BE-45 Identification Number



QUARTERLY SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Due date:

Within 60 days of the close of each calendar quarter (or within 90 days of closing the final quarter of your calendar year).

Extension information:

See Part VI.C., page 18 of the General Instructions.

Electronic filing:

www.bea.gov/efile

Mail via U.S. Postal Service:

Bureau of Economic Analysis Balance of Payments Division, BE-50 (SSB) 4600 Silver Hill Rd. Washington, DC 20233

Send via Private Express Delivery:

Bureau of Economic Analysis Balance of Payments Division, BE-50 (SSB) 4600 Silver Hill Rd. Suitland, MD 20746

Name and address of U.S. Reporter

00080	Company Name:		
00090	Attention: 0		
10000	Address: 0		
10001	City:	10002	State: 0
10003	Zip Code:		

Fax reports to:

(301) 278-9506

Assistance:

E-mail: be-45help@bea.gov Telephone: (301) 278-9303

FAQ's and blank forms: www.bea.gov/ssb

BE-45 Filing Requirements:

A response is required if you are notified by BEA about this survey. A BE-45 survey must be completed in its entirety by U.S. insurance companies who had insurance transactions with foreign persons in excess of \$8 million during the previous calendar year, or are expected to exceed that amount during the current calendar year, in any one of the eight categories. See Part 1.A on page 16 of the General Instructions for more information on who must report and reporting requirements.

Authority, Confidentiality, Penalties

This survey is authorized by the International Investment and Trade in Services Survey Act (P.L. 94-472, 90 Stat. 2059, 22 U.S.C. 3101-3108, as amended). The filing of reports is mandatory and the Act provides that your report to BEA is confidential. Persons who fail to report may be subject to penalties. See page 16 of the General Instructions for additional details.

Contact Information

Provide information of person to consult about this report:

10004	Name 0					
10005	Street 1			10008	1 '	Extension
10006	Street 2			10009	Fax Number 1	
10007	City 0	State	Zip	10010	E-mail Address	

NOTE: BEA uses a Secure Messaging System to correspond with you via encrypted message to discuss questions relating to this form. We may use your e-mail address for survey-related announcements and to inform you about secure messages. When communicating with BEA by e-mail, please do not include any confidential business or personal information.

CERTIFICATION

The undersigned official certifies that this report has been prepared in accordance with the applicable instructions, is complete, and is substantially accurate except that, in accordance with Part VI.F. of the General Instructions, estimates may have been provided.

	Signature of Authorized Official	Date	10012	Telephone Number	Extension
011	Name 0	Title			

Identification of U.S. Reporter

1	What is the U.S. Repor	ter's calend	dar quarter co	overed in this report?		
		Month [Day Year			
	10013	1				
	Beginning date					
	10014	Month [Day Year			
	Ending date					
2		the U.S. R	eporter durin	g the reporting period id	lentified in quest	ion 1 ?
		e the entire	reporting per	iod — Continue filling out	this form.	
						orm for the portion of the reporting period your ur company did not exist for a part of the period.
	1 -					explain why your company was not in existence
		reporting p	eriod. Please i	return the form according	to instructions on	page 1.
3						enterprise at any point during the reporting period ition of U.S. business enterprise.
	10018 1		out this form.	17 of the deficial institut	uons ioi uie deiiii	uion or 0.3. business emerprise.
	1	eck A or B :				
	² 1			har IIS pareon for part of	the reporting per	iod — Enter the name, contact information, and
	'	addres the pe	ss of the contro riod during wh	olling U.S. person below a	nd continue filling	out this form, but only report transactions for nother U.S. person. Provide any comments in the
	² 2		<i>n below.</i>)wned by anot	her U.S. nerson for the en	tire reporting perio	od — Enter the name, contact information, and
	-	addres	ss of the contro			ents in the section below, and return this form
	Name					
	0					Comments
	10022					Comments
	10022 Contact name					Comments
	10022	,				Comments
	10022 Contact name 0 10023 Phone number 0 10024		net .			Comments
	10022 Contact name 0 10023 Phone number		eet			Comments
	10022 Contact name 0 10023 Phone number 0 10024 Address — Nu 0	ımber and Stre	eet			Comments
	10022 Contact name 0 10023 Phone number 0 10024 Address — Nu 0	ımber and Stre	eet			Comments
A	10022 Contact name 0 10023 Phone number 0 10024 Address — Nu 0 10025 City, State, Zip 0 10026	umber and Stre		urance?		Comments
4	10022 Contact name 0 10023 Phone number 0 10024 Address — No. 0 10025 City, State, Zip 0 10026 What is the U.S. Report	mber and Stre		urance?		Comments
4	10022 Contact name Contact name Phone number O 10024 Address — Na O 10025 City, State, Zip O 10019 1 Life insura	umber and Stre	pal line of ins	urance?		Comments
4	10022 Contact name 0	umber and Stre ter's princip ance and casualt	pal line of ins	urance?		Comments
	Contact name O 10023 Phone number O 10024 Address — Nu O 10025 City, State, Zip O 10019 1 Life insura 1 2 Property a 1 3 Other — S	ter's principance and casualty	pal line of ins			Comments
4	Contact name Conta	ter's principance and casualty 1002	pal line of ins			Comments
	Contact name Co	ter's principance and casualty 1002 are U.S. Rep	pal line of ins			Comments
	10022	ter's principance and casualty 1002 te U.S. Reproduction company broker	pal line of ins y insurance 0 orter's organi		nies that are cons	
5	Contact name Conta	ter's principance and casualty and casualty company broker group — F	pal line of ins y insurance orter's organi	ization? a list of member compan		colidated in this report.
	The state of the s	ter's principance and casualty and casualty company broker group — F	pal line of ins y insurance orter's organi	ization? a list of member compan		
5	Contact name Co	ter's principance and casualty accessory company broker group — F	pal line of ins y insurance orter's organi	ization? a list of member compan		colidated in this report.

Page 2 FORM BE-45 (REV. 10/2018)

Identification of U.S. Reporter - Continued

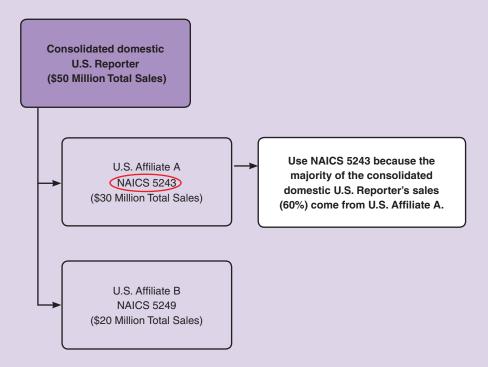
Using the summary of NAICS classifications on the next page, as well as the example below, enter the 4-digit code that best describes the <u>primary</u> sales activity of the consolidated domestic U.S. Reporter. After entering your response, continue to page 5.

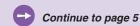
Consolidated domestic U.S. Reporter means the fully consolidated domestic U.S. enterprise consisting of (i) the U.S. corporation whose voting securities are not owned more than 50 percent by another U.S. corporation, and, proceeding down each ownership chain from that U.S. corporation, (ii) any U.S. corporation whose voting securities are more than 50 percent owned by the U.S. corporation above it. The fully consolidated domestic U.S. enterprise excludes foreign branches and other foreign affiliates.



EXAMPLE FOR DETERMINING PRIMARY SALES ACTIVITY (NAICS CODE)

Report the NAICS code that best describes the primary sales activity of the consolidated domestic U.S. Reporter. For example, if 60 percent of the consolidated domestic U.S. Reporter's sales are generated by Affiliate A, an insurance carrier, except direct life insurance carriers (NAICS 5243), and 40 percent of the consolidated domestic U.S. Reporter's sales are generated by Affiliate B, a direct insurance carrier (NAICS 5249), then you should report your NAICS as 5243.





Summary of Industry Classifications – For a full explanation of each code see www.bea.gov/naics2017

	Summary of Industry Classif	icatio	ns – For a full explanation of each	code se	e www.bea.gov/naics2017
Agric	culture, Forestry, Fishing, and Hunting	3334	Ventilation, heating, air-conditioning,	5151	Radio and television broadcasting
	Crop production	0004	and commercial refrigeration equipment		Cable and other subscription programming
	Animal production and aquaculture	3335	Metalworking machinery		Wired and wireless telecommunications carriers
	Forestry and logging	3336	Engines, turbines, and power		Satellite telecommunications Other telecommunications
	Fishing, hunting, and trapping	3339	transmission equipment Other general purpose machinery		Data processing, hosting, and related services
1150	Support activities for agriculture and forestry	3341	Computer and peripheral equipment		Other information services
Minir	ng	3342	Communications equipment		
	Oil and gas extraction		Audio and video equipment		nce and Insurance
2121		3344	Semiconductors and other electronic components	5221 5223	Depository credit intermediation (Banking) Activities related to credit intermediation
	Nonmetallic minerals	3345	Navigational, measuring, electromedical,		Non-depository credit intermediation, except
	Iron ores		and control instruments		branches and agencies
	Gold and silver ores Copper, nickel, lead, and zinc ores	3346	Manufacturing and reproducing	5229	Nondepository branches and agencies
	Other metal ores	3351	magnetic and optical media Electric lighting equipment	5231	Securities and commodity contracts
2132	Support activities for oil and gas operations		Household appliances	5000	intermediation and brokerage Other financial investment activities and
2133	Support activities for mining, except	3353	Electrical equipment	3236	exchanges
	for oil and gas operations	3359 3361	Other electrical equipment and components Motor vehicles	5242	Agencies, brokerages, and other insurance
Utilit	ies		Motor vehicle bodies and trailers		related activities
2211	Electric power generation,	3363	Motor vehicle parts		Insurance carriers, except direct life insurance carriers
0010	transmission, and distribution		Aerospace products and parts		Direct life insurance carriers Funds, trusts, and other finance vehicles
	Natural gas distribution Water, sewage, and other systems	3365 3366	Railroad rolling stock Ship and boat building	3232	rulius, ilusis, and other illiance verilices
2213	water, sewage, and other systems	3369	Other transportation equipment		Estate and Rental and Leasing
	truction	3370	Furniture and related products		Real estate
	Construction of buildings	3391	Medical equipment and supplies		Automotive equipment rental and leasing
	Heavy and civil engineering construction	3399	Other miscellaneous manufacturing		Other rental and leasing services Lessors of nonfinancial intangible assets,
	Specialty trade contractors	Whol	esale Trade, Durable Goods	0001	except copyrighted works
Manu	ıfacturing	4231	Motor vehicles and motor vehicle	Duraf	
	Animal foods	4000	parts and supplies		essional, Scientific, and Technical
	Grain and oilseed milling		Furniture and home furnishing Lumber and other construction materials	Serv	
	Sugar and confectionery products Fruit and vegetable preserving and		Professional and commercial		Legal services Accounting, tax preparation, bookkeeping,
3114	specialty foods		equipment and supplies	5412	and payroll services
3115	Dairy products		Metal and mineral (except petroleum)	5413	Architectural, engineering, and related services
	Meat products	4236	Household appliances, and electrical and electronic goods		Specialized design services
	Seafood product preparation and packaging	4237	Hardware, and plumbing and heating		Computer systems design and related services
	Bakery products and tortillas Other food products		equipment and supplies	5416	Management, scientific, and technical consulting services
	Beverages		Machinery, equipment, and supplies	5417	Scientific research and development services
	Tobacco	4233	Miscellaneous durable goods		Advertising, public relations, and related services
	Textile mills		esale Trade, Non-Durable Goods	5419	Other professional, scientific, and
	Textile product mills	4241			technical services
	Apparel Leather and allied products	4242 4243	Drugs and druggists' sundries Apparel, piece goods, and notions	Mana	agement of Companies and Enterprises
	Wood products		Grocery and related product		Holding companies, except bank holding
	Pulp, paper, and paperboard mills	4245	Farm product raw material		companies
	Converted paper products		Chemical and allied products	5513	Corporate, subsidiary, and regional
3231	Printing and related support activities	4247 4248	Petroleum and petroleum products Beer, wine, and distilled alcoholic beverage		management offices
3242 3243	Integrated petroleum refining and extraction Petroleum refining without extraction		Miscellaneous nondurable goods	Adm	inistrative and Support, Waste
	Asphalt and other petroleum and	Whal	anala Trada Electronia Marketa	Mana	agement, and Remediation Services
	coal products		esale Trade, Electronic Markets Agents And Brokers		Office administrative services
	Basic chemicals		Wholesale electronic markets and		Facilities support services
3252	Resins, synthetic rubbers, and artificial		agents and brokers		Employment services Business support services
3253	and synthetic fibers and filaments Pesticides, fertilizers, and other	Reta	il Trade		Travel arrangement and reservation services
0200	agricultural chemicals		Motor vehicle and parts dealers		Investigation and security services
3254	Pharmaceuticals and medicines		Furniture and home furnishings		Services to buildings and dwellings
	Paints, coatings, and adhesives	4431	Electronics and appliance		Other support services
3256	Soap, cleaning compounds, and	4440	Building material and garden equipment and supplies dealers	5620	Waste management and remediation services
3259	toilet preparations Other chemical products and preparations	4450	Food and beverage		ational Services
3261		4461	Health and personal care	6110	Educational services
	Rubber products	4471	Gasoline stations	Heal	th Care and Social Assistance
	Clay products and refractories	4480 4510	Clothing and clothing accessories Sporting goods, hobby, book, and music		Ambulatory health care services
	Glass and glass products Cement and concrete products	4520	General merchandise	6220	
	Lime and gypsum products	4530	Miscellaneous store retailers		Nursing and residential care facilities
	Other nonmetallic mineral products	4540	Non-store retailers	6240	Social assistance services
	Iron and steel mills	Trans	sportation and Warehousing	Arts,	Entertainment, and Recreation
	Steel products from purchased steel		Air transportation	7110	Performing arts, spectator sports,
3313	Alumina and aluminum production and processing	4821	Rail transportation	7101	and related industries
3314	Nonferrous metal (except aluminum)	4839	Petroleum tanker operations Other water transportation	/121	Museums, historical sites, and similar institutions
	production and processing	4840	Truck transportation	7130	Amusement, gambling, and recreation
	Foundries	4850	Transit and ground passenger transportation		industries
	Forging and stamping	4863	Pipeline transportation of crude oil, refined petroleum products, and natural gas	Acce	ommodation and Food Services
	Cutlery and handtools Architectural and structural metals	4868	Other pipeline transportation		Accommodation
3324		4870	Scenic and sightseeing transportation		Food services and drinking places
	Hardware		Support activities for transportation		· ·
3326	Spring and wire products	4920 4932	Couriers and messengers Petroleum storage for hire		r Services
3327	Machine shop products, turned products, and	4932	Other warehousing and storage		Repair and maintenance
2200	screws, nuts, and bolts				Personal and laundry services Religious, grantmaking, civic, professional,
3326	Coating, engraving, heat treating, and allied activities		mation	0100	and similar organizations
3329	Other fabricated metal products	5111	Newspaper, periodical, book, and directory publishers	D. L.	ic Administration
3331	Agriculture, construction, and mining machinery	5112	Software publishers		Public administration
	Industrial machinery	5121	Motion picture and video industries	9200	- dono administration
3333	Commercial and service industry machinery	5122	Sound recording industries		

Page 4 FORM BE-45 (REV. 10/2018)

Determination of Reporting Status

Determining Reportable and Non-Reportable Transactions

The scope of this survey is limited to insurance transactions between the consolidated domestic U.S. Reporter and foreign persons*. A full list of the services covered can be found on the next page. Additional information, including FAQ's and video tutorials, can be found at: www.bea.gov/ssb.

* Person, when used throughout this survey, means any individual, branch, partnership, associated group, association, estate, trust, corporation, or other organization (whether or not organized under the laws of any State), and any government (including a foreign government, the United States Government, a state or local government, and any agency, corporation, financial institution, or other entity or instrumentality thereof, including a government sponsored agency).



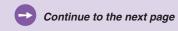
DO REPORT:

✓ Transactions between your consolidated domestic U.S. operations and all foreign persons, regardless of affiliation, including inter-company transactions that you may not consider transactions under global consolidation.

DO NOT REPORT:

- * Transactions between the U.S. Reporter's foreign affiliates and other foreign persons.
- * Transactions between other U.S. persons and foreign affiliates of the U.S. Reporter.
- Transactions between the U.S. Reporter's domestic operations and other U.S. persons.
- * Income on financial instruments (including interest, dividends, capital gains, etc.).
- * Reserve transfers or recaptures of reserves.

More information about the scope and purpose of this survey can be found in the General Instructions beginning on page 16.



Determination of Reporting Status

8 Follow the steps below to determine whether you complete Schedule A and/or B.

In the table below, indicate whether the U.S. Reporter had the transactions listed in the prior year, or if the U.S. Reporter expects to have transactions in the current year by marking "Yes" or "No in column 3.

For all transaction types marked "Yes" in column 3, indicate whether those transactions exceeded \$8 million in the previous year, or if the U.S. Reporter expects those transactions to exceed \$8 million in the current year by marking "Yes" or "No in column 4.

See additional information for Part II on page 17, and Part V on page 18, of the General Instructions for more details on reportable transactions.

NOTE – Exclude transfers or recaptures of reserves when determining your responses below. Such transactions are not reportable on the BE-45 survey.

Trans- action code	Transaction Type	Had transactions with foreign persons in the previous fiscal year, or had/expects to have, transactions foreign persons during the current fiscal year	Transactions with foreign persons in the previous fiscal year exceeded \$8 million, or are expected to exceed \$8 million in the current year.	If "Yes" in column 4, report transactions on:
(1)	(2)	(3)	(4)	(5)
1	Premiums earned on reinsurance assumed from insurance companies resident abroad	²⁰⁰⁰¹ ¹ 1 Yes 2 No	² 1 Yes 2 No	Schedule A
2	Premiums incurred on reinsurance ceded to insurance companies resident abroad	20002 ¹ 1 Yes 2 No	² 1 Yes 2 No	Schedule A
3	Losses incurred on reinsurance assumed from insurance companies resident abroad	20003 ¹ 1 Yes 2 No	² 1 Yes 2 No	Schedule A
4	Losses recovered on reinsurance ceded to insurance companies resident abroad	20004 ¹ 1 Yes 2 No	² 1 Yes 2 No	Schedule A
5	Premiums earned from primary insurance sold to foreign persons	²⁰⁰⁰⁵ ¹ 1 Yes 2 No	² 1 Yes 2 No	Schedule B
6	Losses incurred on primary insurance sold to foreign persons	20006 ¹ 1 Yes 2 No	² 1 Yes 2 No	Schedule B
7	Auxiliary insurance services, receipts	20007 ¹ 1 Yes 2 No	² 1 Yes 2 No	Schedule B
8	Auxiliary insurance services, payments	20008 ¹ 1 Yes 2 No	² 1 Yes 2 No	Schedule B
	None of the above	²⁰⁰⁰⁹ ¹ 1 Yes		

Did you check "Yes" for any type of transaction in Column 4?

20010	11	Yes — Report mandatory transactions on the appropriate schedule indicated in Column 5
	1 2	No — Stop here and return pages 1 through 6 according to the instructions on page 1.

NOTE — Only report cross-border transactions between the U.S. Reporter's consolidated U.S. enterprises and foreign persons. Do not report transactions between the U.S. Reporter's foreign affiliates and foreign persons, or between the U.S. Reporter's domestic operations and other U.S. persons.

Comments			

Page 6 FORM BE-45 (REV. 10/2018)

Understanding Reporting Relationships (For use on **Schedules A** and **B**)

Transactions accrued during the reporting period should be reported by the country of the foreign transactor, and by the foreign transactor's relationship to the **U.S. Reporter** and the foreign transactor falls into one of three categories:

Foreign Affiliates – A foreign affiliate is defined as an entity domiciled in a foreign country that is owned at least 10 percent (based on voting interest), directly or indirectly, by the U.S. Reporter.

Foreign Parents and Foreign Affiliates of Foreign Parents (aka the "foreign parent group") – Foreign Parents and Foreign Affiliates of Foreign Parents (aka the "foreign parent group") means all of the following:

- (i) the foreign parent, which is the first entity outside the United States in a foreign chain of ownership, that owns at least 10 percent (based on voting interest), directly or indirectly, of the consolidated domestic U.S. business enterprise.
- (ii) any foreign entity proceeding up the foreign parent's ownership chain, that owns more than 50 percent of the entity below it up to and including the entity that is not owned more than 50 percent by another foreign entity,
- (iii) any foreign entity, proceeding down the ownership chain(s) of each of these members, that is owned more than 50 percent by the entity above it.

Unaffiliated Foreign Persons – An unaffiliated foreign person is an entity domiciled abroad that is not owned, or is owned less than 10 percent, directly or indirectly, by the U.S. Reporter or the U.S. Reporter's foreign parent.

The diagram below illustrates each of these relationships with regards to the U.S. Reporter. Additional reporting instructions are provided prior to each Schedule on pages 8 and 12.

COMPANY B (Germany)

49% owned by Company A **Unaffiliated Foreign Person**

NOTE: "Company B" is not a foreign affiliate of the foreign parent nor part of the foreign parent group since it is not owned, nor does it own another foreign entity, more than 50 percent within the foreign ownership chain. Also, "Company B" is not a foreign affiliate of the Consolidated domestic U.S. Reporter since it is not owned at least 10 percent by the Consolidated domestic U.S. Reporter.

COMPANY E (Mexico)

20% owned by Consolidated domestic U.S. Reporter

Foreign Affiliate

COMPANY G (Switzerland)

5% owned by Consolidated domestic U.S. Reporter

Unaffiliated Foreign Person

COMPANY A (Germany)

Foreign Parent of the Consolidated domestic U.S. Reporter

Member of Foreign Parent Group

Owns 100% of Company C and the Consolidated U.S. Reporter

COMPANY C (France)

Wholly owned by Company A

Member of Foreign Parent Group

CONSOLIDATED DOMESTIC U.S. REPORTER (USA)

(The U.S. person filing this BE-45)
Owns >10% of Companies D, E, and F

COMPANY D (USA)

Subsidiary, owned 100% by Consolidated domestic U.S. Reporter

Company D's transactions with foreign persons are consolidated into the U.S. Reporter's BE-45 filing

COMPANY F (United Kingdom)

50% owned by Consolidated domestic U.S. Reporter

Foreign Affiliate

COMPANY H (Ghana)

No ownership relationship with any other company

Unaffiliated Foreign Person



Continue to Schedules A and B as indicated, based on your response to question 8 on page 6.

Reporting Instructions for Schedule A

REPORTING INSTRUCTIONS

IMPORTANT – Do not report reserve transfers or recaptures of reserves. Only report transactions accrued during the reporting period. ONLY report transactions between the U.S. Reporter's domestic operations and foreign persons. DO NOT report transactions between the U.S. Reporter's foreign affiliates and foreign persons, between the U.S. Reporter's domestic operations and other U.S. persons, or transactions between other U.S. persons and the U.S. Reporter's foreign affiliates. Report all amounts in thousands of U.S. dollars (omitting 000). Round amounts less than \$500.00 to 0. Do not enter amounts in the shaded portions of each item.

How to Report:

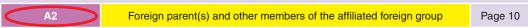
1) Use the following Schedule A's on pages 9–11 to report your quarterly reinsurance transactions based on your relationship with the foreign person(s) (see page 7 for more information on reporting relationships):

Schedule	Relationship with the consolidated domestic U.S. Reporter	Page
A1	Foreign affiliates	9
A2	Foreign parent(s) and other members of the affiliated foreign group	10
А3	Unaffiliated foreign persons	11

- 2) Enter the country(ies) of the transactor(s) in the left most column of Schedule A.
- 3) Report the U.S. Reporter's quarterly reinsurance transactions with the foreign transactor in the appropriate column based on the transaction type:
 - Transaction code 1 (Column 3) Quarterly premiums earned on reinsurance assumed
 - Transaction code 2 (Column 4) Quarterly premiums incurred on reinsurance ceded
 - Transaction code 3 (Column 5) Quarterly losses incurred on reinsurance assumed
 - Transaction code 4 (Column 6) Quarterly losses recovered on reinsurance ceded

Example:

The U.S. Reporter had a total of \$3,525,000 in quarterly premiums incurred on reinsurance ceded from its foreign parent group in Germany.



Per the table above, premiums incurred on reinsurance ceded from the foreign parent group are reportable on Schedule A2, which is on page 10.

On Schedule A2, enter "Germany" in column 1. Enter "3,525" under Code 2 in Column 4.

IMPORTANT – Report amounts in thousands of U.S. dollars (omitting 000). Round amounts less than \$500.00 to 0. Do not enter amounts in the shaded portions of each item.

Example

Country		Transactions with foreign parent group							
		Α	Reinsurand	e premiums	Reinsurance losses				
		E LY	Transaction code 1 Quarterly premiums earned on reinsurance assumed	Transaction code 2 Quarterly premiums incurred on reinsurance ceded	Transaction code 3 Quarterly losses incurred on reinsurance assumed	Transaction code 4 Quarterly losses recovered on reinsurance ceded			
		(2)	(3)	(4)	(5)	(6)			
1. Germany	01 1	2	3 000	⁴ 3,525 000	5 000	6 000			

NOTE - Do not report reserve transfers or recaptures of reserves.

Quarterly premiums and losses should be calculated as follows:

For property and casualty insurance companies

Calculate transaction codes 1 and 2 as follows: Premiums written (transaction code 1) or ceded (transaction code 2) during the quarter, plus unearned premiums at the beginning of the quarter, minus unearned premiums at the end of the quarter. Report premiums net of cancellations. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Calculate transaction codes 3 and 4 as follows: Losses paid (transaction code 3) or recovered (transaction code 4) during the quarter, plus case reserves at the end of the quarter, plus losses incurred but not reported at the end of the quarter, minus case reserves at the beginning of the quarter, minus losses incurred but not reported at the beginning of the quarter. Losses paid or recovered should not include loss adjustment expenses (reportable on **Schedule B**).

For life insurance companies

Premiums received (transaction code 1) and paid (transaction code 2) reflect premiums accrued on reinsurance assumed from or ceded to insurance companies resident abroad. These amounts, therefore, are adjusted for changes in due, deferred, and advanced premiums for each quarter. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Losses paid (transaction code 3) and recovered (transaction code 4) reflect policy claims on reinsurance assumed or ceded, adjusted for changes in claims due, unpaid, and in the course of settlement.

Page 8 FORM BE-45 (REV. 10/2018)

SCHEDULE A1 – Quarterly Reinsurance Transactions with Foreign Affiliates

Are you reporting transactions with foreign affiliates?

21000 **1 1 1 Yes**

- If you checked "Yes" for transaction codes 1–4 in Column 4 of question 8, and you had transactions of this type with your foreign affiliates, reporting below is mandatory.
- Report all currency amounts in thousands of dollars. Example: If the amount is \$1,555,555.00 report as 1,556.
- Round amounts less than \$500.00 to 0.
- To report additional countries, use the overflow sheet provided on page 19 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 18 of the General Instructions.

NOTE – Do not report reserve transfers or recaptures of reserves.

	Country				Transactions with foreign affiliates						
			BEA USE ONLY		Reins	suranc	e premiums		Reinsurance losses		
					Transaction C	ode 1	Transaction Cod	de 2	Transaction Code 3	Transaction Code	
					Quarterly premiums earned on reinsurance assumed		Quarterly premiums incurred on reinsurance ceded		Quarterly losses incurred on reinsuranc assumed	Quarterly losses recovered on reinsurance ceded	
			(1)	(2)	(3)		(4)		(5)	(6)	
1.	Total, lines 2-32 of this page	001	1	2	3	000		000	5 000		
2.		002	1	2	3	000		000	5 000		
3.		003	1	2	3	000		000	5 000		
4.		004	1	2	3	000		000	5 000		
5.		005	1	2	3	000		000	5 000		
6.		006	1	2	3	000		000	5 000		
7.		007	1	2	3	000		000	5 000		
8.		008	1	2	3	000		000	5 000		
9.		009	1	2	3	000		000	5 000		
10.		010	1	2	3	000		000	5 000		
11.		011	1	2	3	000		000	5 000		
12.		012	1	2	3	000		000	5 000		
13.		013	1	2	3	000		000	5 000		
14.		014	1	2	3	000		000	5 000		
15.		015	1	2	3	000		000	5 000		
16.		016	1	2	3	000	4	000	5 000		
17.		017	1	2	3	000	4	000	5 000	00	
18.		018	1	2	3	000	4	000	5 000	00	
19.		019	1	2	3	000	4	000	5 000	00	
20.		020	1	2	3	000	4	000	5 000	00	
21.		021	1	2	3	000	4	000	5 000	00	
22.		022	1	2	3	000	4	000	5 000	00	
23.		023	1	2	3	000	4	000	5 000	00	
24.		024	1	2	3	000	4	000	5 000	00	
25.		025	1	2	3	000	4	000	5 000	6 00	
26.		026	1	2	3	000	4	000	5	6 00	
27.		027	1	2	3	000	4	000	5 000	6 00	
28.		028	1	2	3	000	4	000	5 000	00	
29.		029	1	2	3	000	4	000	5 000	00	
30.		030	1	2	3	000		000	5 000		
31.		031	1	2	3	000	4	000	5 000	0	
32.	Countries with which transactions were less than \$50,000.00 each, total		¹ 709	2	3	000	4	000	5 000	6	

SCHEDULE A2 - Quarterly Reinsurance Transactions with Foreign Parent(s) and Other Members of the FPG

Are you reporting transactions with foreign parent(s) and other members of the foreign parent group?

22000 **2** ¹**2** Yes

- If you checked "Yes" for transaction codes 1–4 in Column 4 of question 8 , and you had transactions of this type with your foreign parent(s) and other members of the FPG , reporting below is mandatory.
- Report all currency amounts in thousands of dollars. Example: If the amount is \$1,555,555.00 report as 1,556.
- Round amounts less than \$500.00 to 0.
- To report additional countries, use the overflow sheet provided on page 19 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 18 of the General Instructions.

NOTE – Do not report reserve transfers or recaptures of reserves.

				Transactions with foreign parent group						
	Country			Reins	suranc	e premiums		Reinsura	nce losses	
Country			\ :	Transaction Code 1 Transaction Code 2		Transaction Code 3	Transaction Code 4			
•		ONLY			Quarterly premiums earned on reinsurance assumed		ims rance	Quarterly losses incurred on reinsurance assumed	Quarterly losses recovered on reinsurance ceded	
		(1)	(2)	(3)		(4)		(5)	(6)	
1. Total, lines 2-32 of this page	001	1	2	3	000		000	5 000		
2.	002	1	2	3	000		000	5 000		
3.	003	1	2	3	000		000	5 000		
4.	004	1	2	3	000		000	5 000		
5.	005	1	2	3	000		000	5 000		
6.	006	1	2	3	000		000	5 000		
7.	007	1	2	3	000		000	5 000		
8.	008	1	2	3	000		000	5 000		
9.	009	1	2	3	000		000	5 000		
10.	010	1	2	3	000		000	5 000		
11.	011	1	2	3	000	4	000	5 000		
12.	012	1	2	3	000	4	000	5 000	6 000	
13.	013	1	2	3	000	4	000	5 000	6 000	
14.	014	1	2	3	000	4	000	5 000	6 000	
15.	015	1	2	3	000	4	000	5 000	6 000	
16.	016	1	2	3	000	4	000	5 000	6 000	
17.	017	1	2	3	000	4	000	5 000	6 000	
18.	018	1	2	3	000	4	000	5 000	6 000	
19.	019	1	2	3	000	4	000	5 000	6 000	
20.	020	1	2	3	000	4	000	5 000	6 000	
21.	021	1	2	3	000	4	000	5 000	6 000	
22.	022	1	2	3	000	4	000	5 000	6 000	
23.	023	1	2	3	000	4	000	5 000	6 000	
24.	024	1	2	3	000	4	000	5 000	6 000	
25.	025	1	2	3	000	4	000	5 000	6 000	
26.	026	1	2	3	000	4	000	5 000	6 000	
27.	027	1	2	3	000	4	000	5 000	6 000	
28.	028	1	2	3	000	4	000	5 000	6 000	
29.	029	1	2	3	000	4	000	5 000	6 000	
30.	030	1	2	3	000	4	000	5 000	6 000	
31.	031	1	2	3	000	4	000	5 000	6 000	
32 Countries with which transactions	033	¹ 709	2	3	000	4	000	5	6	
were less than \$50,000.00 each, total	032	103			000		000	000	000	

Page 10 FORM BE-45 (REV. 10/2018)

SCHEDULE A3 – Quarterly Reinsurance Transactions with Unaffiliated Foreign Persons

Are you reporting transactions with unaffiliated foreign persons?

23000 **3** ¹**3** Yes

- If you checked "Yes" for transaction codes 1–4 in Column 4 of question 8, and you had transactions of this type with unaffiliated foreign persons, reporting below is mandatory.
- Report all currency amounts in thousands of dollars. Example: If the amount is \$1,555,555.00 report as 1,556.
- Round amounts less than \$500.00 to 0.
- To report additional countries, use the overflow sheet provided on page 19 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 18 of the General Instructions.

NOTE – Do not report reserve transfers or recaptures of reserves.

		BEA USE		Transactions with unaffiliated foreign persons							
				Reins	suranc	e premiums		Reinsurance losses			
Country				Transaction Co	ode 1	Transaction Co	de 2	Transaction Code 3	Transaction Code 4		
•		ONL	Ĭ	Quarterly premiums earned on reinsurance assumed		Quarterly premius incurred on reinsur ceded		Quarterly losses incurred on reinsuranc assumed	recovered	Quarterly losses recovered on reinsurance ceded	
		(1)	(2)	(3)		(4)		(5)	(6)		
1. Total, lines 2–32 of this page	001	1	2	3	000		000	5 000		000	
2.	002	1	2	3	000		000	5 000		000	
3	003	1	2	3	000	4	000	5 000		000	
4	004	1		3	000		000	5 000		000	
5	005	1	2	3	000		000	5 000		000	
6	006	1	2	3	000		000	5 000		000	
7	007	1	2	3	000		000	5 000		000	
8.	008	1	2	3	000		000	5 000		000	
9.	009	1	2	3	000		000	5 000		000	
10.	010	1	2	3	000		000	5 000		000	
11.	011	1	2	3	000		000	5 000		000	
12.	012	1	2	3	000		000	5 000		000	
13.	013	1	2	3	000		000	5 000		000	
14.	014	1	2	3	000	4	000	5 000	6	000	
15.	015	1	2	3	000	4	000	5 000	6	000	
16.	016	1	2	3	000	4	000	5 000	6	000	
17.	017	1	2	3	000	4	000	5 000	6	000	
18.	018	1	2	3	000	4	000	5 000	6	000	
19.	019	1	2	3	000	4	000	5	6	000	
20.	020	1	2	3	000	4	000	5	6	000	
21.	021	1	2	3	000	4	000	5	6	000	
22.	022	1	2	3	000	4	000	5 000	6	000	
23.	023	1	2	3	000	4	000	5	6	000	
24.	024	1	2	3	000	4	000	5	6	000	
25.	025	1	2	3	000	4	000	5 000	6	000	
26.	026	1	2	3	000	4	000	5 000	_	000	
27.	027	1	2	3	000	4	000	5 000	6	000	
28.	028	1	2	3	000	4	000	5 000	6	000	
29.	029	1	2	3	000		000	5 000		000	
30.	030	1	2	3	000		000	5 000		000	
31.	031	1	2	3	000	4	000	5 000	0	000	
32 Countries with which transactions		¹ 709	2	3		4		5	6		
were less than \$50,000.00 each, total	032	709			000		000	000		000	

Reporting Instructions for Schedule B

REPORTING INSTRUCTIONS

IMPORTANT – Only report transactions accrued during the reporting period. ONLY report transactions between the U.S. Reporter's domestic operations and foreign persons. DO NOT report transactions between the U.S. Reporter's foreign affiliates and foreign persons, between the U.S. Reporter's domestic operations and other U.S. persons, or transactions between other U.S. persons and the U.S. Reporter's foreign affiliates.

How to Report:

1) Report all amounts in thousands of U.S. dollars (omitting 000). Round amounts less than \$500.00 to 0. Do not enter amounts in the shaded portions of each item.

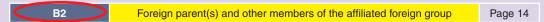
Use the following **Schedule B's** on pages 13–15 to report your quarterly primary and auxiliary insurance transactions based on your relationship with the foreign person(s) (see page 7 for more information on reporting relationships):

Schedule	Relationship with the consolidated domestic U.S. Reporter	Page
B1	Foreign affiliates	13
B2	Foreign parent(s) and other members of the affiliated foreign group	14
В3	Unaffiliated foreign persons	15

- 2) Enter the country(ies) of the transactor(s) in the left most column of Schedule B
- 3) Report the U.S. Reporter's quarterly primary and auxiliary Insurance transactions with the foreign transactor in the appropriate column based on the transaction type:
 - Transaction Code 5 (Column 3) Quarterly premiums earned on primary insurance sold
 - Transaction Code 6 (Column 4) Quarterly losses incurred on primary insurance sold
 - Transaction Code 7 (Column 5) Quarterly auxiliary insurance receipts
 - Transaction Code 8 (Column 6) Quarterly auxiliary insurance payments

Example:

The U.S. Reporter had a total of \$6,325,000 in quarterly losses incurred on primary insurance sold to its foreign parent group in Switzerland.



Per the table above, losses incurred on primary insurance sold to the foreign parent group are reportable on Schedule B2, which is on page 14.

On Schedule B2, enter "Switzerland" in column 1. Enter "6,325" under transaction code 6 in Column 4.

IMPORTANT – Report amounts in thousands of U.S. dollars (omitting 000). Round amounts less than \$500.00 to 0. Do not enter amounts in the shaded portions of each item.

Example

Transactions with foreign parent group Primary insurance **Auxiliary insurance BEA** USE Transaction Code 5 **Transaction Code 6 Transaction Code 7 Transaction Code 8** Country **ONLY** Quarterly losses Quarterly premiums Quarterly receipts Quarterly payments incurred on primary earned on primary insurance sold insurance sold (1) (2) (3) (4)(6)2 3 1. Switzerland 000 6,325 000 000 000

Quarterly transactions should be calculated as follows:

For property and casualty insurance companies (Columns 3 and 4)

Report premiums (transaction code 5) as follows: Premiums written during the current quarter, plus unearned premiums at the beginning of the current quarter, minus unearned premiums at the end of the current quarter. Report premiums net of cancellations. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Report losses incurred (transaction code 6) as follows: Losses paid during the quarter, plus case reserves at the end of the current quarter, plus losses incurred but not reported at the end of the current quarter, minus case reserves at the beginning of the current quarter, minus losses incurred but not reported at the beginning of the current quarter. Losses paid or recovered should not include loss adjustment expenses (reportable under transaction codes 7 and 8).

For life insurance companies (Columns 3 and 4)

Report premiums earned (transaction code 5) as follows: These amounts should be adjusted for changes in due, deferred, and advanced premiums for the current year. Report premiums gross of commissions and profit commissions paid to foreign persons, including commissions initially paid to a U.S. intermediary (agent or broker) of a foreign person.

Calculate transaction code 6 as follows: Losses paid reflect policy claims on reinsurance assumed or ceded, adjusted for changes in claims due, unpaid, and in the course of settlement.

Auxiliary insurance services (Columns 5 and 6)

Include agent's commissions, insurance brokering and agency services, insurance consulting services, evaluation, allocated loss adjustment expenses, and other adjustment services, actuarial services, salvage administration services, and regulatory and monitoring services on indemnities and recovery services.

Page 12 FORM BE-45 (REV. 10/2018)

SCHEDULE B1 – Quarterly Primary and Auxiliary Insurance Transactions with Foreign Affiliates

Are you reporting transactions with foreign affiliates?

31000 **1** 1 Yes

- If you checked "Yes" to any of the transaction codes 5-8 in Column 4 of question 8, and you had transactions of this type with your foreign affiliates, reporting below is mandatory.
- Report all currency amounts in thousands of dollars. Example: If the amount is \$1,555,555.00 report as 1,556.
- Round amounts less than \$500.00 to 0.
- To report additional countries, use the overflow sheet provided on page 20 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 18 of the General Instructions.

NOTE — For transaction codes 5 and 6, only report premiums and losses related to primary (direct) insurance. Reinsurance premiums and losses should be reported as transaction codes 1 and 2 on **Schedule A**.

				Transactions with foreign affiliates								
				Pri	imary i	nsurance		Auxiliary	insurance			
		BEA USE		Transaction C	ode 5	Transaction Code 6		Transaction Code 7	Transaction Code 8			
Country		ONL	Υ	Quarterly premiums earned on primary insurance sold		Quarterly losses incurred on primary insurance sold		Quarterly receipts	Quarterly payments			
		(1)	(2)	(3)		(4)		(5)	(6)			
1. Total, lines 2–32 of this page	001	1	2	3	000	4 0	000	5 000	6 000			
2.	002	1	2	3	000	0	000	5 000	000			
3.	003	1	2	3	000	0	000	000	000			
4.	004	1	2	3	000	0	000	000	6 000			
5.	005	1		3	000	0	000	5 000	000			
6.	006	1	2		000		000	5 000	6 000			
7.	007	1	2	3	000	4	000	5 000	6 000			
8.	008	1	2		000		000	5 000	6 000			
9.	009	1	2	3	000		000	5 000	6 000			
10.	010	1	2	3	000		000	5 000	6 000			
11.	011	1	2	3	000		000	5 000	6 000			
12.	012	1	2	3	000		000	5 000	6 000			
13.	013	1	2	3	000		000	5 000	6 000			
14.	014	1	2	3	000		000	5 000	6 000			
15.	015	1	2	3	000		000	000	6 000			
16.	016	1	2	3	000		000	000	6 000			
17.	017	1	2	3	000		000	000	6 000			
18.	018	1	2	3	000		000	000	6 000			
19.	019	1	2	3	000		000	5 000	000			
20.	020	1	2	3	000	⁴	000	5 000	000			
21.	021	1	2	3	000		000	000	6 000			
22.	022	1	2	3	000	4 0	000	5 000	000			
23.	023	1	2	3	000		000	5 000	000			
24.	024	1	2	3	000	⁴ 0	000	5 000	6 000			
25.	025	1	2	3	000	4 0	000	5 000	000			
26.	026	1	2	3	000		000	5 000	6 000			
27.	027	1	2	3	000	4 0	000	5 000	6 000			
28.	028	1	2	3	000		000	5 000	6 000			
29.	029	1	2	3	000	4 0	000	5 000	6 000			
30.	030	1	2	3	000	4 0	000	5 000	6 000			
31.	031	1	2	3	000		000	5 000	6 000			
32. Countries with which transactions were less than \$50,000,00 each, total	030	¹ 709	2	3	000	4		000	6			
were less than \$50,000.00 each, total	032	¹ 709			000	0	000	000				

SCHEDULE B2 – Quarterly Primary and Auxiliary Insurance Transactions with Foreign Parent(s) and Other Members of the FPG

Are you reporting transactions with foreign parent(s) and other members of the foreign parent group?

32000 2 12 Yes

- If you checked "Yes" to any of the transaction codes 5-8 in Column 4 of question 8, and you had transactions of this type with your foreign parent(s) and other members of the FPG, then reporting below is mandatory.
- Report all currency amounts in thousands of dollars. Example: If the amount is \$1,555,555.00 report as 1,556.
- Round amounts less than \$500.00 to 0.
- To report additional countries, use the overflow sheet provided on page 20 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 18 of the General Instructions.

NOTE — For transaction codes 5 and 6, only report premiums and losses related to primary (direct) insurance. Reinsurance premiums and losses should be reported as transaction codes 1 and 2 on **Schedule A**.

				Transactions with foreign parent group								
				Pri	mary i	nsurance		Auxiliary insurance				
Country		BEA USE ONLY		Transaction Code 5 Quarterly premiums earned on primary insurance sold		Transaction Code 6		Transaction Code 7	Transaction Code 8			
						Quarterly losses incurred on primary insurance sold		Quarterly receipts	Quarterly payments			
		(1)	(2)	3		4 (4)		5 (5)	6 (6)			
1. Total, lines 2–32 of this page	001	1	2	3	000	(000	000	000			
2.	002	1	2	3	000		000	000	000			
3.	003	1	2	3	000	(000	000	000			
4.	004	1	2	3	000	(000	000	000			
5.	005	1	2	3	000		000	000	000			
6.	006		2	3	000	(000	000	000			
7.	007	1	2	3	000	4	000	000	000			
8.	008	1		3	000	(000	000	000			
9.	009	1	2		000		000	5 000	6 000			
10.	010	1	2	3	000		000	5 000	6 000			
11.	011	1	2	3	000		000	5 000	6 000			
12.	012	1	2	3	000		000	5 000	000			
13.	013	1	2	3	000		000	5 000	6 000			
14.	014	1	2	3	000		000	5 000	6 000			
15.	015	1	2	3	000		000	5 000	6 000			
16.	016	1	2	3	000		000	5 000	6 000			
17.	017	1	2	3	000		000	5 000	6 000			
18.	018	1	2	3	000	4	000	5 000	6 000			
19.	019	1	2	3	000	4	000	5 000	6 000			
20.	020	1	2	3	000	4	000	5 000	6 000			
21.	021	1	2	3	000	4	000	5 000	6 000			
22.	022	1	2	3	000	4	000	5 000	6 000			
23.	023	1	2	3	000	4	000	5 000	6 000			
24.	024	1	2	3	000	4	000	5 000	6 000			
25.	025	1	2	3	000	4	000	5 000	6 000			
26.	026	1	2	3	000	4	000	5 000	6 000			
27.	027	1	2	3	000	4	000	5 000	6 000			
28.	028	1	2	3	000	1	000	5 000	6 000			
29.	029	1	2	3	000	4	000	5 000	6 000			
30.	030	1	2	3	000	4	000	5 000	6 000			
31.	031	1	2	3	000	4	000	5 000	6 000			
32. Countries with which transaction were less than \$50,000.00 each, to	ıs	¹ 709	2	3	000	4	000	5 000	6			

Page 14 FORM BE-45 (REV. 10/2018)

SCHEDULE B3 - Quarterly Primary and Auxiliary Insurance Transactions with Unaffiliated Foreign Persons

Are you reporting transactions with unaffiliated foreign persons?

33000 **3** ¹**3** Yes

- If you checked "Yes" to any of the transaction codes 5-8 in Column 4 of question 8, and you had transactions of this type with unaffiliated foreign persons, then reporting below is mandatory.
- Report all currency amounts in thousands of dollars. Example: If the amount is \$1,555,555.00 report as 1,556.
- Round amounts less than \$500.00 to 0.
- To report additional countries, use the overflow sheet provided on page 20 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 18 of the General Instructions.

NOTE — For transaction codes 5 and 6, only report premiums and losses related to primary (direct) insurance. Reinsurance premiums and losses should be reported as transaction codes 1 and 2 on **Schedule A**.

					Transactions with unaffiliated foreign persons								
					Pri	mary i	nsurance		Auxiliary insurance				
			BEA USE		Transaction Co	ode 5	Transaction Cod	le 6	Transaction Code 7	Transaction Code 8			
	Country		ONLY		Quarterly premiums earned on primary insurance sold		Quarterly losses incurred on primary insurance sold		Quarterly receipts	Quarterly payments			
			(1)	(2)	(3)		(4)		(5)	(6)			
1.	Total, lines 2-32 of this page	001	1	2	3	000	4	000	5 000	6 000			
2.		002	1	2	3	000	4 0	000	5 000	6 000			
3.		003	1	2	3	000	4 0	000	5 000				
4.		004	1	2	3	000	⁴ 0	000	5 000				
5.		005	1	2	3	000		000	5 000				
6.		006	1	2	3	000		000	5 000				
7.		007	1	2	3	000		000	5 000				
8.		008	1	2	3	000		000	5 000				
9.		009	1	2	3	000		000	000				
10.		010	1	2	3	000		000	5 000				
11.		011	1	2	3	000		000	5 000				
12.		012	1	2	3	000		000	5 000				
13.		013	1	2	3	000		000	5 000				
14.		014	1	2	3	000		000	5 000				
15.		015	1	2	3	000		000	000				
16.		016	1	2	3	000		000	5 000				
17.		017	1	2	3	000		000	000				
18.		018	1	2	3	000		000	5 000				
19.		019	1	2	3	000		000	000				
20.		020	1	2	3	000		000	5 000				
21.		021	1	2	3	000		000	000				
22.		022	1	2	3	000		000	5 000				
23.		023	1	2	3	000		000	5 000				
24.		024	1	2	3	000		000	5 000				
25.		025	1	2	3	000		000	5 000				
26.		026	1	2	3	000		000	5 000				
27.		027	1	2	3	000		000	5 000				
28.		028	1	2	3	000		000	5 000				
29.		029	1	2	3	000		000	5 000				
30.		030	1	2	3	000		000	5 000				
31.		031	1	2	3	000)00	5 000				
32.	Countries with which transactions were less than \$50,000.00 each, total	032	¹ 709	2	3	000	4	000	000	6			

GENERAL INSTRUCTIONS

Public reporting burden for this BE-45 report is estimated to average 9 hours per response. This burden includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate to Director, Bureau of Economic Analysis (BE-1), 4600 Silver Hill Rd., Washington, DC 20233; and to the Office of Management and Budget, Paperwork Reduction Project 0608-0066, Washington, DC 20503.

Purpose — Reports on this form are required to obtain reliable and up-to-date information on transactions between U.S. insurance companies and foreign persons. The data will be used in compiling the U.S. international transactions accounts and the national income and product accounts. The information will also be used to formulate U.S. policy and to analyze the impact of that policy, and the policies of foreign countries, on such international transactions.

Authority — This survey is being conducted under the authority of the International Investment and Trade in Services Survey Act (P.L. 94-472, 90 Stat. 2059, 22 U.S.C. 3101-3108, as amended – hereinafter "the Act"), and the filing of reports is mandatory under section 5(b)(2) of the Act (22 U.S.C. 3104). Regulations for the survey may be found in 15 CFR Part 801. The survey has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act (44 U.S.C. 3501, et seq).

Penalties — Persons who fail to report may be subject to a civil penalty and to injunctive relief commanding such person to comply, or both. These civil penalties are subject to inflationary adjustments. Those adjustments are found in 15 CFR 6.4. Whoever willfully fails to report shall be fined, and, if an individual, may be imprisoned for not more than one year, or both. Any officer, director, employee, or agent of any entity who knowingly participates in such violations, upon conviction, may be punished by a like fine, imprisonment, or both. (See 22 U.S.C. 3105.) Notwithstanding the above, a U.S. person is not subject to any penalty for failure to report if a valid Office of Management and Budget (OMB) control number is not displayed on the form. The control number for Form BE-45 (0608-0066) is displayed at the top of the first page of this form.

Confidentiality — The Act provides that your report to this Bureau is confidential and may be used only for analytical and statistical purposes. Without your prior written permission, the information filed in your report cannot be presented in a manner that allows it to be individually identified. Your report cannot be used for purposes of taxation, investigation, or regulation. Copies retained in your files are immune from legal process. Per the Cybersecurity Enhancement Act of 2015, your data are protected from Cybersecurity risks through security monitoring of BEA information systems.

I. WHO IS TO REPORT AND GENERAL COVERAGE

A. Who must report — A response is required from each U.S. insurance company that was notified by BEA about the survey.

1. Mandatory and voluntary reporting

- (a) Mandatory reporting A complete BE-45 report is required from each U.S. insurance company that engaged in reinsurance transactions with foreign persons, that earned premiums from, or incurred losses to, foreign persons in the capacity of primary insurers, or that engaged in international sale or purchase transactions in services auxiliary to insurance. Filing is mandatory if, with respect to these transactions, any of the following eight items was greater than positive \$8,000,000 or less than negative \$8,000,000 for the previous calendar year or is expected to be in the current calendar year, on an accrual basis: (1) premiums earned, and (2) losses, on reinsurance assumed; (3) premiums incurred, and (4) losses, on reinsurance ceded; (5) premiums earned, and (6) losses, on primary insurance sold; (7) sales of, and (8) purchases of, auxiliary insurance services.
- Exemption A U.S. person receiving this form from BEA is not required to report data if transactions fall below the threshold described in Part I.A.1. However, it must complete and return the survey through page 6.

- B. Transactions involving a broker At times, insurance transactions between a U.S. person and a foreign person may be arranged by, billed through, or otherwise facilitated by, a broker, agent, or intermediary. In order to avoid duplication, the data should be reported by the insurance company assuming the risk or recovering or paying the loss. Brokers, agents, and intermediaries are generally not to report.
- C. Consolidation A U.S. enterprise should file a single Form BE-45 covering combined (total) insurance services transactions of all its domestic subsidiaries, and parts, that are insurance services providers.

1. Consolidating unincorporated enterprises

Consolidate into your BE-45 report the transactions of unincorporated enterprises in which your company has voting control. Please see the following items on determining the voting interest in typical unincorporated enterprises.

Partnerships – Most partnerships are either general partnerships or limited partnerships. Consolidation of partnerships and inclusion of their insurance services transactions (purchases and sales) on the BE-45 survey is based on voting control.

(a) General partnerships

Determination of voting interest – The determination of the percentage of voting interest of a general partner is based on who controls the partnership. The percentage of voting interest is not based on the percentage of ownership in the partnership's equity. The general partners are presumed to control a general partnership. Unless a clause to the contrary is contained in the partnership agreement, a general partnership is presumed to be controlled equally by each of the general partners.

Managing partners – If one general partner is designated as the managing partner, responsible for the day-to-day operations of the partnership, this does not necessarily transfer control of the partnership to the managing partner. If the managing partner must obtain approval for annual operating budgets and for decisions relating to significant management issues from the other general partners, then the managing partner does not have a 100 percent voting interest in the partnership.

(b) Limited partnerships

Determination of voting interest – The determination of the percentage of voting interest in a limited partnership is based on who controls the partnership. The percentage of voting interest is not based on the percentage of ownership in the partnership's equity. In most cases, the general partner is presumed to control a limited partnership, and therefore, have a 100 percent voting interest in the limited partnership. If there is more than one general partner, the partnership is presumed to be controlled equally by each of the general partners, unless a clause to the contrary is contained in the partnership agreement. Therefore, unless a clause to the contrary is contained in the partnership agreement, limited partners are presumed to have zero voting interest in a limited partnership.

Managing partners – See discussion under "General Partnerships" above.

(c) Limited Liability Companies (LLCs)

Determination of voting interest – The determination of the percentage of voting interest in an LLC is based on who controls the LLC. The percentage of voting interest is not based on the percentage of ownership in the LLC's equity. LLCs are presumed to be controlled equally by each of its members (owners), unless a clause to the contrary is contained in the articles of organization or in the operating agreement.

Managing member – If one member is designated as the managing member responsible for the day-to-day operations of the LLC, this does not necessarily transfer control of the LLC to the managing member. If the managing member must obtain approval for annual operating budgets and for decisions relating to other significant management issues from the other members, then the managing member does not have a 100 percent voting interest in the LLC.

Page 16 FORM BE-45 (REV. 10/2018)

GENERAL INSTRUCTIONS — Continued

II. WHAT TO REPORT

- A. Report transactions with affiliated foreign persons as well as with unaffiliated foreign persons (see Part IV.K and L). File separate schedules to report transactions with (1) your foreign affiliates,
 (2) your foreign parent(s) and other members of the foreign parent group, and (3) unaffiliated foreign persons.
- B. Report transactions with alien insurance groups, whether or not funds remitted to and from these organizations are cleared through their American trust funds
- C. Note that the criterion for reporting is whether the transaction is between a U.S. person and a foreign person. It is immaterial whether the assets insured are located in the United States or abroad.
- D. Report transactions with U.S. affiliates of foreign firms for the account of their foreign parent firm. (Report them on the form covering your transactions with unaffiliated foreign persons.)
- E. Report transactions with foreign persons made by your foreign affiliate for your account. (Report them on the form covering your transactions with unaffiliated foreign persons.)

III. WHAT NOT TO REPORT

A. Finite insurance and finite reinsurance — Finite insurance and reinsurance contracts transfer a limited amount of insurance risk from the policyholder to the insurer with the policyholder retaining a significant portion of that risk. Contract terms and features that can limit the transfer of insurance risk include the following: (1) Contract terms that result in the premium paid by the policyholder plus anticipated investment income earned by the insurer on that premium approximately equaling the reimbursements (including claim recoveries and any contract adjustments) expected by the policyholder from the insurer (2) Adjustable features that result in profit-and-loss sharing arrangements between the policyholder and the insurer (3) A contract coverage period that extends beyond one year and premiums for subsequent periods that may depend on the loss experience of earlier years (4) Limits on the amount of claims to be paid by the insurer (5) Loss corridors that limit or eliminate the risk of loss for a specified percentage or dollar amount of claims within the range of contract coverage (6) Favorable contract termination provisions, for example, that would result in a loss to the policyholder (7) Premiums that are a substantial percentage of the maximum coverage provided.

Types of finite insurance include, but are not limited to, loss portfolio transfers, adverse development coverages, and spread loss coverages. There may be other types of finite reinsurance that are not explicitly listed but are substantially identical in function and should **not** be reported on the survey as well.

- **B.** Do **not** report reserve transfers or recaptures of reserves on the inception or termination of reinsurance contracts. Such amounts do not represent the provision of a service, and should be excluded from reporting on the BE-45 survey. Only include current premiums on transferred amounts.
- C. Do not report transactions with U.S. affiliates of foreign firms for their own account. Transactions with these U.S. affiliates are considered domestic-to-domestic for purposes of this survey.
- D. Do not report transactions with foreigners made by your foreign affiliates for their own account.
- E. Do not report premiums to, or losses from, foreign insurance companies on primary or direct insurance. Premiums on such insurance purchased from foreign insurance companies are to be reported on Form BE-120, Benchmark Survey of Transactions in Selected Services and Intellectual Property with Foreign Persons, and Form BE-125, Quarterly Survey of Transactions in Selected Services and Intellectual Property with Foreign Persons.

IV. DEFINITIONS

A. Insurance companies, for purposes of this survey, includes insurance carriers of all types and groups of such companies.

- **B.** United States, when used in a geographic sense, means the several states, the District of Columbia, the Commonwealth of Puerto Rico, and all the territories and possessions of the United States. **NOTE:** The U.S. Virgin Islands and Guam are territories of the United States.
- C. Foreign, when used in a geographic sense, means that which is situated outside the United States or which belongs to or is characteristic of a country other than the United States.
- D. Person means any individual, branch, partnership, associated group, association, estate, trust, corporation, or other organization (whether or not organized under the laws of any State), and any government (including a foreign government, the U.S. Government, a State or local government, and any agency, corporation, financial institution, or other entity or instrumentality thereof, including a government-sponsored agency).
 - United States person means any person resident in the United States or subject to the jurisdiction of the United States.
 - Foreign person means any person resident outside the United States or subject to the jurisdiction of a country other than the United States.
- E. Business enterprise means any organization, association, branch, or venture which exists for profitmaking purposes or to otherwise secure economic advantage, and any ownership of any real estate. (A business enterprise is a "person" within the definition in paragraph D above.)
- **F. Direct investment** means the ownership or control, directly or indirectly, by one person of 10 percent or more of the voting stock of an incorporated business enterprise or an equivalent ownership interest in an unincorporated business enterprise.
- G. Parent means a person of one country who, directly or indirectly, owns or controls 10 percent or more of the voting stock of an incorporated business enterprise or an equivalent ownership interest in an unincorporated business enterprise, which is located outside that country.
 - U.S. parent means the U.S. person that has direct investment in a foreign business enterprise.
 - 2. Foreign parent means the foreign person, or the first person outside the United States in a foreign chain of ownership, which has direct investment in a U.S. business enterprise, including a branch.
- H. Foreign parent group means (i) the foreign parent, (ii) any foreign person, proceeding up the foreign parent's ownership chain, that owns more than 50 percent of the person below it, up to and including the person that is not owned more than 50 percent by another foreign person, and (iii) any foreign person, proceeding down the ownership chain(s) of each of these members, that is owned more than 50 percent by the person above it.
- I. Affiliate means a business enterprise located in one country which is directly or indirectly owned or controlled by a person of another country to the extent of 10 percent or more of its voting stock for an incorporated business or an equivalent interest for an unincorporated business, including a branch.
 - Foreign affiliate means an affiliate located outside the United States in which a U.S. person has direct investment.
 - U.S. affiliate means an affiliate located in the United States in which a foreign person has direct investment.
- J. Foreign affiliate of a foreign parent means, with reference to a given U.S. affiliate, any member of the foreign parent group owning the U.S. affiliate that is not a foreign parent of the U.S. affiliate.
- K. Affiliated foreign person means, with respect to a given U.S. person in a direct investment relationship, (i) a foreign affiliate of which the U.S. person is a U.S. parent, or (ii) the foreign parent or other member of the foreign parent group of which the U.S. person is a U.S. affiliate.
- L. Unaffiliated foreign person means, with respect to a given U.S. person, any foreign person that is not an affiliated foreign person as defined in paragraph J above.

GENERAL INSTRUCTIONS — Continued

M. Country means the country of location of the foreign person with whom a transaction has occurred.

V. SPECIFIC ITEM INSTRUCTIONS

Schedule A

How to calculate transaction codes 1-4

NOTE – Do not include transfers of reserves, and/or recaptures of reserves, on Schedule A. Such transactions should be excluded from reporting on the BE-45 survey. If you have reported these transactions in your data during previous quarters, please provide details about the timing and amount of the transactions in the comment box provided on page 6 of this survey. Only report current premiums on transferred amounts.

For property and casualty insurance companies

Calculate transaction codes 1 and 2 as follows: Premiums written (transaction code 1) or ceded (transaction code 2) during the quarter, plus unearned premiums at the beginning of the quarter, minus unearned premiums at the end of the quarter. Report premiums net of cancellations. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Calculate transaction codes 3 and 4 as follows: Losses paid (transaction code 3) or recovered (transaction code 4) during the quarter, plus case reserves at the end of the quarter, plus losses incurred but not reported at the end of the quarter, minus case reserves at the beginning of the quarter, minus losses incurred but not reported at the beginning of the quarter. Losses paid or recovered should not include loss adjustment expenses (reportable on Schedule B).

For life insurance companies

Premiums received (transaction code 1) and paid (transaction code 2) reflect premiums accrued on reinsurance assumed from or ceded to insurance companies resident abroad. These amounts, therefore, are adjusted for changes in due, deferred, and advanced premiums for each quarter. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Losses paid (transaction code 3) and recovered (transaction code 4) reflect policy claims on reinsurance assumed or ceded, adjusted for changes in claims due, unpaid, and in the course of settlement.

Schedule B

How to calculate transaction codes 5 and 6

For property and casualty insurance companies

Report premiums (transaction code 5) as follows: Premiums written during the current quarter, plus unearned premiums at the beginning of the current quarter, minus unearned premiums at the end of the current quarter. Report premiums net of cancellations. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Report losses incurred (transaction code 6) as follows: Losses paid during the quarter, plus case reserves at the end of the current quarter, plus losses incurred but not reported at the end of the current quarter, minus case reserves at the beginning of the current quarter, minus losses incurred but not reported at the beginning of the current quarter. Losses paid or recovered should not include loss adjustment expenses (reportable under transaction codes 7 and 8).

For life insurance companies

Report premiums earned (transaction code 5). These amounts should be adjusted for changes in due, deferred, and advanced premiums for the current year. Report premiums gross of commissions and profit commissions paid to foreign persons, including commissions initially paid to a U.S. intermediary (agent or broker) of a foreign person.

Calculate transaction code 6 as follows: Losses incurred reflect policy claims on direct insurance assumed, adjusted for changes in claims due, unpaid, and in the course of settlement.

How to calculate transaction codes 7 and 8 (all companies)

Include agent's commissions, insurance brokering and agency services, insurance consulting services, evaluation, allocated loss adjustment expenses, and other adjustment services, actuarial services, salvage administration services, and regulatory and monitoring services on indemnities and recovery services.

VI. REPORTING PROCEDURES

- A. Due date A completed BE-45 is due within 60 days of the close of each calendar quarter, except the final quarter of the calendar year, when the reports are due within 90 days of the close of the calendar year.
- **B.** Calendar year For the purposes of this form, you must report on a calendar year basis. For example, your fourth quarter report is your reporting quarter that ends in the fourth calendar quarter.
- C. Extension Requests for an extension of the reporting deadline will not normally be granted. However, in a hardship case, a written request for an extension will be considered if it is received at least 15 days before the due date. You may fax the request to (301) 278-9506 or e-mail the request to BE-45extension@bea.gov. BEA will provide a written response to such a request.
- D. Assistance and additional copies of the forms Phone (301) 278-9303 for assistance, or send an email to be45help@bea.gov. Copies of BEA survey forms are also available on BEA's web site: www.bea.gov/ ssb.
- E. Rounding Report currency amounts in U.S. dollars rounded to thousands (omitting 000). For example, if the amount is \$1,334,515.00, report it as \$1,335.
- F. Estimates If actual figures are not available, report estimates and label them as such. When data items cannot be fully subdivided as required, report totals and an estimated breakdown of the totals.
- G. Original and file copies File a single original copy of the form. Please use the copy with the address label if such a labeled copy has been provided. In addition, retain a copy of the report in your files to facilitate resolution of problems; these copies should be retained by the U.S. Reporter for a period of not less than three years beyond the original due date.
- H. Where to send the report To file a report electronically, see our web site at www.bea.gov/efile for details.

Send reports through the U.S. Postal Service to:

Bureau of Economic Analysis Balance of Payments Division, BE-50 (SSB) 4600 Silver Hill Road Washington, DC 20233

Send reports filed by direct private express delivery to:

Bureau of Economic Analysis Balance of Payments Division, BE-50 (SSB) 4600 Silver Hill Road Suitland, MD 20746

Fax reports to: (301) 278-9506

Page 18 FORM BE-45 (REV. 10/2018)

OVERFLOW SHEET FOR Schedule A OF FORM BE-45, QUARTERLY SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Company Name			Control Number
Form BE-45 Schedule A	This sc	hedule covers transactions with — Check (X) one	Overflow Page # of
	1 1 1	Foreign affiliates	
	2 ¹ 2	Foreign parents and/or other members of	the FPG
	3 ¹ 3	Unaffiliated foreign persons	

Country	BEA USE ONLY	Transaction code 1 Quarterly premiums earned on reinsurance assumed (3)	Transaction code 2 Quarterly premiums incurred on reinsurance ceded (4)	Transaction code 3 Quarterly losses incurred on reinsurance assumed (5)	Transaction code 4 Quarterly losses recovered on reinsurance ceded (6)	
01. Country total for this page	1 2	3	4	5	6	
(sum of 02–23)	1 2	3	000	5 000	000	
02.	1 2	000	000	000	000	
03.		000	000	000	000	
04.	1 2	3 000	000	5	6	
05.	1 2	3 000	4 000	5	6	
	1 2	3	4	5	6	
06.	1 2	3 000	4 000	5 000	6 000	
07.	1 2	3 000	4 000	5	6	
08.	1 2	3	000	5 000	6	
09.		000	000	000	000	
10.	1 2	3 000	000	5	000	
11.	1 2	3 000	000	5	6	
12.	1 2	3 000	4 000	5	6	
13.	1 2	3 000	4 000	5 000	6 000	
	1 2	3	4	5	6	
14.	1 2	3	4 000	5	6	
15.	1 2	3	000	5 000	6 000	
16.	1 2	3 000	000	5 000	000	
17.		000	000	000	000	
18.	1 2	3 000	000	5	000	
19.	1 2	3 000	000	5	6	
20.	1 2	3 000	4 000	5	6	
	1 2	3	4	5	6	
21.	1 2	3 000	4 000	5	6	
22.	1 2	3 000	4 000	5 000	6 000	
23.		000	000	000	000	

NOTE — You may use this Overflow Sheet if there is insufficient space on the Form BE-45, **Schedule A**, to list every individual foreign country with which you had transactions.

OVERFLOW SHEET FOR **Schedule B** OF FORM BE-45, QUARTERLY SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Company Name		Control Number
Form BE-45 Schedule B	This schedule covers transactions with — Check (X) one	Overflow Page # of
	1 11 Foreign affiliates	
	2 12 Foreign parents and/or other members of	f the FPG
	3 ¹ 3 Unaffiliated foreign persons	

				Primar	ry ir	nsurance		Auxiliary insurance					
	Country	BEA USE ONLY		USE ONLY		Quarterly	Quarterly premiums earned on primary insurance sold		Transaction code 6 Quarterly losses incurred on primary insurance sold (4)		le 7	Quarterly payments	
01.	Country total for this page (sum	1	2	3		4		(5)		(6)			
	of rows 02–23)	1	2	3	00	4 00	00	5	000	6	000		
02.		1	2	3	00	00	00	5	000	6	000		
03.			2		00		00		000	6	000		
04.				00	00	00	00		000		000		
05.		1	2	3 00	00	4	00	5	000	6	000		
06.		1	2		00	4 00	00	5	000	6	000		
07.		1	2	3	00	4	00	5	000	6	000		
08.		1	2	3	00	4 00	00	5	000	6	000		
09.		1	2	3	00	4	000	5	000	6	000		
10.		1	2	3	00	4	00	5	000	6	000		
11.		1	2	3	00	4	00	5	000	6	000		
12.		1	2	3		4		5		6	000		
		1	2	3	00	4	000	5	000	6			
13.		1	2	3	00	4	00	5	000	6	000		
14.		1	2	3	00	4 00	00	5	000	6	000		
15.		1	2	3	00	4	00	5	000	6	000		
16.		1	2	3	00	4	00	5	000	6	000		
17.			2		00		00		000	6	000		
18.			2		00		00		000	6	000		
19.				00	00	00	00		000		000		
20.			2		00		00		000	6	000		
21.			2		00		00		000	6	000		
22.			2		00		00		000	6	000		
23.		1	2	3	00	4	00	5	000	6	000		

NOTE — You may use this Overflow Sheet if there is insufficient space on the Form BE-45, **Schedule B**, to list every individual foreign country with which you had transactions.

In Columns (3) and (4), only report premiums and losses related to primary (direct) insurance. Reinsurance premiums and losses should be reported as transaction codes 1 through 4 on Schedule A.

Page 20 FORM BE-45 (REV. 10/2018)