58933Y105 | MERCK & CO INC NEW | | 09/14/2020 | Bank of America | 520.000 | 41,158 | XXX | 42,383 | | | | | | 42,383 | | (1,225) | (1,225) | 350 | XXX | | | |
| 620076307 | MOTOROLA SOLUTIONS INC | | 07/09/2020 | Bank of America | 408.000 | 53,073 | XXX | 59,346 | | | | | | 59,346 | | (6,274) | (6,274) | 261 | XXX | | | |
| 693475105 | PNC FINL SVCS GROUP INC | | 07/20/2020 | Bank of America | 309.000 | 30,995 | XXX | 31,184 | | | | | | 31,184 | | (190) | (190) | 354 | XXX | | | |
| 863667101 | STRYKER CORP | | 09/02/2020 | Bank of America | 259.000 | 50,339 | XXX | 46,872 | | | | | | 46,872 | | 3,467 | 3,467 | 149 | XXX | | | |
| 872540109 | TJX COS INC NEW | | 08/05/2020 | VARIOUS | 891.000 | 46,042 | XXX | 42,149 | | | | | | 42,149 | | 3,893 | 3,893 | | XXX | | | |
| 907818108 | UNION PAC CORP | | 08/05/2020 | Bank of America | 81.000 | 14,304 | XXX | 12,152 | | | | | | 12,152 | | 2,152 | 2,152 | 79 | XXX | | | |
| 91913Y100 | VALERO ENERGY CORP NEW | | 08/05/2020 | Bank of America | 541.000 | 28,502 | XXX | 29,273 | | | | | | 29,273 | | (771) | (771) | 1,085 | XXX | | | |
| 9099999 Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded | | | | | XXX | 564,399 | XXX | 547,742 | | | | | | 547,742 | | 16,656 | 16,656 | 5,299 | XXX | XXX | | |
| Common Stocks - Mutual Funds | | | | | | | | | | | | | | | | | | | | | | |
| 464287804 | ISHARES TRUST CORE S&P SMALL | | 07/28/2020 | Bank of America | 3,919.000 | 277,386 | XXX | 246,070 | | | | | | 246,070 | | 31,317 | 31,317 | 920 | XXX | 1 | | |
| 75644E103 | RED CEDAR FUND TRUST | | 09/30/2020 | Bank of America | 49,473.920 | 505,124 | XXX | 494,739 | | 495 | | 495 | | 494,739 | | 10,384 | 10,384 | | XXX | 1 | | |
| 808524409 | SCHWAB STRATEGIC TR | | 09/21/2020 | VARIOUS | 14,174.000 | 724,019 | XXX | 731,681 | | (120,460) | | (120,460) | | 731,681 | | (7,662) | (7,662) | 10,978 | XXX | 1 | | |
| 78464A409 | SPDR S&P 500 GROWTH ETF | | 09/21/2020 | Bank of America | 15,341.000 | 763,131 | XXX | 374,341 | | (268,600) | | (268,600) | | 374,341 | | 388,789 | 388,789 | 4,939 | XXX | 1 | | |
| 922908850 | VANGUARD INDEX FDS | | 07/28/2020 | Bank of America | 17,220.910 | 680,000 | XXX | 677,696 | | (127,726) | | (127,726) | | 677,696 | | 2,304 | 2,304 | 18,115 | XXX | 1 | | |
| 922908819 | VANGUARD SMALL CAP GROWTH INDEX | | 07/28/2020 | SCHWAB CHARLES, CO. INC | 2,733.270 | 159,186 | XXX | 110,587 | | (42,273) | | (42,273) | | 110,587 | | 48,599 | 48,599 | 294 | XXX | 1 | | |
| 921909784 | VANGUARD STAR FD | | 08/31/2020 | VARIOUS | 5,767.134 | 652,550 | XXX | 601,504 | | (80,584) | | (80,584) | | 601,504 | | 51,046 | 51,046 | | XXX | 1 | | |
| 9499999 Subtotal - Common Stocks - Mutual Funds | | | | | XXX | 3,761,396 | XXX | 3,236,618 | 3,574,124 | (639,148) | | (639,148) | | 3,236,618 | | 524,777 | 524,777 | 35,246 | XXX | XXX | | |
| 9799997 Subtotal - Common Stocks - Part 4 | | | | | XXX | 4,325,795 | XXX | 3,784,360 | 3,574,124 | (639,148) | | (639,148) | | 3,784,360 | | 541,433 | 541,433 | 40,545 | XXX | XXX | | |
| 9799998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly) | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 9799999 Subtotal - Common Stocks | | | | | XXX | 4,325,795 | XXX | 3,784,360 | 3,574,124 | (639,148) | | (639,148) | | 3,784,360 | | 541,433 | 541,433 | 40,545 | XXX | XXX | | |
| 9899999 Subtotal - Preferred and Common Stocks | | | | | XXX | 4,325,795 | XXX | 3,784,360 | 3,574,124 | (639,148) | | (639,148) | | 3,784,360 | | 541,433 | 541,433 | 40,545 | XXX | XXX | | |
| 9999999 Total - Bonds, Preferred and Common Stocks | | | | | XXX | 9,465,337 | XXX | 8,810,877 | 6,447,742 | (709,503) | (17,362) | | (726,865) | | 8,793,644 | | 671,691 | 671,691 | 83,956 | XXX | XXX | |

QE05.2

E06 Schedule DB Part A Section 1 NONE

E07 Schedule DB Part B Section 1 NONE

E08 Schedule DB Part D Section 1 NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity NONE

E10 Schedule DB Part E NONE

E11 Schedule DL - Part 1 - Securities Lending Collateral Assets NONE

E12 Schedule DL - Part 2 - Securities Lending Collateral Assets NONE

SCHEDULE E - PART 1 - CASH**Month End Depository Balances**

| 1 Depository | | 2 Code | 3 Rate of Interest | 4 Amount of Interest Received During Current Quarter | 5 Amount of Interest Accrued at Current Statement Date | Book Balance at End of Each Month During Current Quarter | | | 9 * |
|--|-------------|-----------|-----------------------|---|---|--|-------------------|------------------|--------|
| | | | | | | 6 First Month | 7 Second Month | 8 Third Month | |
| open depositories | | | | | | | | | |
| Bank of America Admin | Chicago, IL | | | | | (61,689) | (53,810) | (100,890) | X X X |
| Bank of America General Claims | Chicago, IL | | | | | (927,464) | (1,145,116) | (1,263,074) | X X X |
| Bank of America State NM Claims | Chicago, IL | | | | | (190,589) | (213,643) | (278,707) | X X X |
| Bank of America Sandia Labs Claims | Chicago, IL | | | | | (196,842) | (174,174) | (235,886) | X X X |
| Bank of America Control Account | Chicago, IL | | | | | 1,728,226 | 2,411,886 | 2,803,895 | X X X |
| Bank of America Gen Grps Receipts | Chicago, IL | | | | | 401,624 | (6,305) | | X X X |
| Bank of America Individual Receipts | Chicago, IL | | | | | 2,066 | 2,412 | 2,769 | X X X |
| Bank of America Payroll | Chicago, IL | | | | | 11,898 | 12,837 | 19,189 | X X X |
| 0199998 Deposits in0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories | | X X X | X X X | | | | | | X X X |
| 0199999 Totals - Open Depositories | | X X X | X X X | | | 767,230 | 834,087 | 947,296 | X X X |
| 0299998 Deposits in0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories | | X X X | X X X | | | | | | X X X |
| 0299999 Totals - Suspended Depositories | | X X X | X X X | | | | | | X X X |
| 0399999 Total Cash On Deposit | | X X X | X X X | | | 767,230 | 834,087 | 947,296 | X X X |
| 0499999 Cash in Company's Office | | X X X | X X X | X X X | X X X | | | | X X X |
| 0599999 Total Cash | | X X X | X X X | | | 767,230 | 834,087 | 947,296 | X X X |

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|--|--|------|------------------|------------------|---------------|------------------------------|----------------------------------|-----------------------------|
| CUSIP | Description | Code | Date Acquired | Rate of Interest | Maturity Date | Book/Adjusted Carrying Value | Amount of Interest Due & Accrued | Amount Received During Year |
| Exempt Money Market Mutual Funds - as Identified by SVO | | | | | | | | |
| . 999109275 | BLACKROCK LIQUIDITY FDS TREAS TR I | | 09/30/2020 | 1.391 | X X X | 2,452,037 | 2,776 | 4,164 |
| 8599999 Subtotal - Exempt Money Market Mutual Funds - as Identified by SVO | | | | | | 2,452,037 | 2,776 | 4,164 |
| 8899999 Total Cash Equivalents | | | | | | 2,452,037 | 2,776 | 4,164 |

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