

STANDARD PRACTICE MANUAL  
 NORTH CAROLINA REINSURANCE FACILITY  
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**Section 4. Accounting and Statistical Requirements**

NORTH CAROLINA REINSURANCE FACILITY

Form IS

Statement of Income - All Policy Years Combined  
 Fiscal Year Commencing October 1,

Quarter Ending

| <u>Line No.</u>                         |   | <u>Current Quarter</u> | <u>Fiscal Year-to-Date</u> | <u>Inception to Date</u> |
|---|---|------------------------|----------------------------|--------------------------|
| <u>Underwriting Income</u>              |   |                        |                            |                          |
| <u>1</u>                                | Premiums Written                                      | \$xxxxxx               | \$xxxxxx                   | \$xxxxxx                 |
| <u>2</u>                                | Unearned Premium (Prior)                              | xxxxxx                 | xxxxxx                     | xxxxxx                   |
| <u>3</u>                                | Unearned Premium (Current)                            | <u>xxxxxx</u>          | <u>xxxxxx</u>              | <u>xxxxxx</u>            |
| <u>4</u>                                | <u>Earned but Unbilled Premium (Prior)</u>            | <u>xxxxxx</u>          | <u>xxxxxx</u>              | <u>xxxxxx</u>            |
| <u>5</u>                                | <u>Earned but Unbilled Premium (Current)</u>          | <u>xxxxxx</u>          | <u>xxxxxx</u>              | <u>xxxxxx</u>            |
| <u>46</u>                               | Premiums Earned                                       | \$xxxxxx               | \$xxxxxx                   | \$xxxxxx                 |
| <u>57</u>                               | Clean Risk Subsidy                                    | <u>xxxxxx</u>          | <u>xxxxxx</u>              | <u>xxxxxx</u>            |
|   | Total Underwriting Income                             | <u>\$xxxxxx</u>        | <u>\$xxxxxx</u>            | <u>\$xxxxxx</u>          |
| <u>Underwriting Deductions</u>          |   |                        |                            |                          |
| <u>68</u>                               | Losses Incurred                                       | \$xxxxxx               | \$xxxxxx                   | \$xxxxxx                 |
| <u>9</u>                                | <u>Change in Premium Deficiency Reserve</u>           | <u>xxxxxx</u>          | <u>xxxxxx</u>              | <u>xxxxxx</u>            |
| <u>710</u>                              | Claims Expense Allowance                              | xxxxxx                 | xxxxxx                     | xxxxxx                   |
| <u>811</u>                              | Ceding Expense Allowance                              | <u>xxxxxx</u>          | <u>xxxxxx</u>              | <u>xxxxxx</u>            |
|   | Total Deductions                                      | <u>\$xxxxxx</u>        | <u>\$xxxxxx</u>            | <u>\$xxxxxx</u>          |
|   | Net Underwriting Gain (Loss)                          | <u>\$xxxxxx</u>        | <u>\$xxxxxx</u>            | <u>\$xxxxxx</u>          |
| <u>Miscellaneous Income and Expense</u> |   |                        |                            |                          |
| <u>912</u>                              | Membership Fees                                       | \$xxxxxx               | \$xxxxxx                   | \$xxxxxx                 |
| <u>1013</u>                             | Assessments   | xxxxxx                 | xxxxxx                     | xxxxxx                   |
| <u>1114</u>                             | Interest Earned                                       | xxxxxx                 | xxxxxx                     | xxxxxx                   |
| <u>1215</u>                             | Other Income  | xxxxxx                 | xxxxxx                     | xxxxxx                   |
| <u>1316</u>                             | Miscellaneous Charges                                 | xxxxxx                 | xxxxxx                     | xxxxxx                   |
| <u>1417</u>                             | Other Expenses Incurred                               | <u>xxxxxx</u>          | <u>xxxxxx</u>              | <u>xxxxxx</u>            |
|   | Total Misc. Income & Expense                          | <u>\$xxxxxx</u>        | <u>\$xxxxxx</u>            | <u>\$xxxxxx</u>          |
|   | Net Operating Gain (Loss)                             | <u>\$xxxxxx</u>        | <u>\$xxxxxx</u>            | <u>\$xxxxxx</u>          |
| <u>Members' Equity Account</u>          |   |                        |                            |                          |
| <u>1518</u>                             | Members' Equity-Beginning of Period                   | \$xxxxxx               | \$xxxxxx                   | \$xxxxxx                 |
| <u>1619</u>                             | Net Operating Loss Distributed to<br>Member Companies | xxxxxx                 | xxxxxx                     | xxxxxx                   |
| <u>1720</u>                             | Net Operating Gain (Loss)                             | xxxxxx                 | xxxxxx                     | xxxxxx                   |
| <u>1821</u>                             | Loss Recoupment                                       | <u>xxxxxx</u>          | <u>xxxxxx</u>              | <u>xxxxxx</u>            |
| <u>1922</u>                             | Members' Equity-End of Period                         | <u>\$xxxxxx</u>        | <u>\$xxxxxx</u>            | <u>\$xxxxxx</u>          |