BE-45 Identification Number



10012

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

#### Name and address of U.S. Reporter Due date: 00080 Company Name: Within 30 days of the close of each calendar quarter (or within 45 days of closing the final Attention quarter of your calendar year). **Extension information:** Address See Part VI.C., page 20 of the General Instructions. 10002 State: Electronic filing: www.bea.gov/efile Zip Code: Mail via U.S. Postal Service: Bureau of Economic Analysis Balance of Payments Division, BE-50 (SSB) Fax reports to: 4600 Silver Hill Rd. (301) 278-9506 Washington, DC 20233 Assistance: E-mail: be-45help@bea.gov Send via Private Express Delivery: Telephone: (301) 278-9303 Bureau of Economic Analysis FAQ's and blank forms: www.bea.gov/ssb Balance of Payments Division, BE-50 (SSB) 4600 Silver Hill Rd. Suitland, MD 20746 **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 whose combined reportable insurance transactions with foreign persons exceeded \$8 million (based on absolute value) during the previous calendar year, or are expected to exceed that amount during the current calendar year. See Part 1.A on page 17 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 17 of the General Instructions for additional details. **Contact Information** Provide information of person to consult about this report: **Alternate Contact Information** Name and Title Name and Title 10008 Telephone Number Telephone Number 10009 10005 Fax Number Fax Number 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. Telephone Number Signature of Authorized Official Date

# Identification of U.S. Reporter

1	What is the	U.S. Reporte	er's cale	ndar gu	arter covere	d in t	this re	port?				
			Month	-	Year							
		10013 1		,								
	Beginning d	ate	/_	/_								
			Month	Day	Year							
	Ending data	10014 1	,	,								
	Enumy date											
2	What was the	he status of	the U.S.	Reporte	er during the	repo	orting	period	d ident	ified in	questi	ion 1 ?
	10017 1 <b>1</b>	In existence	the enti	re repor	ting period –	- Con	ntinue f	filling o	out this	form.		
	<sup>1</sup> 2	In existence	e during o	only par	t of the repor	ing p	eriod -	— Con	ntinue fi	illing ou	ut this fo	orm for the portion of the reporting period your
	1											ur company did not exist for a part of the period.
	<sup>1</sup> 3				eporting per Please retur							explain why your company was not in existence page 1.
3					•	•			•			enterprise at any point during the reporting period tion of U.S. business enterprise.
	10018 1 <b>1</b>	No — Cont			, ,							,
	1 2	Yes — Chec		_	0 101111.							
		<sup>2</sup> <b>1</b>	Δ —	Owned	by another l	.S. er	ntity or	r busine	ess en	iterprise	e for par	rt of the reporting period — Enter the name,
		'	conta repo	act infor rt transa	mation, and a	ddres perio	ss of th	he con	ntrolling	g Ü.S. e	ntity be	elow and continue filling out this form, but only r was NOT owned by another U.S. entity. Provide
		<sup>2</sup> <b>2</b>						r busine	ess en	iterprise	e for the	e entire reporting period — Enter the name, contact
			infori	mation, a		of the	contro	rolling l	U.S. en	ntity bel		vide any comments in the section below, and
		Name 0										Comments
	10022	Contact name										
	10023	0										
		Phone number										
	10024	Address — Nun	abox and C	tro of								
	40005	0	iber and S	ueeu								
	10025	City, State, Zip										
	10026	0										
4		U.S. Reporte	er's princ	cipal lin	e of insurar	ce?						
	10019 1 <b>1</b>	Life insurar										
	<sup>1</sup> 2	Property ar		alty insu	rance							
	<sup>1</sup> 3	Other — S	pecify 10	0020								
5	What best of	describes the	U.S. Re	porter's	s insurance	opera	ations	?				
	10021 1 <b>1</b>	Insurance of	company	/								
	1 2	Insurance I										
	<sup>1</sup> 3	Insurance	group —	Please	attach a list	of me	ember	r comp	oanies	that ar	re cons	solidated in this report.
C.	What is the	mulmo	alarra II	lout!f'	tion No.		المراام	lba II o	De-	- ut - · · t	4:1- 11	S income on normal toward
6	What is the	primary Em	pioyer lo	entifica	ition Numbe	r use	a by t	ne U.S	ь. неро	orter to	THE U.S	S. income or payroll taxes?
		_										

Page 2 FORM BE-45 (REV. 02/2024)

#### Identification of U.S. Reporter - Continued

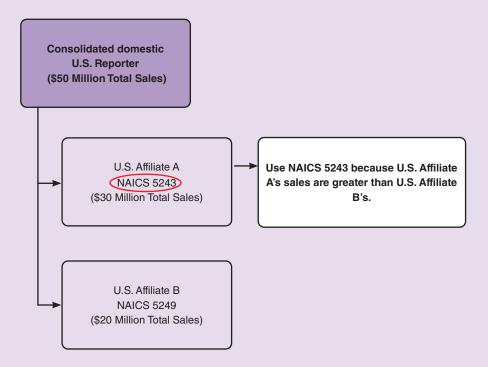
Using the summary of NAICS classifications on the next page, as well as the example below, enter the 4-digit code that best describes the <u>primary</u> sales activity of the consolidated domestic U.S. Reporter. After entering your response, continue to page 5.

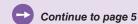
Consolidated domestic U.S. Reporter means the fully consolidated domestic U.S. enterprise consisting of (i) the U.S. corporation whose voting securities are not owned more than 50 percent by another U.S. corporation, and, proceeding down each ownership chain from that U.S. corporation, (ii) any U.S. 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/naics2022

	•		•		ŭ
Agric	culture, Forestry, Fishing, and Hunting	3332	Industrial machinery	Infor	mation
1110	Crop production	3333	Commercial and service industry machinery	5121	Motion picture and video industries
1120	Animal production and aquaculture	3334		5122	Sound recording industries
1130	Forestry and logging	0005	and commercial refrigeration equipment	5131	Newspaper, periodical, book, and directory publishers
1140	Fishing, hunting, and trapping	3335	Metalworking machinery	5132	Software publishers
1150	Support activities for agriculture and forestry	3336	Engines, turbines, and power	5161	Radio and television broadcasting stations
Minin	on Overwine and Oil 9 Coo	0000	transmission equipment	5162	Media streaming distribution services, social networks, and
	ng, Quarrying, and Oil & Gas	3339	Other general purpose machinery		other media networks and content providers
Extra	action	3341	Computer and peripheral equipment	5171	Wired and wireless telecommunications (except satellite)
2111	Oil and gas extraction		Communications equipment	5174	Satellite telecommunications
2121			Audio and video equipment	5178	All other telecommunications
	Nonmetallic minerals	3344	Semiconductors and other	5182	Computing infrastructure providers, data processing, web
	Iron ores	2245	electronic components		hosting, and related services
	Gold and silver ores	3345	Navigational, measuring, electromedical, and control instruments	5192	Web search portals, libraries, archives, and other information
	Copper, nickel, lead, and zinc ores	3346	Manufacturing and reproducing		services
	Other metal ores	3340	magnetic and optical media	Finar	ice and Insurance
	Support activities for oil and gas operations	3351	Electric lighting equipment	5221	Depository credit intermediation (Banking)
2133	Support activities for mining, except		Household appliances	5223	Activities related to credit intermediation
	for oil and gas operations		Electrical equipment	5224	Non-depository credit intermediation, except
Utilit	tios		Other electrical equipment and components		branches and agencies
2211		3361		5229	Nondepository branches and agencies
2211	Electric power generation,		Motor vehicle bodies and trailers	5231	Securities and commodity contracts
2012	transmission, and distribution	3363			intermediation and brokerage
	Natural gas distribution		Aerospace products and parts	5238	Other financial investment activities and
2213	Water, sewage, and other systems		Railroad rolling stock		exchanges
Cons	struction	3366		5242	Agencies, brokerages, and other insurance
2360	Construction of buildings	3369			related activities
	Heavy and civil engineering construction	3370	Furniture and related products	5243	Insurance carriers, except direct life insurance carriers
	Specialty trade contractors	3391	Medical equipment and supplies	5249	Direct life insurance carriers
		3399	Other miscellaneous manufacturing	5252	Funds, trusts, and other finance vehicles
Manı	ufacturing	3399	Other miscellaneous manufacturing		
3111	Animal food manufacturing	Whol	esale Trade, Durable Goods	Real	Estate and Rental and Leasing
	Grain and oilseed milling	4231	Motor vehicles and motor vehicle parts and	5310	Real estate
	Sugar and confectionery products	7201	supplies	5321	Automotive equipment rental and leasing
	Fruit and vegetable preserving and	4232	Furniture and home furnishing	5329	Other rental and leasing services
0	specialty foods	4233	Lumber and other construction materials		Lessors of nonfinancial intangible assets,
3115	Dairy products	4234			except copyrighted works
	Meat products	4234	equipment and supplies		
	Seafood product preparation and packaging	1225		Profe	ssional, Scientific, and Technical Services
	Bakeries and tortilla manufacturing	4235	Metal and mineral (except petroleum)	5411	Legal services
	Other food products	4236	Household appliances, and electrical and	5412	Accounting, tax preparation, bookkeeping,
	Beverages	4007	electronic goods		and payroll services
	Tobacco	4237	Hardware, and plumbing and heating	5413	Architectural, engineering, and related services
		4000	equipment and supplies	5414	Specialized design services
	Textile mills	4238	Machinery, equipment, and supplies	5415	
	Textile product mills	4239	Miscellaneous durable goods	5416	
	Apparel	Whol	osalo Trado Non-Durablo Goods	5417	Scientific research and development services
	Leather and allied products		esale Trade, Non-Durable Goods		Advertising, public relations, and related services
	Wood products	4241		5419	Other professional, scientific, and technical services
	Pulp, paper, and paperboard mills		Drugs and druggists' sundries	5415	other professional, scientific, and teeriffical services
	Converted paper products		Apparel, piece goods, and notions	Mana	gement of Companies and Enterprises
	Printing and related support activities		Grocery and related product	5512	Holding companies, except bank holding companies
	Integrated petroleum refining and extraction		Farm product raw material		Corporate, subsidiary, and regional management offices
	Petroleum refining without extraction		Chemical and allied products	00.0	corporato, caboratary, and rogional management emoco
3244	Asphalt and other petroleum and	4247		Admi	nistrative and Support, Waste
	coal products	4248	Beer, wine, and distilled alcoholic beverage	Mana	gement, and Remediation Services
	Basic chemicals	4249	Miscellaneous nondurable goods		Office administrative services
3252	Resins, synthetic rubbers, and artificial	Whal	esale Trade Agents And Brokers		Facilities support services
	and synthetic fibers and filaments				Employment services
3253	Pesticides, fertilizers, and other	4251	Wholesale trade agents and brokers	5614	
	agricultural chemicals	Reta	il Trade		Travel arrangement and reservation services
3254	Pharmaceuticals and medicines		Motor vehicle and parts dealers	5616	Investigation and security services
3255	Paints, coatings, and adhesives	4440		5617	Services to buildings and dwellings
3256	Soap, cleaning compounds, and	4440	and supplies dealers	5619	Other support services
	toilet preparations	4450	Food and beverage retailers	5620	Waste management and remediation services
	Other chemical products and preparations		Furniture and home furnishings retailers	3020	Tracto management and femodiation 361 VICES
3261	Plastics products		Electronics and appliance retailers	Educ	ational Services
	Rubber products		General merchandise retailers	6110	Educational services
	Clay products and refractories	4550 4561			
3272	Glass and glass products		Gasoline stations	Healt	th Care and Social Assistance
3273	Cement and concrete products	4571		6210	Ambulatory health care services
3274	Lime and gypsum products		Fuel dealers	6220	Hospitals
3279	Other nonmetallic mineral products	4580	Clothing, clothing accessories, shoe, and jewelry retailers	6230	Nursing and residential care facilities
3311	Iron and steel mills	4591	Sporting goods, hobby, and musical instrument	6240	Social assistance services
3312	Steel products from purchased steel	4551	retailers		
	Alumina and aluminum production	4502	Book retailers and news dealers	Arts,	Entertainment, and Recreation
	and processing	4592 4596	Miscellaneous retailers	7110	Performing arts, spectator sports, and related industries
3314	Nonferrous metal (except aluminum)	4596	IVIISCEIIAITECUS TETAIIEIS	7121	Museums, historical sites, and similar institutions
	production and processing	Trans	sportation and Warehousing	7130	Amusement, gambling, and recreation industries
3315	Foundries		Air transportation		
	Forging and stamping	4821			mmodation and Food Services
	Cutlery and hand tools		Petroleum tanker operations	7210	Accommodation
	Architectural and structural metals	4833	Other water transportation	7220	Food services and drinking places
	Boilers, tanks, and shipping containers			6	
	Hardware	4840	Truck transportation		r Services
	Spring and wire products	4850	Transit and ground passenger transportation	8110	Repair and maintenance
	Machine shop products, turned products, and	4863	Pipeline transportation of crude oil,	8120	Personal and laundry services
0021	screws, nuts, and bolts	4000	refined petroleum products, and natural gas	8130	Religious, grantmaking, civic, professional,
3330		4868	Other pipeline transportation		and similar organizations
3328	Coating, engraving, heat treating,	4870		<b>.</b>	
2000	and allied activities	4880			c Administration
	Other fabricated metal products	4920	Couriers and messengers	9200	Public administration
3331	Agriculture, construction, and mining machinery	4932	Petroleum storage for hire		
		4939	Other warehousing and storage		

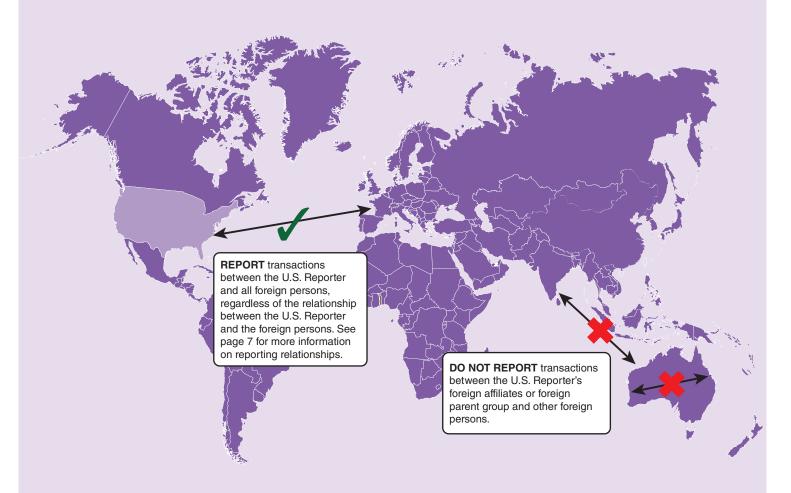
Page 4 FORM BE-125 (REV. 02/2024)

#### **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 18.



#### **Determination of Reporting Status**

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.

See additional information for Part II on page 18, and Part V on page 19, 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 year, or had/expects to have, transactions with foreign persons during the current year	If "Yes" in column 3, report transactions on:
(1)	(2)	(3)	(4)
1	Premiums earned on reinsurance assumed from insurance companies resident abroad	<sup>20001</sup> <sup>1</sup> 1 Yes 2 No	Schedule A
2	Premiums incurred on reinsurance ceded to insurance companies resident abroad	<sup>20002</sup> <sup>1</sup> 1 Yes 2 No	Schedule A
3	Losses incurred on reinsurance assumed from insurance companies resident abroad	<sup>20003</sup> <sup>1</sup> 1 Yes 2 No	Schedule A
4	Losses recovered on reinsurance ceded to insurance companies resident abroad	<sup>20004</sup> <sup>1</sup> 1 Yes 2 No	Schedule A
5	Premiums earned from primary insurance sold to foreign persons	<sup>20005</sup> <sup>1</sup> 1 Yes 2 No	Schedule B
6	Losses incurred on primary insurance sold to foreign persons	<sup>20006</sup> <sup>1</sup> 1 Yes 2 No	Schedule B
7	Auxiliary insurance services, receipts	<sup>20007</sup> <sup>1</sup> 1 Yes 2 No	Schedule B
8	Auxiliary insurance services, payments	<sup>20008</sup> <sup>1</sup> 1 Yes 2 No	Schedule B

	Did vou check "Yes" fo	r any type o	f transaction i	n Column 22
~	DIG VOG CHECK TES TO	i aliv tvbe u	1 และเรละแบบ 1	II COIUIIII 3 :

20010 1 Yes — Continue to the next question.

10 Did the U.S. Reporter's combined total reportable transactions with foreign persons exceed \$8 million (based on absolute value) in the previous year, or are they expected to exceed that amount in the current year?

<sup>20011</sup> <sup>1</sup> 1 Yes — For each transaction type greater than \$500.00 during the reporting period, you are required to report additional details on the country and affiliation to the foreign transactor(s) on Schedules A or B as indicated in the table above. Continue to the next page for additional reporting instructions.

No — Stop here and return pages 1 through 6 according to the instructions on page 1.

Comments

Page 6 FORM BE-45 (REV. 02/2024)

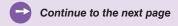
No — Stop here and return pages 1 through 6 according to the instructions on page 1.

## For Reporters of Primary Insurance Services

- 11 Will you be reporting premiums earned or losses incurred on primary insurance on Schedule B?
  - Yes Continue to the next question.
  - No Skip Question 12 and continue to the appropriate Schedule(s) on the following pages and report any transactions subject to reporting additional country detail as indicated in Question 8.
- 12 Indicate the principal line of primary insurance sold by the U.S. Reporter to foreign persons.

NOTE – The insurance category selected should be based on the activity representing that largest percentage of the U.S. Reporter's operations, taking into consideration which features are predominant, i.e. the investment component or the component whereby claims are paid only if the insured event occurs

Principal Line of Primary Insurance Sold to Foreign Persons (Check One)
Insurance with an investment component (including whole life insurance)
Freight insurance
Property and casualty insurance
Other (including term life insurance and health insurance) - Specify



# 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**. The relationship between 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 Parent Group** – A 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 9 and 13.

#### **COMPANY B (Germany)**

49% owned by Company A

**Unaffiliated Foreign Person** 

NOTE: "Company B" is not 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**

**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:**

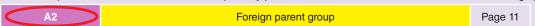
1) Use the following Schedule A's on pages 10–12 to report your quarterly reinsurance transactions based on your relationship with the foreign person(s) (see page 8 for more information on reporting relationships):

Schedule	Relationship with the consolidated domestic U.S. Reporter	Page
A1	Foreign affiliates	10
A2	Foreign parent group	11
А3	Unaffiliated foreign persons	12

- 2) Enter the country(ies) of the transactor(s) in the first 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 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

#### **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, select "Germany" from the dropdown box in column 1. Enter "3525" under transaction code 2.

**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								
	BEA	Reinsuranc	e premiums	Reinsurance losses						
Country	USE ONLY	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					
		accumou	oodod	accumou	Tomodranoo codod					
1. Germany 001	1 2	3 000	<sup>4</sup> 3525 <sub>000</sub>	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 9 FORM BE-45 (REV. 02/2024)

## **SCHEDULE A1 – Quarterly Reinsurance Transactions with Foreign Affiliates**

#### Are you reporting transactions with foreign affiliates?

21000 **1** 1 Yes

- If you checked "Yes" for transaction codes 1–4 in Column 3 of question 3, 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 21 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 19 of the General Instructions.

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

				Transactions with foreign affiliates							
			BEA		Reins	suranc	e premiums		Reinsurance losses		
	Country		USE		Transaction C	Transaction Code 1		2	Transaction Code 3	Transaction Code 4	
,			ONLY			Quarterly premiums earned on reinsurance assumed		is nce	Quarterly losses incurred on reinsurance assumed	Quarterly losses recovered on reinsurance ceded	
1.	Total, lines 2–32 of this page	001	1	2	3	000	4 00	00	5 000	6 000	
2.		002	1	2	3	000	4 00	00	5 000	6 000	
3.		003	1	2	3	000	4 00	00	5 000	6 000	
4.		004	1	2	3	000	4 00	00	5 000	6 000	
5.		005	1	2	3	000	4 00	00	5 000	6 000	
6.		006	1	2	3	000	4 00	00	5 000	6 000	
7.		007	1	2	3	000		00	5 000	6 000	
8.		008	1	2	3	000		00	5 000	6 000	
9.		009	1	2	3	000		00	5 000	6 000	
10.		010	1	2	3	000		00	5 000	6 000	
11.		011	1	2	3	000		UU	5 000	6 000	
12.		012	1	2	3	000		00	5 000	6 000	
13.		013	1	2	3	000		00	5 000	6 000	
14.		014	1	2	3	000		00	5 000	6 000	
15.		015	1	2	3	000		00	5 000	6 000	
16.		016	1	2	3	000		UU	5 000	6 000	
17.		017	1	2	3	000		00	5 000	6 000	
18.		018	1	2	3	000		00	5 000	6 000	
19.		019	1	2	3	000		00	5 000	6 000	
20.		020	1	2	3	000	4	00	5 000	6 000	
21.		021	1	2	3	000		00	5 000	6 000	
22.		022	1	2	3	000	4	00	5 000	6 000	
23.		023	1	2	3	000	4	00	5 000	6 000	
24.		024	1	2	3	000		00	5 000	6 000	
25.		025	1			000	4	00	5 000	6 000	
26.		026		2	3	000		UU	5 000	6 000	
27.		027	1	2	3	000	4	UU	5 000	6 000	
28.		028	1	2	3	000	4	UU	5 000	6 000	
29.		029	1	2	3	000	4	00	5 000	6 000	
30.		030	1	2	3	000	4	00	5 000	6 000	
31.	Occumentation with multiple to the control of	031	1			000		00	5 000	6 000	
32.	Countries with which transactions were less than \$50,000.00 each, total	032	<sup>1</sup> <b>709</b>	2	3	000	00	00	000	000	

## SCHEDULE A2 – Quarterly Reinsurance Transactions with the foreign parent group

#### Are you reporting transactions with your foreign parent group?

22000 **2** 1 Yes

- If you checked "Yes" for transaction codes 1–4 in Column 3 of question 3, and you had transactions of this type with your foreign parent group, 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 21 (eFile users select"Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 19 of the General Instructions.

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

				Transactions with foreign parent group							
			BEA		Reir	suranc	e premiums	Reinsura	nce losses		
Country			USE	Ε	Transaction (	Code 1	Transaction Code	Transaction Code 3	Transaction Code 4		
			ONLY		Quarterly pre- earned on reins assume	surance	Quarterly premiums incurred on reinsuran ceded	Quarterly losses incurred on reinsurance assumed	Quarterly losses recovered on reinsurance ceded		
1.	Total, lines 2–32 of this page	001	1	2	3	000	4 00	000	6 000		
2.		002	1	2	3	000	4 00	000	6 000		
3.		003	1	2	3	000	4 00	000	6 000		
4.		004	1	2	3	000	4 00	000	6 000		
5.		005	1	2	3	000	4 00		6 000		
6.		006	1	2	3	000	4 00		6 000		
7.		007	1	2	3	000	4 00		6 000		
8.		008	1	2	3	000	4 00		6 000		
9.		009	1	2	3	000	4 00		6 000		
10.		010	1	2	3	000	4 00		6 000		
11.		011	1	2	3	000	4 00		6 000		
12.		012	1	2	3	000	4 00		6 000		
13.		013	1	2	3	000	4 00		6 000		
14.		014	1	2	3	000	4 00		6 000		
15.		015	1	2	3	000	4 00		6 000		
16.		016	1	2	3	000	4 00		6 000		
17.		017	1	2	3	000	4 00		6 000		
18.		018	1	2	3	000	4 00		6 000		
19.		019	1	2	3	000	4 00		6 000		
20.		020	1	2	3	000	4 00		6 000		
21.		021	1	2	3	000	4 00		6 000		
22.		022	1	2	3	000	4 00		6 000		
23.		023	1	2	3	000	4 00		6 000		
24.		024	1	2	3	000	4 00		6 000		
25.		025	1	2	3	000	4 00		6 000		
26.		026	1	2	3	000	4 00		6 000		
27.		027	1	2	3	000	4 00		6 000		
28.		028	1	2	3	000	4 00		6 000		
29.		029	1	2	3	000	4 00		6 000		
30.		030	1	2	3	000	4 00		6 000		
31.		031	1	2	3	000	4 00		6 000		
32.	Countries with which transactions were less than \$50,000.00 each, total	032	<sup>1</sup> 709	2	3	000	4 00	000	6 000		

Page 11 FORM BE-45 (REV. 02/2024)

## **SCHEDULE A3 – Quarterly Reinsurance Transactions with Unaffiliated Foreign Persons**

#### Are you reporting transactions with unaffiliated foreign persons?

23000 **3** 13 Yes

- If you checked "Yes" for transaction codes 1–4 in Column 3 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 21 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 19 of the General Instructions.

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

				Transactions with unaffiliated foreign persons							
			BEA		Rein	suranc	e premiums		Reinsurar	nce losses	
	Country		USE		Transaction C	ode 1	Transaction Code 2		Transaction Code 3	Transaction Code 4	
,			ONLY		Quarterly premiums earned on reinsurance assumed		Quarterly premium incurred on reinsurar ceded		Quarterly losses incurred on reinsurance assumed	Quarterly losses recovered on reinsurance ceded	
1.	Total, lines 2–32 of this page	001	1	2	3	000	4 00	00	5 000	6 000	
2.	,	002	1	2	3	000	4		5 000	6 000	
3.		003	1	2	3	000	4 00	00	5 000	6 000	
4.		004	1	2	3	000	4 00	00	5 000	6 000	
5.		005	1	2	3	000	4 00	00	5 000	6 000	
6.		006	1	2	3	000	4 00	00	5 000	6 000	
7.		007	1	2	3	000		UU	5 000	6 000	
8.		008	1	2	3	000		UU	5 000	6 000	
9.		009	1	2	3	000		00	5 000	6 000	
10.		010	1	2	3	000		00	5 000	6 000	
11.		011	1	2	3	000		00	5 000	6 000	
12.		012	1	2	3	000		UU	5 000	000	
13.		013	1	2	3	000		UU	5 000	6 000	
14.		014	1	2	3	000		00	5 000	6 000	
15.		015	1	2	3	000		00	5 000	6 000	
16.		016	1	2	3	000		00	5 000	6 000	
17.		017	1	2	3	000	4	00	5 000	6 000	
18.		018	1	2	3	000		UU	5 000	6 000	
19.		019	1	2	3	000		00	5 000	6 000	
20.		020	1	2	3	000	4	00	5 000	6 000	
21.		021	1	2	3	000		00	5 000	6 000	
22.		022	1	2	3	000	4	00	5 000	6 000	
23.		023	1	2	3	000		00	5 000	6 000	
24.		024	1	2	3	000		00	5 000	6 000	
25.		025	1	2	3	000	00	00	000	000	
26.		026	1	2	3	000	00	00	000	000	
27.		027	1	2	3	000	4	UU	000	000	
28.		028	1	2	3	000	00	00	000	000	
29.		029	1	2	3	000	00	UU	000	000	
30.		030	1	2	3	000	00	00	000	000	
31.	Countries with which transactions	031		2	3	000	4 00	00	5 000	6 000	
32.	were less than \$50,000.00 each, total	032	<sup>1</sup> 709			000		00	000	000	

#### Reporting Instructions for Schedule B

**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.

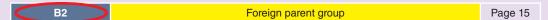
Use the following **Schedule B's** on pages 14-16 to report your quarterly primary and auxiliary insurance transactions based on your relationship with the foreign person(s) (see page 8 for more information on reporting relationships):

Schedule	Relationship with the consolidated domestic U.S. Reporter	Page
B1	Foreign affiliates	14
B2	Foreign parent group	15
В3	Unaffiliated foreign persons	16

- 2) Enter the country(ies) of the transactor(s) in the first 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 Quarterly premiums earned on primary insurance sold
  - Transaction Code 6 Quarterly losses incurred on primary insurance sold
  - Transaction Code 7 Quarterly auxiliary insurance receipts
  - Transaction Code 8 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 15.

On Schedule B2, enter "Switzerland" from the dropdown box in column 1. Enter "6325" under transaction code 6.

#### Example

		Transactions with foreign parent group								
	BEA	Primary i	nsurance	Auxiliary insurance						
Country	USE	Transaction Code 5	Transaction Code 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 payment						
1. Switzerland 001	1 2	3 000	6325 000	5 000	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 13 FORM BE-45 (REV. 02/2024)

#### 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 3 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 22 (eFile users select"Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 19 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							
			BEA USE			Primary in	nsurance	Auxiliary	insurance			
Country					Transaction Code 5		Transaction Code 6	Transaction Code 7	Transaction Code 8			
		ONLY		Quarterly premiums earned on primary insurance sold		Quarterly losses incurred on primary insurance sold	Quarterly receipts	Quarterly payments				
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	4 000	5 000	6 000			
3.		003	1	2	3	000	4 000	5 000	6 000			
4.		004	1	2	3	000	4 000	5 000	6 000			
5.		005	1	2	3	000	4 000	5 000	6 000			
6.		006	1	2	3	000	4 000	5 000	6 000			
7.		007	1	2	3	000	4 000	5 000	6 000			
8.		008	1	2	3	000	4 000	5 000	6 000			
9.		009	1	2	3	000	000	5 000	6 000			
10.		010	1	2	3	000	000	000	6 000			
11.		011	1	2	3	000	000	000	6 000			
12.		012	1	2	3	000	000	000	6 000			
13.		013	1	2	3	000	000	5 000	6 000			
14.		014	1	2	3	000	000	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	000	5 000	6 000			
19.		019	1	2	3	000	000	000	6 000			
20.		020	1	2	3	000	4 000	5 000	6 000			
21.		021	1	2	3	000	000	5 000	6 000			
22.		022	1	2	3	000	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	000	000	000			
28.		028	1	2	3	000	4 000	5 000	000			
29.		029	1		3	000	000	000	000			
30.		030	1	2	3	000	000	000	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	032	<sup>1</sup> 709	2	J	000	000	000	000			

#### SCHEDULE B2 – Quarterly Primary and Auxiliary Insurance Transactions with the foreign parent group

Are you reporting transactions with your foreign parent group?

32000 **2** <sup>1</sup>**2** Yes

- If you checked "Yes" to any of the transaction codes 5-8 in Column 3 of question 8, and you had transactions of this type with your foreign parent group, 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 22 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 19 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								
				Primary i	nsurance	Auxiliary	insurance					
0		BEA USE		Transaction Code 5	Transaction Code 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. Total, lines 2–32 of this page		1 2		3 000	4 000	5 000	6 000					
2.	001	1 2		3 000	4 000	5 000	6 000					
3.	003	1 2		3 000	4 000	5 000	6 000					
4.	004	1 2		3 000	4 000	5 000	6 000					
5.	005	1 2		3 000	4 000	5 000	6 000					
6.	006	1 2		3 000	4 000	5 000	6 000					
7.	007	1 2		3 000	4 000	5 000	6 000					
8.	008	1 2		3 000	4 000	5 000	6 000					
9.	009	1 2		3 000	4 000	5 000	6 000					
10.	010	1 2		3 000	4 000	5 000	6 000					
11.	011	1 2		3 000	4 000	5 000	6 000					
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			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	000	5 000	6 000					
19.	019	1 2		3 000	000	5 000	6 000					
20.	020	1 2		3 000	000	5 000	6 000					
21.	021	1 2		3 000	000	5 000	6 000					
22.	022			3 000	000	5 000	6 000					
23.	023	1 2		3 000	000	5 000	6 000					
24.	024	1 2		3 000	000	5 000	6 000					
25.	025			000	000	5 000	6 000					
26.	026			3 000	000	5 000	6 000					
27.	027	1 2		3 000	000	5 000	6 000					
28.	028	1 2		000	000	5 000	6 000					
29.	029	1 2		3 000	000	5 000	6 000					
30.	030	1 2		000	000	5 000	6 000					
31.	031	1 2		000	000	5 000	6 000					
<ol><li>Countries with which transactions were less than \$50,000.00 each, tot</li></ol>		<sup>1</sup> <b>709</b>		3 000	4 000	5	6					
ge 15	002			200	200	200	FORM BE-45 (BEV 02/					

Page 15 FORM BE-45 (REV. 02/2024)

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

#### Are you reporting transactions with unaffiliated foreign persons?

33000 **3** <sup>1</sup>**3** Yes

- If you checked "Yes" to any of the transaction codes 5-8 in Column 3 of question 3, 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 22 (eFile users select "Add overflow" from the survey selection page).
- For additional instructions, see Part V on page 19 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**.

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

#### 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 the U.S. Reporter's combined reportable transactions exceeded \$8 million (based on absolute value) in the previous calendar year or are expected to exceed that amount during 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.

#### b. Voluntary reporting

If, in the previous year, combined reportable transactions were \$8 million or less (based on absolute value), on an accrual basis, and are

expected to be less than that amount in the current year, then the U.S. insurance company may report transactions at a country and affiliation level of detail on the applicable mandatory schedule(s). Provision of this additional detail is voluntary. The estimates may be judgmental, that is, based on recall, without conducting a detailed records search.

#### c. Exemption

A U.S. insurance company receiving this form from BEA is not required to report data if transactions fall below the threshold described in Part I.A.1.a. However, it must complete and return the survey through page 6.

B. 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

Page 17 FORM BE-45 (REV. 02/2024)

#### **GENERAL INSTRUCTIONS — Continued**

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.

C. 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.

#### **II. WHAT TO REPORT**

- A. Report transactions with affiliated foreign persons as well as with unaffiliated foreign persons (Part V. for more information on reporting relationships). File separate schedules to report transactions with (1) your foreign affiliates, (2) your 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 schedule 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 schedule 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 profit making 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.
  - **1. 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, which is the first entity outside the United States in a foreign chain of ownership, which 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, which owns more than 50 percent of the entity below it up to and including that entity which is not owned more than 50 percent by another foreign entity, and (iii) any foreign entity, proceeding down the ownership chain(s) of each of these members, which is owned more than 50 percent by the entity 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.

#### **GENERAL INSTRUCTIONS — Continued**

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

#### **V. OTHER INSTRUCTIONS**

#### A. Distinguishing between unaffiliated and affiliated transactions

This survey covers U.S. insurance companies' direct transactions with affiliated and unaffiliated foreign persons.

Examples of affiliated transactions are:

- A transaction between a U.S. insurance company (U.S. parent) and its foreign affiliate.
- A transaction between a U.S. insurance company (U.S. affiliate) and its foreign parent(s) or member(s) of the foreign parent group(s).

Examples of unaffiliated transactions are:

- 1. A transaction between a U.S. insurance company and an unaffiliated foreign person.
- A transaction between one U.S. insurance company and another U.S. insurance company's foreign affiliate. Such a transaction is reportable by the first U.S. insurance company.

Examples of transactions that are not reportable are:

- A transaction between a U.S. affiliate of a foreign parent and another U.S. person.
- A transaction between a U.S. parent's foreign affiliate and another foreign person.

# B. Understanding the U.S. insurance company's relationship with foreign persons

The relationship between the U.S. Reporter and the foreign persons fall into one of three categories:

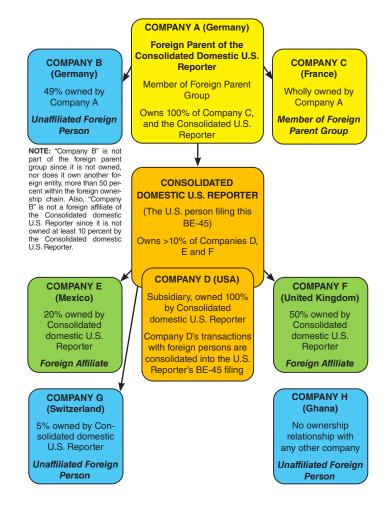
**Foreign affiliates** – A foreign affiliate is defined as an entity domiciled in a foreign country that is owned at least 10 percent, directly or indirectly, by the U.S. Reporter.

#### 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 that, proceeding down the ownership chain(s) of each of these members, 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 ten percent, directly or indirectly, by the U.S. Reporter or the U.S. Reporter's foreign parent.

The diagram in the next column illustrates each of these relationships with regards to the U.S. Reporter.



#### VI. 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).

Page 19 FORM BE-45 (REV. 02/2024)

#### **GENERAL INSTRUCTIONS — Continued**

#### 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 30 days of the close of each calendar quarter, except the final quarter of the calendar year, when the reports are due within 45 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 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. 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

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

Company Name	BE-45 Identification Number	
Form BE-45 Schedule A	Overflow Page #	of

This schedule covers transactions with — Check (X) one

- 1<sup>1</sup>1 Foreign affiliates
- 2<sup>1</sup>2 Foreign parent group
- 3<sup>1</sup>3 Unaffiliated foreign persons

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

Page 20 FORM BE-45 (REV. 02/2024)

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

Company Name	BE-45 Identification Number
Form BE-45 Schedule B	Overflow Page # of
This schedule covers transactions with — Check (X) one	
1 1 Foreign affiliates	
2 <sup>1</sup> 2 Foreign parent group	

3 <sup>1</sup>3 Unaffiliated foreign persons

				Primar	ry in	surance	Auxiliary insurance			
	Country	BE US		Transaction Code Quarterly premium		Transaction Code 6  Quarterly losses	Transaction Co		Transaction Co	
		ONLY		earned on primary insurance sold		incurred on primary insurance sold	Quarterly receipts		Quarterly payments	
01.	Country total for this page (sum of rows 02–23)	1	2	3 00		000	5	000	6	000
02.		1	2	3	00	4 000	5	000	6	000
03.		1	2	3	00	4 000	5	000	6	000
04.		1	2	3	00	4 000	5	000	6	000
05.		1	2	3 00	00	4	5	000	6	000
06.		1	2	3	00	4	5	000	6	000
07.		1	2	3 00	00	4	5	000	6	000
08.		1	2	3	00	4 000	5	000	6	000
09.		1	2	3 00	00	4 000	5	000	6	000
10.		1	2	3 00	00	000	5	000	6	000
11.		1	2	3 00	00	000	5	000	6	000
12.		1	2	3	00	000	5	000	6	000
13.		1	2	3 00	00	000	5	000	6	000
14.		1	2	3 00	00	000	5	000	6	000
15.		1	2	3 00	00	000	5	000	6	000
16.		1	2	3 00	00	000	5	000	6	000
17.		1	2	3 00	00	000	5	000	6	000
18.		1	2	3 00	00	000	5	000	6	000
19.		1	2	3 00	00	000	5	000	6	000
20.		1	2	3 00	00	000	5	000	6	000
21.		1	2	3 00	00	000	5	000	6	000
22.		1	2	3 00	00	000		000	6	000
23.		1	2	3		000	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.