



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2025
OF THE CONDITION AND AFFAIRS OF THE
DELTA DENTAL OF IDAHO

NAIC Group Code..... NAIC Company Code.....47791.....Employer's ID Number.... 82-0299431.....
(Current) (Prior)
Organized under the Laws of..... ID..... State of Domicile or Port of Entry.... ID.....
Country of Domicile..... US.....
Licensed as business type:..... Life, Accident & Health..... Is HMO Federally Qualified?..... N/A.....
Incorporated/Organized..... 06/21/1971..... Commenced Business..... 12/15/1971.....
Statutory Home Office..... 555 E Parkcenter Blvd..... Boise, ID, US 83706.....
Main Administrative Office..... 555 E Parkcenter Blvd.....
Boise, ID, US 83706..... 208-344-4546.....
(Telephone)
Mail Address..... 555 E Parkcenter Blvd..... Boise, ID, US 83706.....
Primary Location of Books and
Records..... 555 E Parkcenter Blvd.....
Boise, ID, US 83706..... 208-344-4546.....
(Telephone)
Internet Website Address..... www.deltadentalid.com.....
Statutory Statement Contact..... Gregory Douglas Donaca..... 208-489-3528.....
(Telephone)
GDonaca@deltadentalid.com..... 208-489-3556.....
(E-Mail) (Fax)

OFFICERS

Gregory Donaca, President and CEO..... Michael Fery, Secretary and Treasurer.....

DIRECTORS OR TRUSTEES

Mike Mooney..... Christine Neuhoff.....
James Pierce DDS..... Kyle Siemen DMD.....
Mark Alexander DMD..... Kurt Petellin DDS.....
Jack Lincks DDS..... John Eck MD.....
Linda Swanstrom#..... Annette Herman.....
Joey Hale..... Jon Jurevic.....

State of
County of SS

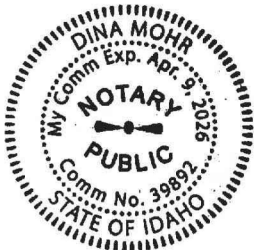
The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any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

DocuSigned by:
x Gregory Donaca x
Gregory Donaca
President and CEO
Michael Fery
Secretary and Treasurer

Subscribed and sworn to before me
this 25th day of
February, 2026

Dina Moh

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



ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D)	26,289,225		26,289,225	26,279,994
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	45,163,845		45,163,845	38,620,037
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....3,676,938 encumbrances)	4,133,864		4,133,864	4,227,616
4.2 Properties held for the production of income (less \$..... encumbrances)				
4.3 Properties held for sale (less \$..... encumbrances)				
5. Cash (\$.....(3,879,892), Schedule E - Part 1), cash equivalents (\$.....1,876,902, Schedule E - Part 2) and short-term investments (\$....., Schedule DA)	(2,002,990)		(2,002,990)	1,056,883
6. Contract loans (including \$..... premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)	-		-	-
9. Receivables for securities				
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets	9,349,336		9,349,336	10,621,966
12. Subtotals, cash and invested assets (Lines 1 to 11)	82,933,280		82,933,280	80,806,496
13. Title plants less \$..... charged off (for Title insurers only)				
14. Investment income due and accrued	240,664		240,664	
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	339,182	20,157	319,025	487,512
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$..... earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$.....) and contracts subject to redetermination (\$.....)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers				
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans	2,214,872		2,214,872	3,222,898
18.1 Current federal and foreign income tax recoverable and interest thereon				
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	99,347		99,347	79,539
21. Furniture and equipment, including health care delivery assets (\$.....)	389,689		389,689	541,417
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	3,106,358	3,106,358	-	-
24. Health care (\$.....15,705) and other amounts receivable	126,750	111,045	15,705	16,961
25. Aggregate write-ins for other-than-invested assets	324,448	324,448	-	-
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	89,774,590	3,562,008	86,212,582	85,154,823
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	89,774,590	3,562,008	86,212,582	85,154,823
Details of Write-Ins				
1101. Deferred compensation plan	9,349,336		9,349,336	10,621,966
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	9,349,336		9,349,336	10,621,966
2501. Prepaid expenses	324,448	324,448	-	-
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	324,448	324,448	-	-

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$..... reinsurance ceded).....	2,958,000		2,958,000	3,367,000
2. Accrued medical incentive pool and bonus amounts.....				
3. Unpaid claims adjustment expenses.....	209,000		209,000	228,000
4. Aggregate health policy reserves, including the liability of \$..... for medical loss ratio rebate per the Public Health Service Act.....	242,169		242,169	404,488
5. Aggregate life policy reserves.....				
6. Property/casualty unearned premium reserves.....				
7. Aggregate health claim reserves.....				
8. Premiums received in advance.....	1,984,222		1,984,222	2,068,586
9. General expenses due or accrued.....	2,021,359		2,021,359	4,542,433
10.1 Current federal and foreign income tax payable and interest thereon (including \$..... on realized capital gains (losses)).....				
10.2 Net deferred tax liability.....				
11. Ceded reinsurance premiums payable.....				
12. Amounts withheld or retained for the account of others.....	9,349,336		9,349,336	10,621,966
13. Remittances and items not allocated.....				
14. Borrowed money (including \$..... current) and interest thereon \$..... (including \$..... current).....				
15. Amounts due to parent, subsidiaries and affiliates.....				
16. Derivatives.....				
17. Payable for securities.....				
18. Payable for securities lending.....				
19. Funds held under reinsurance treaties (with \$..... authorized reinsurers, \$..... unauthorized reinsurers and \$..... certified reinsurers).....				
20. Reinsurance in unauthorized and certified (\$.....) companies.....				
21. Net adjustments in assets and liabilities due to foreign exchange rates.....				
22. Liability for amounts held under uninsured plans.....	469,700		469,700	538,100
23. Aggregate write-ins for other liabilities (including \$..... current).....				
24. Total liabilities (Lines 1 to 23).....	17,233,786		17,233,786	21,770,573
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	50,000	50,000
26. Common capital stock.....	XXX	XXX		
27. Preferred capital stock.....	XXX	XXX		
28. Gross paid in and contributed surplus.....	XXX	XXX		
29. Surplus notes.....	XXX	XXX		
30. Aggregate write-ins for other-than-special surplus funds.....	XXX	XXX		
31. Unassigned funds (surplus).....	XXX	XXX	68,928,796	63,334,250
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$.....)	XXX	XXX		
32.2 shares preferred (value included in Line 27 \$.....)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	68,978,796	63,384,250
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	86,212,582	85,154,823
Details of Write-Ins				
2301.....				
2302.....				
2303.....				
2398. Summary of remaining write-ins for Line 23 from overflow page.....				
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above).....				
2501. Board designated funds.....	XXX	XXX	50,000	50,000
2502.....	XXX	XXX		
2503.....	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	XXX	XXX	50,000	50,000
3001.....	XXX	XXX		
3002.....	XXX	XXX		
3003.....	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above).....	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member months	XXX	2,110,940	2,190,044
2. Net premium income (including \$..... non-health premium income)	XXX	78,727,693	80,626,264
3. Change in unearned premium reserves and reserve for rate credits	XXX		
4. Fee-for-service (net of \$..... medical expenses)	XXX		
5. Risk revenue	XXX		
6. Aggregate write-ins for other health care related revenues	XXX		
7. Aggregate write-ins for other non-health revenues	XXX	189,467	146,452
8. Total revenues (Lines 2 to 7)	XXX	78,917,160	80,772,716
Hospital and Medical:			
9. Hospital/medical benefits			
10. Other professional services		61,449,076	63,470,372
11. Outside referrals			
12. Emergency room and out-of-area			
13. Prescription drugs			
14. Aggregate write-ins for other hospital and medical			
15. Incentive pool, withhold adjustments and bonus amounts			
16. Subtotal (Lines 9 to 15)		61,449,076	63,470,372
Less:			
17. Net reinsurance recoveries			
18. Total hospital and medical (Lines 16 minus 17)		61,449,076	63,470,372
19. Non-health claims (net)			
20. Claims adjustment expenses, including \$..... cost containment expenses		3,782,266	3,920,858
21. General administrative expenses		15,533,020	14,499,628
22. Increase in reserves for life and accident and health contracts (including \$..... increase in reserves for life only)			
23. Total underwriting deductions (Lines 18 through 22)		80,764,362	81,890,858
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(1,847,202)	(1,118,142)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		1,610,322	1,490,198
26. Net realized capital gains (losses) less capital gains tax of \$.....		1,909,268	867,027
27. Net investment gains (losses) (Lines 25 plus 26)		3,519,590	2,357,225
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....) (amount charged off \$.....)]			
29. Aggregate write-ins for other income or expenses			(3,827,965)
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	1,672,388	(2,588,882)
31. Federal and foreign income taxes incurred	XXX		
32. Net income (loss) (Lines 30 minus 31)	XXX	1,672,388	(2,588,882)
Details of Write-Ins			
0601.	XXX		
0602.	XXX		
0603.	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX		
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX		
0701. Other non-health revenue	XXX	189,467	146,452
0702.	XXX		
0703.	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX		
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	189,467	146,452
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)			
2901. Donations			(2,473,602)
2902. Software write-off			(1,354,363)
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page			
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)			(3,827,965)

STATEMENT OF REVENUE AND EXPENSES (CONTINUED)

		1	2
CAPITAL & SURPLUS ACCOUNT		Current Year	Prior Year
33.	Capital and surplus prior reporting year.....	63,384,249	61,083,409
34.	Net income or (loss) from Line 32.....	1,672,388	(2,588,882)
35.	Change in valuation basis of aggregate policy and claim reserves.....		
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$.....	4,943,244	4,172,998
37.	Change in net unrealized foreign exchange capital gain or (loss).....		
38.	Change in net deferred income tax.....		
39.	Change in nonadmitted assets.....	(1,021,086)	716,725
40.	Change in unauthorized and certified reinsurance.....		
41.	Change in treasury stock.....		
42.	Change in surplus notes.....		
43.	Cumulative effect of changes in accounting principles.....		
44.	Capital Changes:		
44.1	Paid in.....		
44.2	Transferred from surplus (stock dividend).....		
44.3	Transferred to surplus.....		
45.	Surplus adjustments:		
45.1	Paid in.....		
45.2	Transferred to capital (stock dividend).....		
45.3	Transferred from capital.....		
46.	Dividends to stockholders.....		
47.	Aggregate write-ins for gains or (losses) in surplus.....		
48.	Net change in capital and surplus (Lines 34 to 47).....	5,594,546	2,300,841
49.	Capital and surplus end of reporting year (Line 33 plus 48).....	68,978,796	63,384,249
Details of Write-Ins			
4701.		
4702.		
4703.		
4798.	Summary of remaining write-ins for Line 47 from overflow page.....		
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above).....		

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance.....	78,629,926	81,010,009
2. Net investment income.....	1,591,796	1,723,913
3. Miscellaneous income.....	189,467	139,102
4. Total (Lines 1 to 3).....	80,411,190	82,873,024
5. Benefit and loss related payments.....	61,834,957	64,248,372
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	20,915,734	19,682,335
8. Dividends paid to policyholders.....		
9. Federal and foreign income taxes paid (recovered) net of \$..... tax on capital gains (losses).....		
10. Total (Lines 5 through 9).....	82,750,691	83,930,707
11. Net cash from operations (Line 4 minus Line 10).....	(2,339,501)	(1,057,683)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	4,571,415	2,505,399
12.2 Stocks.....	8,163,508	2,222,357
12.3 Mortgage loans.....		
12.4 Real estate.....		
12.5 Other invested assets.....		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7 Miscellaneous proceeds.....	1,272,630	-
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	14,007,553	4,727,756
13. Cost of investments acquired (long-term only exclude cash equivalents and short-term investments):		
13.1 Bonds.....	4,623,244	2,522,660
13.2 Stocks.....	7,818,944	3,192,666
13.3 Mortgage loans.....		
13.4 Real estate.....	121,651	152,760
13.5 Other invested assets.....		
13.6 Miscellaneous applications.....	-	584,632
13.7 Total investments acquired (Lines 13.1 to 13.6).....	12,563,839	6,452,718
14. Net increase / (decrease) in contract loans and premium notes.....		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14).....	1,443,714	(1,724,962)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....		
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5 Dividends to stockholders.....		
16.6 Other cash provided (applied).....	(2,164,086)	1,317,393
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(2,164,086)	1,317,393
Reconciliation of Cash, Cash Equivalents and Short-Term Investments		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	(3,059,873)	(1,465,252)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	1,056,883	2,522,135
19.2 End of year (Line 18 plus Line 19.1).....	(2,002,990)	1,056,883

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001.....		
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ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
1. Net premium income	78,727,693					78,727,693								
2. Change in unearned premium reserves and reserve for rate credit														
3. Fee-for-service (net of \$..... medical expenses)														XXX
4. Risk revenue														XXX
5. Aggregate write-ins for other health care related revenues														XXX
6. Aggregate write-ins for other non-health care related revenues	189,467	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	189,467
7. Total revenues (Lines 1 to 6)	78,917,160					78,727,693								189,467
8. Hospital/medical benefits														XXX
9. Other professional services	61,449,076					61,449,076								XXX
10. Outside referrals														XXX
11. Emergency room and out-of-area														XXX
12. Prescription drugs														XXX
13. Aggregate write-ins for other hospital and medical														XXX
14. Incentive pool, withhold adjustments and bonus amounts														XXX
15. Subtotal (Lines 8 to 14)	61,449,076					61,449,076								XXX
16. Net reinsurance recoveries														XXX
17. Total hospital and medical (Lines 15 minus 16)	61,449,076					61,449,076								XXX
18. Non-health claims (net)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19. Claims adjustment expenses including \$..... cost containment expenses	3,782,265					3,782,265								
20. General administrative expenses	15,533,020					15,533,020								
21. Increase in reserves for accident and health contracts														XXX
22. Increase in reserves for life contracts		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Lines 17 to 22)	80,764,361					80,764,361								
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	(1,847,201)					(2,036,668)								189,467
Details of Write-Ins														
0501.														XXX
0502.														XXX
0503.														XXX
0598. Summary of remaining write-ins for Line 5 from overflow page														XXX
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)														XXX
0601. Other non-health revenue	189,467	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	189,467
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698. Summary of remaining write-ins for Line 6 from overflow page		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	189,467	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	189,467
1301.														XXX
1302.														XXX
1303.														XXX
1398. Summary of remaining write-ins for Line 13 from overflow page														XXX
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)														XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 – PREMIUMS

		1	2	3	4
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1+2-3)
1.	Comprehensive (hospital and medical) individual.....				
2.	Comprehensive (hospital and medical) group.....				
3.	Medicare supplement.....				
4.	Vision only.....				
5.	Dental only.....	78,727,693			78,727,693
6.	Federal employees health benefits plan.....				
7.	Title XVIII – Medicare.....				
8.	Title XIX – Medicaid.....				
9.	Credit A&H.....				
10.	Disability income.....				
11.	Long-term care.....				
12.	Other health.....				
13.	Health subtotal (Lines 1 through 12).....	78,727,693			78,727,693
14.	Life.....				
15.	Property/casualty.....				
16.	Totals (Lines 13 to 15).....	78,727,693			78,727,693

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 – CLAIMS INCURRED DURING THE YEAR

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
1. Payments during the year:														
1.1 Direct	61,834,957					61,834,957								
1.2 Reinsurance assumed														
1.3 Reinsurance ceded														
1.4 Net	61,834,957					61,834,957								
2. Paid medical incentive pools and bonuses														
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	2,958,000					2,958,000								
3.2 Reinsurance assumed														
3.3 Reinsurance ceded														
3.4 Net	2,958,000					2,958,000								
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct														
4.2 Reinsurance assumed														
4.3 Reinsurance ceded														
4.4 Net														
5. Accrued medical incentive pools and bonuses, current year														
6. Net health care receivables (a)	(23,119)					(23,119)								
7. Amounts recoverable from reinsurers December 31, current year														
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	3,367,000					3,367,000								
8.2 Reinsurance assumed														
8.3 Reinsurance ceded														
8.4 Net	3,367,000					3,367,000								
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct														
9.2 Reinsurance assumed														
9.3 Reinsurance ceded														
9.4 Net														
10. Accrued medical incentive pools and bonuses, prior year														
11. Amounts recoverable from reinsurers December 31, prior year														
12. Incurred benefits:														
12.1 Direct	61,449,076					61,449,076								
12.2 Reinsurance assumed														
12.3 Reinsurance ceded														
12.4 Net	61,449,076					61,449,076								
13. Incurred medical incentive pools and bonuses														

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A – CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Reported in Process of Adjustment:														
1.1 Direct	396,288					396,288								
1.2 Reinsurance assumed														
1.3 Reinsurance ceded														
1.4 Net	396,288					396,288								
2. Incurred but Unreported:														
2.1 Direct	2,561,712					2,561,712								
2.2 Reinsurance assumed														
2.3 Reinsurance ceded														
2.4 Net	2,561,712					2,561,712								
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct														
3.2 Reinsurance assumed														
3.3 Reinsurance ceded														
3.4 Net														
4. TOTALS:														
4.1 Direct	2,958,000					2,958,000								
4.2 Reinsurance assumed														
4.3 Reinsurance ceded														
4.4 Net	2,958,000					2,958,000								

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2B – ANALYSIS OF CLAIMS UNPAID – PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) individual						
2. Comprehensive (hospital and medical) group						
3. Medicare supplement						
4. Vision only						
5. Dental only	2,993,062	58,841,895	33,670	2,924,330	3,026,732	3,367,000
6. Federal employees health benefits plan						
7. Title XVIII – Medicare						
8. Title XIX – Medicaid						
9. Credit A&H						
10. Disability income						
11. Long-term care						
12. Other health						
13. Health subtotal (Lines 1 to 12)	2,993,062	58,841,895	33,670	2,924,330	3,026,732	3,367,000
14. Health care receivables (a)	78,762	47,988			78,762	149,869
15. Other non-health						
16. Medical incentive pools and bonus amounts						
17. Totals (Lines 13 - 14 + 15 + 16)	2,914,300	58,793,907	33,670	2,924,330	2,947,970	3,217,131

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

UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)
GRAND TOTAL

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....	4,405	6,848	6,848	6,848	6,848
2. 2021.....	52,620	56,144	56,144	56,144	56,144
3. 2022.....	XXX	53,789	57,439	57,439	57,439
4. 2023.....	XXX	XXX	55,974	60,307	60,311
5. 2024.....	XXX	XXX	XXX	59,914	62,904
6. 2025.....	XXX	XXX	XXX	XXX	58,865

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....	6,510	6,510	6,510	6,510	6,510
2. 2021.....	56,303	56,589	56,589	56,589	56,589
3. 2022.....	XXX	57,534	57,531	57,531	57,531
4. 2023.....	XXX	XXX	59,919	59,918	59,918
5. 2024.....	XXX	XXX	XXX	63,470	63,134
6. 2025.....	XXX	XXX	XXX	XXX	61,449

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....	69,431	56,144	3,032	5.400	59,176	85.230	445		59,621	85.871
2. 2022.....	73,136	57,439	2,954	5.143	60,393	82.576	92		60,485	82.702
3. 2023.....	77,463	60,311	3,155	5.231	63,466	81.931	(393)		63,073	81.423
4. 2024.....	80,626	62,904	3,479	5.531	66,383	82.334	230		66,613	82.620
5. 2025.....	78,728	58,865	3,404	5.783	62,269	79.094	2,584	209	65,062	82.642

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UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)

HOSPITAL & MEDICAL

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)
MEDICARE SUPPLEMENT

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)
DENTAL ONLY

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....	4,405	6,848	6,848	6,848	6,848
2. 2021.....	52,620	56,144	56,144	56,144	56,144
3. 2022.....	XXX	53,789	57,439	57,439	57,439
4. 2023.....	XXX	XXX	55,974	60,307	60,311
5. 2024.....	XXX	XXX	XXX	59,914	62,904
6. 2025.....	XXX	XXX	XXX	XXX	58,865

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....	6,510	6,510	6,510	6,510	6,510
2. 2021.....	56,303	56,589	56,589	56,589	56,589
3. 2022.....	XXX	57,534	57,531	57,531	57,531
4. 2023.....	XXX	XXX	59,919	59,918	59,918
5. 2024.....	XXX	XXX	XXX	63,470	63,134
6. 2025.....	XXX	XXX	XXX	XXX	61,449

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....	69,431	56,144	3,032	5.400	59,176	85.230	445		59,621	85.871
2. 2022.....	73,136	57,439	2,954	5.143	60,393	82.576	92		60,485	82.702
3. 2023.....	77,463	60,311	3,155	5.231	63,466	81.931	(393)		63,073	81.423
4. 2024.....	80,626	62,904	3,479	5.531	66,383	82.334	230		66,613	82.620
5. 2025.....	78,728	58,865	3,404	5.783	62,269	79.094	2,584	209	65,062	82.642

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UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)
VISION ONLY

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)
FEDERAL EMPLOYEES HEALTH BENEFITS PLAN

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)
TITLE XVIII MEDICARE

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)
TITLE XIX MEDICAID

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)
OTHER HEALTH

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D – AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other
		2 Individual	3 Group										
1. Unearned premium reserves													
2. Additional policy reserves (a)	242,169					242,169							
3. Reserve for future contingent benefits													
4. Reserve for rate credits or experience rating refunds (including \$..... for investment income)													
5. Aggregate write-ins for other policy reserves													
6. Totals (gross)	242,169					242,169							
7. Reinsurance ceded													
8. Totals (Net) (Page 3, Line 4)	242,169					242,169							
9. Present value of amounts not yet due on claims													
10. Reserve for future contingent benefits													
11. Aggregate write-ins for other claim reserves													
12. Totals (gross)													
13. Reinsurance ceded													
14. Totals (Net) (Page 3, Line 7)													
Details of Write-Ins													
0501.													
0502.													
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow page													
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)													
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page													
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)													

(a) Includes \$ – premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 – ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$..... for occupancy of own building).....			39,402		39,402
2. Salaries, wages and other benefits.....		1,565,960	7,174,315		8,740,275
3. Commissions (less \$..... ceded plus \$..... assumed).....			4,160,147		4,160,147
4. Legal fees and expenses.....			230,638		230,638
5. Certifications and accreditation fees.....					
6. Auditing, actuarial and other consulting services.....			135,656		135,656
7. Traveling expenses.....		58,066	229,164		287,230
8. Marketing and advertising.....			968,273		968,273
9. Postage, express and telephone.....			663,284		663,284
10. Printing and office supplies.....		163,289	5,020		168,309
11. Occupancy, depreciation and amortization.....			367,743		367,743
12. Equipment.....			53,824		53,824
13. Cost or depreciation of EDP equipment and software.....		89,160	56,839		145,999
14. Outsourced services including EDP, claims, and other services.....			3,596,397		3,596,397
15. Boards, bureaus and association fees.....			418,673		418,673
16. Insurance, except on real estate.....		32,874	132,668		165,542
17. Collection and bank service charges.....			518,213		518,213
18. Group service and administration fees.....					
19. Reimbursements by uninsured plans.....			(5,896,706)		(5,896,706)
20. Reimbursements from fiscal intermediaries.....					
21. Real estate expenses.....			196,431		196,431
22. Real estate taxes.....			74,283		74,283
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes.....			64,973		64,973
23.2 State premium taxes.....			48,542		48,542
23.3 Regulatory authority licenses and fees.....					
23.4 Payroll taxes.....			480,820		480,820
23.5 Other (excluding federal income and real estate taxes).....					
24. Investment expenses not included elsewhere.....				269,924	269,924
25. Aggregate write-ins for expenses.....		1,872,917	1,814,421		3,687,338
26. Total expenses incurred (Lines 1 to 25).....		3,782,266	15,533,020	269,924	(a) 19,585,210
27. Less expenses unpaid December 31, current year.....		219,000	2,021,359		2,240,359
28. Add expenses unpaid December 31, prior year.....		319,000	4,542,433		4,861,433
29. Amounts receivable relating to uninsured plans, prior year.....					
30. Amounts receivable relating to uninsured plans, current year.....					
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).....		3,882,266	18,054,094	269,924	22,206,284
Details of Write-Ins					
2501. Other expenses.....		1,872,917	1,395,509		3,268,426
2502. Grants.....			418,912		418,912
2503.....					
2598. Summary of remaining write-ins for Line 25 from overflow page.....					
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....		1,872,917	1,814,421		3,687,338

(a) Includes management fees of \$ 2,520,000 to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a) 407,320	665,711
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a) 314,466	348,829
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)	599,933	592,046
2.21	Common stocks of affiliates		
3.	Mortgage loans	(c)	
4.	Real estate	(d) 522,188	522,188
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 86,840	71,607
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	1,930,746	2,200,382
11.	Investment expenses		(g) 269,924
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h) 104,733
14.	Depreciation on real estate and other invested assets		(i) 215,403
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		590,060
17.	Net investment income (Line 10 minus Line 16)		1,610,322
Details of Write-Ins			
0901.			
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page		
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

- (a) Includes \$47,823 accrual of discount less \$54,559 amortization of premium and less \$38,422 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$215,403 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	(13,124)		(13,124)		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	(22,738)		(22,738)		
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)	1,945,130		1,945,130	4,943,244	
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	1,909,268		1,909,268	4,943,244	
Details of Write-Ins						
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)					

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 – Col. 1)
1. Bonds (Schedule D).....			
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			
2.2 Common stocks.....			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			
3.2 Other than first liens.....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			
4.2 Properties held for the production of income.....			
4.3 Properties held for sale.....			
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			
6. Contract loans.....			
7. Derivatives (Schedule DB).....			
8. Other invested assets (Schedule BA).....			
9. Receivables for securities.....			
10. Securities lending reinvested collateral assets (Schedule DL).....			
11. Aggregate write-ins for invested assets.....			
12. Subtotals, cash and invested assets (Lines 1 to 11).....			
13. Title plants (for Title insurers only).....			
14. Investment income due and accrued.....			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	20,157	587	(19,570)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			
16.2 Funds held by or deposited with reinsured companies.....			
16.3 Other amounts receivable under reinsurance contracts.....			
17. Amounts receivable relating to uninsured plans.....			
18.1 Current federal and foreign income tax recoverable and interest thereon.....			
18.2 Net deferred tax asset.....			
19. Guaranty funds receivable or on deposit.....			
20. Electronic data processing equipment and software.....			
21. Furniture and equipment, including health care delivery assets.....			
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			
23. Receivables from parent, subsidiaries and affiliates.....	3,106,358	2,203,487	(902,871)
24. Health care and other amounts receivable.....	111,045	132,908	21,863
25. Aggregate write-ins for other-than-invested assets.....	324,448	203,940	(120,508)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	3,562,008	2,540,922	(1,021,086)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
28. Total (Lines 26 and 27).....	3,562,008	2,540,922	(1,021,086)
Details of Write-Ins			
1101.....			
1102.....			
1103.....			
1198. Summary of remaining write-ins for Line 11 from overflow page.....			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....			
2501. Prepaid expenses.....	324,448	203,940	(120,508)
2502.....			
2503.....			
2598. Summary of remaining write-ins for Line 25 from overflow page.....			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	324,448	203,940	(120,508)

EXHIBIT 1 – ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations.....						
2. Provider Service Organizations.....	179,404	174,668	176,930	175,454	176,663	2,110,940
3. Preferred Provider Organizations.....						
4. Point of Service.....						
5. Indemnity Only.....						
6. Aggregate write-ins for other lines of business.....						
7. Total.....	179,404	174,668	176,930	175,454	176,663	2,110,940
Details of Write-Ins						
0601. Dental.....						
0602.....						
0603.....						
0698. Summary of remaining write-ins for Line 6 from overflow page.....						
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....						

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Delta Dental of Idaho (the Company) have been prepared in conformity with accounting practices prescribed or permitted by the state of Idaho for determining and reporting the financial condition and results of operations of an insurance company for determining solvency under Idaho State Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* (SAP) has been adopted as a component of prescribed or permitted practices by the state of Idaho.

Based on Idaho State Law requirements, the Company limits the admitted asset value for home office to ten percent of total assets and certain furniture and equipment are admitted up to one percent of admitted assets. The prescribed practices do not impact the calculation of net income or trigger a risk-based capital (RBC) regulatory action level.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Idaho is shown below:

	SSAP #	F/S Page	F/S Line #	2025	2024
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 1,672,388	\$ (2,588,882)
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ 1,672,388</u>	<u>\$ (2,588,882)</u>
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 68,978,796	\$ 63,384,250
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
Furniture and equipment nonadmitted under NAIC SAP	19	2, 3	21, 31	389,689	541,417
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	<u>\$ 68,589,107</u>	<u>\$ 62,842,833</u>

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. As additional information becomes available, or actual amounts are determinable, the recorded estimates will be revised. Actual results could differ from these estimates.

C. Accounting Policy

Premium revenue is recognized during the month in which policyholder coverage is provided. The unrecognized portion of premiums received is recorded as premiums received in advance. All costs of acquiring new insurance business, including sales commissions, are charged to operations as incurred.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments, which include U.S. government and agency obligations with original maturity dates of twelve months or less when purchased, are stated at amortized cost.
- (2) Bonds are stated at amortized cost using the scientific interest method. Mandatory convertible securities and SVO-identified bond ETFs are stated at amortized cost.
- (3) Common stocks are stated at fair market value.
- (4) The Company does not have investments in preferred stocks.
- (5) The Company does not have direct investments in mortgage loans.
- (6) The Company does not have investments in asset-backed securities.
- (7) The Company does not have admitted investments in subsidiaries or controlled and affiliated entities.
- (8) The Company does not have significant investments in joint ventures, partnerships or limited liability companies.
- (9) The Company does not have investments in derivatives.
- (10) The Company does not utilize anticipated investment income as a factor in the premium deficiency calculation.
- (11) Unpaid losses and loss adjustment expenses include amounts determined from individual case estimates and loss reports and amounts based on past experience for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates, and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates, and for establishing the resulting liability, are continually reviewed and any adjustments to estimates are reflected in the period determined.
- (12) The Company's capitalization policy has not changed from the prior period.

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern (Continued)

(13) The Company does not have pharmaceutical rebate receivables.

D. Going Concern

There have been no conditions or events which would raise substantial doubt about the Company's ability to continue as a going concern within one year after the date that the financial statements are issued.

2. Accounting Changes and Corrections of Errors - Not Applicable

3. Business Combinations and Goodwill - Not Applicable

4. Discontinued Operations - Not Applicable

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans - Not Applicable
- B. Debt Restructuring - Not Applicable
- C. Reverse Mortgages - Not Applicable
- D. Asset-Backed Securities - None
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- H. Repurchase Agreements Transactions Accounted for as a Sale - None
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None
- J. Real Estate - Not Applicable
- K. Investments in Tax Credit Structures (tax credit investments) - Not Applicable
- L. Restricted Assets - Not Applicable
- M. Working Capital Finance Investments - None
- N. Offsetting and Netting of Assets and Liabilities - None
- O. 5GI Securities - Not Applicable
- P. Short Sales - Not Applicable
- Q. Prepayment Penalty and Acceleration Fees - Not Applicable
- R. Reporting Entity's Share of Cash Pool by Asset Type - None
- S. Aggregate Collateral Loans by Qualifying Investment Collateral - Not Applicable

6. Joint Ventures, Partnerships and Limited Liability Companies - Not Applicable

7. Investment Income

- A. Due and Accrued Income Excluded from Surplus
None
- B. Total Amount Excluded - Not Applicable
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued

Interest Income Due and Accrued	Amount
1. Gross.....	\$..... 240,664
2. Nonadmitted.....	\$.....
3. Admitted.....	\$..... 240,664

- D. The aggregate deferred interest - Not Applicable
- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance - Not Applicable

8. Derivative Instruments - Not Applicable

9. Income Taxes

The Company is exempt from income tax under Section 501(c)(4) of the Internal Revenue Code and similar provisions of the Idaho Code.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

- A. Health Services Group, LLC (HSG) was formed in September 2012 as a wholly owned subsidiary of the Company for the purpose of marketing and selling insurance and other non-dental benefits, and providing support services for the advancement of oral health.

Advanced Health Services, LLC (AHS) was formed in June 2019 as a wholly owned subsidiary of the Company for the purpose of providing information technology services to the Company and other customers.

Notes to the Financial Statements

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties (Continued)

- B. The Company received intercompany revenue of \$100,080 from AHS for services provided and paid intercompany expenses of \$2,520,000 to AHS for IT services.
- C. Transactions with related party who are not reported on Schedule Y - Not Applicable
- D. The Company reported \$94,309 as amounts due from HSG at December 31, 2025 and 2024, respectively. The Company reported \$3,012,049 and \$2,109,178 as amounts due from AHS at December 31, 2025 and 2024, respectively. The receivable balances relate to intercompany activity conducted in the normal course of business as well as initial funding of \$1,200,000 provided by the Company to AHS. All investments in affiliates and intercompany balances are nonadmitted assets.
- E. The Company has an operating agreement with HSG to market and sell insurance and other non-dental benefits. The Company also has an operating agreement with AHS to provide IT services to the Company.
- F. The Company has guaranteed the debt of HSG and AHS as described in Note 11. As of December 31, 2025, HSG and AHS had outstanding balances of \$14,265 and \$465,078, respectively. As of December 31, 2024, HSG and AHS had outstanding balances of \$23,285 and \$75,059, respectively.
- G. Nature of Relationships that Could Affect Operations - Not Applicable
- H. Amount Deducted for Investment in Upstream Company - Not Applicable
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets - Not Applicable
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - Not Applicable
- K. Foreign Subsidiary Value Using CARVM - Not Applicable
- L. Downstream Holding Company Value Using Look-Through Method - Not Applicable
- M. All SCA Investments - Not Applicable
- N. Investment in Insurance SCAs - Not Applicable
- O. SCA and SSAP No. 48 Entity Loss Tracking - Not Applicable

11. Debt

- A. The Company has a term loan related to the construction of its principal office, which matures on December 15, 2029. The loan bears interest at a fixed rate of 3.25% and is secured by the real estate. The outstanding balance as of December 31, 2025 was \$3,676,938.

The Company has a revolving line of credit agreement with Wells Fargo Bank that provides for available borrowings of \$6,250,000, with sub-limits available to its subsidiaries under the master agreement. In the fourth quarter, the line of credit was increased and the agreement was extended through September 29, 2027. Interest on the line of credit is variable based on the prime rate. There was no outstanding balance as of December 31, 2025.

Under the Delta Dental of Idaho overall line of credit, Health Services Group has a revolving line of credit agreement with Wells Fargo Bank that provides for available borrowings of \$250,000, for which Delta Dental of Idaho is the guarantor. In the fourth quarter, the agreement was extended through September 29, 2027. Interest on the line of credit is variable based on the prime rate. The outstanding balance as of December 31, 2025 was \$14,265.

Under the Delta Dental of Idaho overall line of credit, Advanced Health Services has a revolving line of credit agreement with Wells Fargo Bank that provides for available borrowings of \$500,000, for which Delta Dental of Idaho is the guarantor. In the fourth quarter, the line of credit was increased and the agreement was extended through September 29, 2027. Interest on the line of credit is variable based on the prime rate. The outstanding balance as of December 31, 2025 was \$465,078.

- B. FHLB (Federal Home Loan Bank) Agreements - None
- C. Unused commitments and lines of credit for financing arrangements:

	Current Year		Prior Year	
	Unused Commitments	Unused Lines of Credit	Unused Commitments	Unused Lines of Credit
Short-Term (contracts terminating in 12 months or less).....	\$.....	\$.....	\$.....	\$.....
Long-Term (contracts terminating in more than 12 months).....		5,770,657		5,000,000
Total.....	\$.....	\$ 5,770,657	\$.....	\$ 5,000,000

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

- A. Defined Benefit Plan - Not Applicable
- B. Investment Policies and Strategies of Plan Assets - Not Applicable
- C. Fair Value of Each Class of Plan Assets - Not Applicable
- D. Expected Long-Term Rate of Return for the Plan Assets - Not Applicable

Notes to the Financial Statements

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

E. Defined Contribution Plans

Employees are covered by a qualified defined contribution plan sponsored by the Company. The employer matching contribution to the 401(k) plan is an amount equal to 200% of each participant's salary reduction contributions for the plan year up to 3 percent of the participant's eligible salary. The Company's contributions to the 401(k) plan were \$399,155 and \$340,212 for the years ended December 31, 2025 and 2024, respectively.

Employees are also covered by a discretionary bonus plan offered by the Company. The Board of Directors determines the amount of employer contributions to the plan at the end of each year. The Company expects to contribute \$400,000 for 2025, and the Company contributed \$343,590 for 2024.

The Company maintains a deferred compensation program for the benefit of participating dentists. Pursuant to the provisions of the program, the Company reduces its claim payment to the dentists and invests the withheld funds, plus related interest, as directed by the dentists and allowed by the program, for future distributions to the dentists. Those reductions may not exceed the lesser of the IRS deduction limit for 401(k) withholding or one hundred percent of the annual payments to the dentists. The fair market value of the plan assets was \$9,349,336 and \$10,481,413 at December 31, 2025 and 2024, respectively.

F. Multiemployer Plans - Not Applicable

G. Consolidated/Holding Company Plans - Not Applicable

H. Postemployment Benefits and Compensated Absences

Postemployment benefits and compensated absences for employees are recorded as accrued liabilities in accordance with SSAP No. 11.

On December 31, 2003, the Company entered into a supplementary income retirement trust agreement (rabbi trust) for certain employees, which was funded with cash. Upon retirement or termination of the plan participant, the participant's interest began to be distributed. Upon death or disability of the plan participant, the entire interest was distributed. The fair market value of the plan assets was \$140,553 at December 31, 2024. The plan was terminated in January 2025.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - Not Applicable

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

A. Outstanding Shares - Not Applicable

B. Dividend Rate of Preferred Stock - Not Applicable

C. Dividend Restrictions - Not Applicable

D. Ordinary Dividends - Not Applicable

E. Company Profits Paid as Ordinary Dividends - Not Applicable

F. Surplus Restrictions - Not Applicable

G. Surplus Advances - Not Applicable

H. Stock Held for Special Purposes - Not Applicable

I. The Company designated the \$50,000 statutory requirement for the state of Idaho as special surplus funds.

J. Unassigned Funds (Surplus)

The portion of unassigned funds (surplus) represented by cumulative unrealized gains was \$20,345,155.

K. Company-Issued Surplus Debentures or Similar Obligations - Not Applicable

L. Impact of Any Restatement Due to Prior Quasi-Reorganizations - Not Applicable

M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years - Not Applicable

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

(1) Commitments or contingent commitment(s) to an SCA entity, joint venture, partnership, or limited liability company

As of quarter end, the Company was guarantor on the HSG and AHS line of credit agreements for withdrawals up to \$250,000 and \$500,000, respectively, as described in Note 11. As of December 31, 2025, the outstanding balances for HSG and AHS were \$14,265 and \$465,078, respectively.

Notes to the Financial Statements

14. Liabilities, Contingencies and Assessments (Continued)

(2) Nature and circumstances of guarantee

(1)	(2)	(3)	(4)	(5)
Nature and Circumstances of Guarantee and Key Attributes	Liability Recognition of Guarantee	Ultimate Financial Statement Impact if Action Under the Guarantee is Required	Maximum Potential Amount of Future Payments (Undiscounted) the Guarantor Could be Required to Make Under the Guarantee	Current Status of Payment or Performance Risk of Guarantees
The Company is guarantor on the HSG line of credit agreement with Wells Fargo Bank expiring on September 29, 2027.....	\$..... -	Income statement impact of (\$250,000)....	\$..... 250,000	The outstanding balance for HSG as of December 31, 2025 was \$14,265.....
The Company is guarantor on the AHS line of credit agreement with Wells Fargo Bank expiring on September 29, 2027.....	-	Income statement impact of (\$500,000)....	500,000	The outstanding balance for AHS as of December 31, 2025 was \$465,078.....
Total.....	<u>\$..... -</u>		<u>\$..... 750,000</u>	

(3) Aggregate compilation of guarantee obligations

a. Aggregate maximum potential of future payments of all guarantees (undiscounted) the guarantor could be required to make under guarantees (should equal total of Column 4 for (2) above).....	\$..... 750,000
b. Current liability recognized in F/S:	
1. Noncontingent liabilities.....	\$.....
2. Contingent liabilities.....	\$.....
c. Ultimate financial statement impact if action under the guarantee is required	
1. Investments in SCA.....	\$.....
2. Joint venture.....	\$.....
3. Dividends to stockholders (capital contribution).....	\$.....
4. Expense.....	750,000
5. Other.....	\$.....
6. Total (1+2+3+4+5) (should equal (3)a).....	<u>\$..... 750,000</u>

B. Assessments - Not Applicable

C. Gain Contingencies - Not Applicable

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits - Not Applicable

E. Joint and Several Liabilities - Not Applicable

F. All Other Contingencies

The Company, along with the Delta Dental Plans Association (DDPA), DeltaUSA and other independent DDPA member companies, are defending a lawsuit that has been filed in the Northern District Court of Illinois. The plaintiffs, representing purported classes of dental providers, allege that various Association member company licensing standards violate federal antitrust laws. The Company believes the claims are meritless and intends to vigorously defend this case. At this time, it is too early in the proceedings to determine the outcome or the range or amount of any potential loss.

On December 31, 2025, a putative class action lawsuit was filed in the United States District Court for the Southern District of New York alleging that Delta Dental Plans Association, DeltaUSA, and the 39 Delta Dental Member Companies (collectively "Delta Dental") breached their fiduciary duties under and otherwise violated the Employee Retirement Income Security Act of 1974, as amended by allegedly misrepresenting coverage for out-of-network preventative care and other services. The Company believes the claims in the lawsuit are meritless and is currently defending the case. Due to the inherent uncertainties of litigation and the preliminary nature of the proceedings, the Company cannot reasonably estimate the range or amount of any potential loss or impact on its financial condition.

15. Leases - Not Applicable

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - Not Applicable

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - Not Applicable

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans - Not Applicable

B. ASC Plans

The gain (loss) from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans were as follows during 2025:

	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a. Gross reimbursement for medical cost incurred.....	\$..... 94,280,210	\$.....	\$..... 94,280,210
b. Gross administrative fees accrued.....	5,918,756	\$.....	5,918,756
c. Other income or expenses (including interest paid to or received from plans).....	\$.....	\$.....	\$.....
d. Gross expenses incurred (claims and administrative) (a+b+c).....	100,198,966	\$.....	100,198,966
e. Total net gain or loss from operations.....	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract - Not Applicable

Notes to the Financial Statements

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - Not Applicable

20. Fair Value Measurements

A. Fair Value Measurement

(1) Fair value measurements at reporting date

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Money market mutual funds.....	\$ 1,876,902	\$	\$	\$	\$ 1,876,902
Common stock, industrial and misc.....	25,169,129				25,169,129
Common stock, mutual funds.....	4,175,288				4,175,288
Common stock, ETFs.....	15,819,427				15,819,427
Total assets at fair value/NAV.....	<u>\$ 47,040,746</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$ 47,040,746</u>
b. Liabilities at fair value					
Total liabilities at fair value.....	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

(2) Fair value measurements in Level 3 of the fair value hierarchy - Not Applicable

(3) Policy on transfers into and out of Level 3 - Not Applicable

(4) Not applicable

(5) Derivatives - Not Applicable

B. Other Fair Value Disclosures - Not Applicable

C. Fair Values or NAV for All Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Money market funds.....	\$ 1,876,902	\$ 1,876,902	\$ 1,876,902	\$	\$	\$	\$
Bonds.....	26,022,006	26,289,225	13,128,101	12,893,905			
Common stock.....	45,163,845	45,163,845	45,163,845				

D. Not Practicable to Estimate Fair Value - Not Applicable

E. Nature and Risk of Investments Reported at NAV - Not Applicable

21. Other Items - None

22. Events Subsequent

Subsequent events have been considered through February 24, 2026 for the statutory statement issued as of December 31, 2025.

Type I – Recognized Subsequent Events:

The Company is not aware of any Type I – Recognized subsequent events that could have a material effect on its financial statements.

Type II – Nonrecognized Subsequent Events:

The Company is not aware of any Type II – Nonrecognized subsequent events that could have a material effect on its financial statements.

23. Reinsurance - Not Applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate

The Company estimates retrospective premium adjustments for each contractual group based on claims paid data compared with the anticipated claims results in the policy contracts.

B. Method Used to Record

Accrued retrospective premium adjustments are recorded as an adjustment to earned premiums.

C. Amount and Percent of Net Retrospective Premiums

The amount of net premiums subject to retrospective rating features was \$1,556,724, which represented 2.0 percent of total net premiums written for the year ended December 31, 2025.

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - Not Applicable

E. Risk-Sharing Provisions of the Affordable Care Act (ACA) - Not Applicable

25. Change in Incurred Claims and Claim Adjustment Expenses

A. Reasons for Changes in the Provision for Incurred Claim and Claim Adjustment Expenses Attributable to Insured Events of Prior Years

Reserves as of December 31, 2024 were \$3,367,000. As of December 31, 2025, \$2,993,062 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$33,670. Therefore, there has been a \$340,268 favorable prior-year development since December 31, 2024 to December 31, 2025 generally due to the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims.

Notes to the Financial Statements

25. Change in Incurred Claims and Claim Adjustment Expenses (Continued)

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses - Not Applicable

26. Intercompany Pooling Arrangements - Not Applicable

27. Structured Settlements - Not Applicable

28. Health Care Receivables - Not Applicable

29. Participating Policies - Not Applicable

30. Premium Deficiency Reserves

- 1. Liability carried for premium deficiency reserves:..... \$..... -
- 2. Date of the most recent evaluation of this liability:..... 12/31/2025.....
- 3. Was anticipated investment income utilized in the calculation?..... NO.....

31. Anticipated Salvage and Subrogation - Not Applicable

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1. Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?..... YES.....
If yes, complete Schedule Y, Parts 1, 1A, 2, and 3.
- 1.2. If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?..... YES.....
- 1.3. State Regulating?..... Idaho.....
- 1.4. Is the reporting entity publicly traded or a member of a publicly traded group?..... NO.....
- 1.5. If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.....
- 2.1. Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?..... NO.....
- 2.2. If yes, date of change:.....
- 3.1. State as of what date the latest financial examination of the reporting entity was made or is being made..... 12/31/2020.....
- 3.2. State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released..... 12/31/2020.....
- 3.3. State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date)..... 11/29/2021.....
- 3.4. By what department or departments?
Idaho Department of Insurance
- 3.5. Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?..... N/A.....
- 3.6. Have all of the recommendations within the latest financial examination report been complied with?..... N/A.....
- 4.1. During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:.....
- 4.11. sales of new business?..... NO.....
- 4.12. renewals?..... NO.....
- 4.2. During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:.....
- 4.21. sales of new business?..... NO.....
- 4.22. renewals?..... NO.....
- 5.1. Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?..... NO.....
If yes, complete and file the merger history data file with the NAIC.
- 5.2. If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.
- | 1 | 2 | 3 |
|----------------|-------------------|-------------------|
| Name of Entity | NAIC Company Code | State of Domicile |
| | | |
- 6.1. Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?..... NO.....
- 6.2. If yes, give full information
- 7.1. Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?..... NO.....
- 7.2. If yes,
- 7.21. State the percentage of foreign control..... %
- 7.22. State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).
- | 1 | 2 |
|-------------|----------------|
| Nationality | Type of Entity |
| | |
- 8.1. Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?..... NO.....
- 8.2. If response to 8.1 is yes, please identify the name of the DIHC.....
- 8.3. Is the company affiliated with one or more banks, thrifts or securities firms?..... NO.....
- 8.4. If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

- 8.5. Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?..... NO.....
- 8.6. If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?..... NO.....
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Eide Bailly, LLP, 877 West Main Street, Boise, ID 83702
- 10.1. Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?..... NO.....
- 10.2. If the response to 10.1 is yes, provide information related to this exemption:
- 10.3. Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?..... NO.....
- 10.4. If the response to 10.3 is yes, provide information related to this exemption:
- 10.5. Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?..... YES.....
- 10.6. If the response to 10.5 is no or n/a, please explain.
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Anne Treankler, FSA, MAAA, Delta Dental of Wisconsin, 2801 Hoover Road, P.O. Box 828, Stevens Point, WI 54481
- 12.1. Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?..... NO.....
12.11 Name of real estate holding company

12.12 Number of parcels involved.....
12.13 Total book / adjusted carrying value..... \$.....
- 12.2. If yes, provide explanation
13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1. What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?..... Not applicable.....
- 13.2. Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?.....
- 13.3. Have there been any changes made to any of the trust indentures during the year?.....
- 13.4. If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?.....
- 14.1. Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?..... YES.....
a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
c. Compliance with applicable governmental laws, rules and regulations;
d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
e. Accountability for adherence to the code.
- 14.11. If the response to 14.1 is no, please explain:
- 14.2. Has the code of ethics for senior managers been amended?..... NO.....
- 14.21. If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3. Have any provisions of the code of ethics been waived for any of the specified officers?..... NO.....
- 14.31. If the response to 14.3 is yes, provide the nature of any waiver(s).
- 15.1. Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?..... NO.....
- 15.2. If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

1	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
			\$

BOARD OF DIRECTORS

- 16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? YES
- 17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? YES
- 18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? YES

FINANCIAL

- 19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? NO
- 20.1. Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
 - 20.11 To directors or other officers \$
 - 20.12 To stockholders not officers \$
 - 20.13 Trustees, supreme or grand (Fraternal only) \$
- 20.2. Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
 - 20.21 To directors or other officers \$
 - 20.22 To stockholders not officers \$
 - 20.23 Trustees, supreme or grand (Fraternal only) \$
- 21.1. Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? NO
- 21.2. If yes, state the amount thereof at December 31 of the current year:
 - 21.21 Rented from others \$
 - 21.22 Borrowed from others \$
 - 21.23 Leased from others \$
 - 21.24 Other \$
- 22.1. Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? NO
- 22.2. If answer is yes:
 - 22.21 Amount paid as losses or risk adjustment \$
 - 22.22 Amount paid as expenses \$
 - 22.23 Other amounts paid \$
- 23.1. Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? NO
- 23.2. If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$
- 24.1. Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? NO
- 24.2. If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

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

INVESTMENT

- 25.01. Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03) YES
- 25.02. If no, give full and complete information, relating thereto
- 25.03. For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
- 25.04. For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions \$
- 25.05. For the reporting entity's securities lending program, report amount of collateral for other programs \$
- 25.06. Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? N/A
- 25.07. Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? N/A
- 25.08. Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? N/A

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

25.09. For the reporting entity's securities lending program, state the amount of the following as of December 31 of the current year:
 25.091. Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
 25.092. Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
 25.093. Total payable for securities lending reported on the liability page \$

26.1. Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03)..... NO

26.2. If yes, state the amount thereof at December 31 of the current year:
 26.21. Subject to repurchase agreements \$
 26.22. Subject to reverse repurchase agreements \$
 26.23. Subject to dollar repurchase agreements \$
 26.24. Subject to reverse dollar repurchase agreements \$
 26.25. Placed under option agreements \$
 26.26. Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$
 26.27. FHLB Capital Stock \$
 26.28. On deposit with states \$
 26.29. On deposit with other regulatory bodies \$
 26.30. Pledged as collateral - excluding collateral pledged to an FHLB \$
 26.31. Pledged as collateral to FHLB - including assets backing funding agreements \$
 26.32. Other \$

26.3. For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$

27.1. Does the reporting entity have any hedging transactions reported on Schedule DB?..... NO

27.2. If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement..... N/A

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3. Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?.....

27.4. If the response to 27.3 is YES, does the reporting entity utilize:
 27.41 Special accounting provision of SSAP No. 108.....
 27.42 Permitted accounting practice.....
 27.43 Other accounting guidance.....

27.5. By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:
 • The reporting entity has obtained explicit approval from the domiciliary state.
 • Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
 • Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
 • Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1. Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?..... NO

28.2. If yes, state the amount thereof at December 31 of the current year..... \$

29. Excluding items in Schedule E- Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the *NAIC Financial Condition Examiners Handbook*?..... YES

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

1 Name of Custodian(s)	2 Custodian's Address
Wells Fargo.....	608 Second Ave. South, Minneapolis, MN 55479.....

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

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

29.03. Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... NO

29.04. If yes, give full and complete information relating thereto:

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

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

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

1	2
Name of Firm or Individual	Affiliation
Wells Fargo	U

29.0597. For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity’s invested assets? YES

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

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

1	2	3	4
Central Registration Depository Number	Name of Firm or Individual	Registered With	Investment Management Agreement (IMA) Filed
	Wells Fargo	SEC	NO

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

30.2. If yes, complete the following schedule:

1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
00191K856	AQR:RISK-BAL COMM STR R6	\$ 192,350
14064D873	FULLERTHALER BSCE R6	585,312
46647B404	JPMORGAN:MDCP VAL R6	164,459
722005667	PIMCO:COMM RR STR INST	436,846
74256W584	PRINCIPAL:MIDCAP R-6	545,615
779547405	T ROWE PRICE EQ INC I	200,173
77956H435	T ROWE PRICE INT:OS I	911,244
89155T490	TOUCHSTONE:MID CAP R6	498,526
92828N262	VIRTUS:KAR MID-CAP CR R6	372,278
92828N429	VIRTUS:KAR SMCP CR R6	268,486
464285204	ISHARES:GOLD TRUST	1,169,254
464287200	ISHARES:CORE S&P 500	215,756
464287473	ISHARES:RUSS MC VAL	806,903
464287481	ISHARES:RUSS MC GR	1,875,530
464287614	ISHARES:RUSS 1000 GR	2,569,546
464287630	ISHARES:RUSS 2000 VL ETF	1,335,920
464287648	ISHARES:RUSS 2000 GR	192,837
46434V290	ISHARES: US SC EQTY FCTR	579,286
46434V803	ISHARES:CURR HGD EAFE	1,562,167
46654Q732	JPMORGAN:US TECH LDERS	157,627
81369Y704	SEL SECTOR:IND SS SPDR	309,464
81369Y803	SEL SECTOR:TECH SPDR	2,234,414
81369Y852	SEL SCTR:COMS SS SPDR	555,050
921943858	VANGUARD DEV MKT ETF	762,134
922908629	VANGUARD MD-CP I ETF	1,383,769
922908736	VANGUARD GRO IDX ETF	109,769
30.2999 TOTAL		\$ 19,994,715

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

1	2	3	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund’s Book / Adjusted Carrying Value Attributable to the Holding	Date of Valuation
AQR:RISK-BAL COMM STR R6	Limited Purpose Cash Investment	\$ 105,636	12/29/2025
AQR:RISK-BAL COMM STR R6	Ubs Relationship Fds	47,204	12/29/2025
AQR:RISK-BAL COMM STR R6	US Treasury Bill 0%	22,874	12/29/2025
AQR:RISK-BAL COMM STR R6	US Treasury Bill 0%	8,526	12/29/2025
AQR:RISK-BAL COMM STR R6	Gold 100 Oz 12/29/2025	8,110	12/29/2025
FULLERTHALER BSCE R6	Fidelity Inv MM Government Instl	233,845	09/30/2025
FULLERTHALER BSCE R6	Sterling Infrastructure Inc	99,979	09/30/2025
FULLERTHALER BSCE R6	Primoris Services Corp	89,057	09/30/2025
FULLERTHALER BSCE R6	Exelixis Inc	84,296	09/30/2025
FULLERTHALER BSCE R6	Comfort Systems USA Inc	78,135	09/30/2025
JPMORGAN:MDCP VAL R6	JPMorgan Prime Money Market Im	45,863	11/30/2025
JPMORGAN:MDCP VAL R6	Fidelity National Information Services Inc	30,950	11/30/2025
JPMORGAN:MDCP VAL R6	IQVIA Holdings Inc	29,825	11/30/2025
JPMORGAN:MDCP VAL R6	Xcel Energy Inc	29,262	11/30/2025
JPMORGAN:MDCP VAL R6	Quest Diagnostics Inc	28,559	11/30/2025
PIMCO:COMM RR STR INST	Pimco Cayman Cmnty Fd Ltd Instl	122,057	09/30/2025
PIMCO:COMM RR STR INST	TRS R 5.33/91282CDC2 BPS	86,621	09/30/2025
PIMCO:COMM RR STR INST	5 Year Treasury Note Future Dec 25	79,534	09/30/2025
PIMCO:COMM RR STR INST	JAPANESE YEN Purchased	78,550	09/30/2025
PIMCO:COMM RR STR INST	TRS R Sofrrate+15/9128283R9 SOG	70,084	09/30/2025
PRINCIPAL:MIDCAP R-6	Heico Corp Class A	109,123	11/30/2025

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book / Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
PRINCIPAL:MIDCAP R-6	Brookfield Corp Registered Shs-A-Limited Vtg	109,123	11/30/2025
PRINCIPAL:MIDCAP R-6	Hilton Worldwide Holdings Inc	109,123	11/30/2025
PRINCIPAL:MIDCAP R-6	TransDigm Group Inc	109,123	11/30/2025
PRINCIPAL:MIDCAP R-6	Vulcan Materials Co	109,123	11/30/2025
T ROWE PRICE EQ INC I	Qualcomm Inc	41,277	11/30/2025
T ROWE PRICE EQ INC I	Southern Co	40,546	11/30/2025
T ROWE PRICE EQ INC I	Alphabet Inc Class A	40,302	11/30/2025
T ROWE PRICE EQ INC I	Metlife Inc	39,937	11/30/2025
T ROWE PRICE EQ INC I	JPMorgan Chase & Co	38,111	11/30/2025
T ROWE PRICE INT:OS I	Siemens AG	219,190	11/30/2025
T ROWE PRICE INT:OS I	ASML Holding NV	185,390	11/30/2025
T ROWE PRICE INT:OS I	Unilever PLC	181,634	11/30/2025
T ROWE PRICE INT:OS I	AstraZeneca PLC ADR	175,489	11/30/2025
T ROWE PRICE INT:OS I	Taiwan Semiconductor Manufacturing Co Ltd	149,541	11/30/2025
TOUCHSTONE:MID CAP R6	Armstrong World Industries Inc	108,874	09/30/2025
TOUCHSTONE:MID CAP R6	AerCap Holdings NV	106,827	09/30/2025
TOUCHSTONE:MID CAP R6	Somnigroup International Inc	100,278	09/30/2025
TOUCHSTONE:MID CAP R6	Dollar Tree Inc	96,185	09/30/2025
TOUCHSTONE:MID CAP R6	Churchill Downs Inc	86,362	09/30/2025
VIRTUS:KAR MID-CAP CR R6	Houlihan Lokey Inc Class A	80,820	09/30/2025
VIRTUS:KAR MID-CAP CR R6	Heico Corp Class A	75,769	09/30/2025
VIRTUS:KAR MID-CAP CR R6	Monolithic Power Systems Inc	74,759	09/30/2025
VIRTUS:KAR MID-CAP CR R6	Teledyne Technologies Inc	70,718	09/30/2025
VIRTUS:KAR MID-CAP CR R6	AMETEK Inc	70,212	09/30/2025
VIRTUS:KAR SMCP CR R6	Auto Trader Group PLC	61,538	09/30/2025
VIRTUS:KAR SMCP CR R6	Morningstar Inc	53,102	09/30/2025
VIRTUS:KAR SMCP CR R6	Rightmove PLC	52,109	09/30/2025
VIRTUS:KAR SMCP CR R6	Servisfirst Bancshares Inc	51,116	09/30/2025
VIRTUS:KAR SMCP CR R6	AppFolio Inc Class A	50,620	09/30/2025
ISHARES:GOLD TRUST	Gold	233,851	12/31/2025
ISHARES:GOLD TRUST	Gold	233,851	12/31/2025
ISHARES:GOLD TRUST	Gold	233,851	12/31/2025
ISHARES:GOLD TRUST	Gold	233,851	12/31/2025
ISHARES:GOLD TRUST	Gold	233,851	12/31/2025
ISHARES:CORE S&P 500	NVIDIA Corp	59,590	01/12/2026
ISHARES:CORE S&P 500	Apple Inc	51,371	01/12/2026
ISHARES:CORE S&P 500	Microsoft Corp	47,261	01/12/2026
ISHARES:CORE S&P 500	Amazon.com Inc	31,850	01/12/2026
ISHARES:CORE S&P 500	Alphabet Inc Class A	25,685	01/12/2026
ISHARES:RUSS MC VAL	Bank of New York Mellon Corp	171,758	01/14/2026
ISHARES:RUSS MC VAL	Cummins Inc	165,724	01/14/2026
ISHARES:RUSS MC VAL	Robinhood Markets Inc Class A	163,445	01/14/2026
ISHARES:RUSS MC VAL	Western Digital Corp	155,888	01/14/2026
ISHARES:RUSS MC VAL	Corning Inc	150,088	01/14/2026
ISHARES:RUSS MC GR	Howmet Aerospace Inc	458,834	01/12/2026
ISHARES:RUSS MC GR	Royal Caribbean Group	396,645	01/12/2026
ISHARES:RUSS MC GR	Hilton Worldwide Holdings Inc	356,449	01/12/2026
ISHARES:RUSS MC GR	Vertiv Holdings Co Class A	336,731	01/12/2026
ISHARES:RUSS MC GR	Carvana Co Class A	326,872	01/12/2026
ISHARES:RUSS 1000 GR ETF	NVIDIA Corp	741,215	01/12/2026
ISHARES:RUSS 1000 GR ETF	Apple Inc	642,386	01/12/2026
ISHARES:RUSS 1000 GR ETF	Microsoft Corp	592,972	01/12/2026
ISHARES:RUSS 1000 GR ETF	Broadcom Inc	296,486	01/12/2026
ISHARES:RUSS 1000 GR ETF	Amazon.com Inc	296,486	01/12/2026
ISHARES:RUSS 2000 VL ETF	EchoStar Corp Class A	425,065	01/12/2026
ISHARES:RUSS 2000 VL ETF	Hecla Mining Co	294,943	01/12/2026
ISHARES:RUSS 2000 VL ETF	Oklo Inc Class A Shares	213,979	01/12/2026
ISHARES:RUSS 2000 VL ETF	Commercial Metals Co	202,412	01/12/2026
ISHARES:RUSS 2000 VL ETF	TTM Technologies Inc	199,521	01/12/2026
ISHARES:RUSS 2000 GR ETF	Bloom Energy Corp Class A	53,600	01/12/2026
ISHARES:RUSS 2000 GR ETF	Credo Technology Group Holdings Ltd	42,921	01/12/2026
ISHARES:RUSS 2000 GR ETF	Kratos Defense & Security Inc	35,323	01/12/2026
ISHARES:RUSS 2000 GR ETF	IonQ Inc Class A	31,010	01/12/2026
ISHARES:RUSS 2000 GR ETF	Fabrinet	29,983	01/12/2026
ISHARES:US SC EQTY FCTR	EMCOR Group Inc	139,208	01/12/2026
ISHARES:US SC EQTY FCTR	SanDisk Corp Ordinary Shares	134,718	01/12/2026
ISHARES:US SC EQTY FCTR	BlackRock Cash Funds Treasury SL Agency	107,774	01/12/2026
ISHARES:US SC EQTY FCTR	Comfort Systems USA Inc	98,793	01/12/2026
ISHARES:US SC EQTY FCTR	Interactive Brokers Group Inc Class A	98,793	01/12/2026
ISHARES:CURR HGD EAFE	iShares MSCI EAFE ETF	865,193	01/12/2026
ISHARES:CURR HGD EAFE	EUR/USD Purchased	247,198	01/12/2026
ISHARES:CURR HGD EAFE	JPY/USD Purchased	247,198	01/12/2026
ISHARES:CURR HGD EAFE	GBP/USD Purchased	123,475	01/12/2026
ISHARES:CURR HGD EAFE	CHF/USD Purchased	79,103	01/12/2026

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

1	2	3	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book / Adjusted Carrying Value Attributable to the Holding	Date of Valuation
JPMORGAN:US TECH LDRS	Alphabet Inc Class C	35,286	01/14/2026
JPMORGAN:US TECH LDRS	NVIDIA Corp	35,054	01/14/2026
JPMORGAN:US TECH LDRS	Lam Research Corp	29,483	01/14/2026
JPMORGAN:US TECH LDRS	Take-Two Interactive Software Inc	29,250	01/14/2026
JPMORGAN:US TECH LDRS	Tesla Inc	28,554	01/14/2026
SEL SECTOR:INDUST SPDR	GE Aerospace	88,773	01/14/2026
SEL SECTOR:INDUST SPDR	Caterpillar Inc	88,773	01/14/2026
SEL SECTOR:INDUST SPDR	RTX Corp	44,387	01/14/2026
SEL SECTOR:INDUST SPDR	Boeing Co	44,387	01/14/2026
SEL SECTOR:INDUST SPDR	Uber Technologies Inc	43,144	01/14/2026
SEL SECTOR:TECH SPDR	NVIDIA Corp	710,950	01/15/2026
SEL SECTOR:TECH SPDR	Apple Inc	609,386	01/15/2026
SEL SECTOR:TECH SPDR	Microsoft Corp	507,821	01/15/2026
SEL SECTOR:TECH SPDR	Broadcom Inc	253,911	01/15/2026
SEL SECTOR:TECH SPDR	Palantir Technologies Inc Ordinary Shares-Class A	152,346	01/15/2026
SEL SCTR:COMS SS SPDR	Meta Platforms Inc Class A	231,271	01/15/2026
SEL SCTR:COMS SS SPDR	Alphabet Inc Class A	138,762	01/15/2026
SEL SCTR:COMS SS SPDR	Alphabet Inc Class C	92,508	01/15/2026
SEL SCTR:COMS SS SPDR	Netflix Inc	46,254	01/15/2026
SEL SCTR:COMS SS SPDR	The Walt Disney Co	46,254	01/15/2026
VANGUARD DEV MKT ETF	ASML Holding NV	179,326	12/31/2025
VANGUARD DEV MKT ETF	Samsung Electronics Co Ltd	179,326	12/31/2025
VANGUARD DEV MKT ETF	Roche Holdings AG	134,494	12/31/2025
VANGUARD DEV MKT ETF	AstraZeneca PLC	134,494	12/31/2025
VANGUARD DEV MKT ETF	HSBC Holdings PLC	134,494	12/31/2025
VANGUARD MD-CP I ETF	Constellation Energy Corp	276,754	12/31/2025
VANGUARD MD-CP I ETF	Newmont Corp	276,754	12/31/2025
VANGUARD MD-CP I ETF	Robinhood Markets Inc Class A	276,754	12/31/2025
VANGUARD MD-CP I ETF	CRH PLC	276,754	12/31/2025
VANGUARD MD-CP I ETF	Howmet Aerospace Inc	276,754	12/31/2025
VANGUARD GRO IDX ETF	Apple Inc	28,886	12/31/2025
VANGUARD GRO IDX ETF	NVIDIA Corp	28,164	12/31/2025
VANGUARD GRO IDX ETF	Microsoft Corp	25,276	12/31/2025
VANGUARD GRO IDX ETF	Amazon.com Inc	14,443	12/31/2025
VANGUARD GRO IDX ETF	Broadcom Inc	12,999	12/31/2025

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

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1. Issuer Credit Obligations	\$ 26,289,225	\$ 26,022,006	\$ (267,220)
31.2. Asset-Backed Securities			
31.3. Preferred Stocks			
31.4. Totals	\$ 26,289,225	\$ 26,022,006	\$ (267,220)

31.5. Describe the sources or methods utilized in determining the fair values:

The market value of all bonds is provided by the custodian, Wells Fargo

32.1. Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? YES

32.2. If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? YES

32.3. If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

33.1. Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? YES

33.2. If no, list exceptions:

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? NO

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:

- a. The security was either:
 - i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

- ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
- b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
- c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
- d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual?..... **NO**.....

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?..... **NO**.....

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
 - b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
 - c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
 - d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?..... **NO**.....

38.1. Does the reporting entity directly hold cryptocurrencies?..... **NO**.....

38.2. If the response to 38.1 is yes, on what schedule are they reported?.....

39.1. Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies?..... **NO**.....

39.2. If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly.....

39.22 Immediately converted to U.S. dollars.....

39.3. If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums

OTHER

40.1. Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?..... \$..... 9,635

40.2. List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
Boise Metro Chamber of Commerce.....	\$..... 6,592

41.1. Amount of payments for legal expenses, if any?..... \$..... 230,638

41.2. List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Delta Dental Plans Association.....	\$..... 124,918

42.1. Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any?..... \$..... 60,578

42.2. List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
Hawley Troxell.....	\$..... 60,578

GENERAL INTERROGATORIES
PART 2 - HEALTH INTERROGATORIES

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force?..... NO
- 1.2 If yes, indicate premium earned on U.S. business only..... \$
- 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?..... \$
 - 1.31 Reason for excluding:
- 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above..... \$
- 1.5 Indicate total incurred claims on all Medicare Supplement insurance..... \$
- 1.6 Individual policies:
 - Most current three years:
 - 1.61 Total premium earned..... \$
 - 1.62 Total incurred claims..... \$
 - 1.63 Number of covered lives.....
 - All years prior to most current three years:
 - 1.64 Total premium earned..... \$
 - 1.65 Total incurred claims..... \$
 - 1.66 Number of covered lives.....
- 1.7 Group policies:
 - Most current three years:
 - 1.71 Total premium earned..... \$
 - 1.72 Total incurred claims..... \$
 - 1.73 Number of covered lives.....
 - All years prior to most current three years:
 - 1.74 Total premium earned..... \$
 - 1.75 Total incurred claims..... \$
 - 1.76 Number of covered lives.....

2. Health Test:

	1	2
	Current Year	Prior Year
2.1 Premium Numerator.....	\$ 78,727,693	\$ 80,626,264
2.2 Premium Denominator.....	\$ 78,727,693	\$ 80,626,264
2.3 Premium Ratio (2.1/2.2).....	100.000 %	100.000 %
2.4 Reserve Numerator.....	\$ 3,200,169	\$ 3,771,488
2.5 Reserve Denominator.....	\$ 3,200,169	\$ 3,771,488
2.6 Reserve Ratio (2.4/2.5).....	100.000 %	100.000 %

- 3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?..... NO
- 3.2 If yes, give particulars:
- 4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?..... YES
- 4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?..... NO
- 5.1 Does the reporting entity have stop-loss reinsurance?..... NO
- 5.2 If no, explain:
Dental Only Policies
- 5.3 Maximum retained risk (see instructions)
 - 5.31 Comprehensive Medical..... \$
 - 5.32 Medical Only..... \$
 - 5.33 Medicare Supplement..... \$
 - 5.34 Dental and Vision..... \$
 - 5.35 Other Limited Benefit Plan..... \$
 - 5.36 Other..... \$
- 6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:
All provider contracts contain a hold harmless provision.
 - 7.1 Does the reporting entity set up its claim liability for provider services on a service date basis?..... YES
 - 7.2 If no, give details
- 8. Provide the following information regarding participating providers:
 - 8.1 Number of providers at start of reporting year..... 1,102
 - 8.2 Number of providers at end of reporting year..... 1,084
- 9.1 Does the reporting entity have business subject to premium rate guarantees?..... YES
- 9.2 If yes, direct premium earned:
 - 9.21 Business with rate guarantees between 15-36 months..... \$ 1,556,724
 - 9.22 Business with rate guarantees over 36 months..... \$

GENERAL INTERROGATORIES
PART 2 - HEALTH INTERROGATORIES

- 10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts?..... NO.....
- 10.2 If yes:
- 10.21 Maximum amount payable bonuses..... \$.....
- 10.22 Amount actually paid for year bonuses..... \$.....
- 10.23 Maximum amount payable withholds..... \$.....
- 10.24 Amount actually paid for year withholds..... \$.....
- 11.1 Is the reporting entity organized as:
- 11.12 A Medical Group/Staff Model,..... NO.....
- 11.13 An Individual Practice Association (IPA), or,..... NO.....
- 11.14 A Mixed Model (combination of above)?..... NO.....
- 11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements?..... YES.....
- 11.3 If yes, show the name of the state requiring such minimum capital and surplus..... Idaho.....
- 11.4 If yes, show the amount required..... \$..... 50,000.....
- 11.5 Is this amount included as part of a contingency reserve in stockholder's equity?..... YES.....
- 11.6 If the amount is calculated, show the calculation

12. List service areas in which reporting entity is licensed to operate:

1 Name of Service Area
Idaho.....

- 13.1 Do you act as a custodian for health savings accounts?..... NO.....
- 13.2 If yes, please provide the amount of custodial funds held as of the reporting date..... \$.....
- 13.3 Do you act as an administrator for health savings accounts?..... NO.....
- 13.4 If yes, please provide the balance of the funds administered as of the reporting date..... \$.....
- 14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?..... N/A.....
- 14.2. If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).
- 15.1 Direct Premium Written..... \$.....
- 15.2 Total Incurred Claims..... \$.....
- 15.3 Number of Covered Lives.....

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?..... NO.....
- 16.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?..... NO.....

FIVE-YEAR HISTORICAL DATA

	1	2	3	4	5
	2025	2024	2023	2022	2021
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	86,212,582	85,154,823	79,876,762	71,203,204	78,889,988
2. Total liabilities (Page 3, Line 24)	17,233,786	21,770,573	18,793,353	17,324,336	18,487,858
3. Statutory minimum capital and surplus requirement	50,000	50,000	50,000	50,000	50,000
4. Total capital and surplus (Page 3, Line 33)	68,978,796	63,384,250	61,083,409	53,878,868	60,402,130
Income Statement (Page 4)					
5. Total revenues (Line 8)	78,917,160	80,772,716	77,583,686	73,249,927	69,539,807
6. Total medical and hospital expenses (Line 18)	61,449,076	63,470,372	59,918,659	57,534,495	56,588,552
7. Claims adjustment expenses (Line 20)	3,782,266	3,920,858	3,614,583	3,402,519	2,987,462
8. Total administrative expenses (Line 21)	15,533,020	14,499,628	13,283,251	12,185,479	11,015,342
9. Net underwriting gain (loss) (Line 24)	(1,847,202)	(1,118,142)	767,193	127,434	(1,051,549)
10. Net investment gain (loss) (Line 27)	3,519,590	2,357,225	1,436,605	1,905,774	2,555,303
11. Total other income (Lines 28 plus 29)		(3,827,965)			
12. Net income or (loss) (Line 32)	1,672,388	(2,588,882)	2,203,798	2,033,208	1,503,754
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	(2,339,501)	(1,057,683)	2,267,973	2,159,704	(2,763,401)
Risk-Based Capital Analysis					
14. Total adjusted capital	68,978,796	63,384,250	61,083,409	53,878,868	60,402,130
15. Authorized control level risk-based capital	5,739,488	5,118,311	4,476,518	4,018,892	4,659,653
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	176,663	179,404	182,203	176,066	172,827
17. Total members months (Column 6, Line 7)	2,110,940	2,190,044	2,157,212	2,100,845	2,035,860
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3, and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19)	78.1	78.7	77.4	78.7	81.5
20. Cost containment expenses					
21. Other claims adjustment expenses	4.8	4.9	4.7	4.7	4.3
22. Total underwriting deductions (Line 23)	102.6	101.6	99.2	100.0	101.7
23. Total underwriting gain (loss) (Line 24)	(2.3)	(1.4)	1.0	0.2	(1.5)
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	2,947,970	4,263,319	3,584,957	3,468,262	4,359,372
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	3,217,131	4,002,481	3,719,626	3,524,289	3,941,618
Investments in Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 9 + 15, Col. 1)					
27. Affiliated preferred stocks (Sch. D Summary, Line 22, Col. 1)					
28. Affiliated common stocks (Sch. D Summary, Line 28, Col. 1)					
29. Affiliated mortgage loans on real estate					
30. All other affiliated					
31. Total of above lines 26 to 30					
32. Total investment in parent included in Lines 26 to 30 above					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3—Accounting Changes and Corrections of Errors?
If no, please explain

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS
Allocated by States and Territories

	States, Etc.	1 Active Status (a)	Direct Business Only								
			2 Accident & Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Plan Premiums	7 Life & Annuity Premiums & Other Considerations	8 Property / Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1.	Alabama	AL	N								
2.	Alaska	AK	N								
3.	Arizona	AZ	N								
4.	Arkansas	AR	N								
5.	California	CA	N								
6.	Colorado	CO	N								
7.	Connecticut	CT	N								
8.	Delaware	DE	N								
9.	District of Columbia	DC	N								
10.	Florida	FL	N								
11.	Georgia	GA	N								
12.	Hawaii	HI	N								
13.	Idaho	ID	L	78,727,693						78,727,693	
14.	Illinois	IL	N								
15.	Indiana	IN	N								
16.	Iowa	IA	N								
17.	Kansas	KS	N								
18.	Kentucky	KY	N								
19.	Louisiana	LA	N								
20.	Maine	ME	N								
21.	Maryland	MD	N								
22.	Massachusetts	MA	N								
23.	Michigan	MI	N								
24.	Minnesota	MN	N								
25.	Mississippi	MS	N								
26.	Missouri	MO	N								
27.	Montana	MT	N								
28.	Nebraska	NE	N								
29.	Nevada	NV	N								
30.	New Hampshire	NH	N								
31.	New Jersey	NJ	N								
32.	New Mexico	NM	N								
33.	New York	NY	N								
34.	North Carolina	NC	N								
35.	North Dakota	ND	N								
36.	Ohio	OH	N								
37.	Oklahoma	OK	N								
38.	Oregon	OR	N								
39.	Pennsylvania	PA	N								
40.	Rhode Island	RI	N								
41.	South Carolina	SC	N								
42.	South Dakota	SD	N								
43.	Tennessee	TN	N								
44.	Texas	TX	N								
45.	Utah	UT	N								
46.	Vermont	VT	N								
47.	Virginia	VA	N								
48.	Washington	WA	N								
49.	West Virginia	WV	N								
50.	Wisconsin	WI	N								
51.	Wyoming	WY	N								
52.	American Samoa	AS	N								
53.	Guam	GU	N								
54.	Puerto Rico	PR	N								
55.	U.S. Virgin Islands	VI	N								
56.	Northern Mariana Islands	MP	N								
57.	Canada	CAN	N								
58.	Aggregate other alien	OT	XXX								
59.	Subtotal	XXX		78,727,693						78,727,693	
60.	Reporting entity contributions for employee benefit plans	XXX									
61.	Total (direct business)	XXX		78,727,693						78,727,693	
Details of Write-Ins											
58001.		XXX									
58002.		XXX									
58003.		XXX									
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX									
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX									

(a) Active Status Counts

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG	1	4. Q - Qualified - Qualified or accredited reinsurer	-
2. R - Registered - Non-domiciled RRGs	-	5. N - None of the above - Not allowed to write business in the state	56
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state	-		

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

Premiums are allocated based on situs of contract.

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

Delta Dental of Idaho Company Structure

