



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# QUARTERLY STATEMENT

AS OF JUNE 30, 2022  
OF THE CONDITION AND AFFAIRS OF THE

## American National County Mutual Insurance Company

NAIC Group Code 0408 0408 NAIC Company Code 29319 Employer's ID Number 43-0617723  
(Current) (Prior) Texas, State of Domicile or Port of Entry TX

Organized under the Laws of \_\_\_\_\_, State of Domicile or Port of Entry TX

Country of Domicile United States of America

Incorporated/Organized 04/24/1946 Commenced Business 05/01/1946

Statutory Home Office One Moody Plaza Galveston, TX, US 77550-7948  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office One Moody Plaza 409-766-6619  
(Street and Number) (Area Code) (Telephone Number)

Mail Address One Moody Plaza Galveston, TX, US 77550-7948  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records One Moody Plaza 409-766-6619  
(Street and Number) (Area Code) (Telephone Number)

Internet Website Address www.americannational.com

Statutory Statement Contact Jennifer Jo Duncan 518-431-5201  
(Name) (Area Code) (Telephone Number)

AVP, Corporate Secretary Ilse JeLayne Hoffman 518-431-5978  
(E-mail Address) (FAX Number)

### OFFICERS

President Timothy Allen Walsh Vice President, Finance & Assistant Treasurer Michelle Annette Gage  
AVP, Corporate Secretary Ilse JeLayne Hoffman Treasurer Deanna Denise Snedden

### OTHER

Larry Edward Linares, Assistant Treasurer

### DIRECTORS OR TRUSTEES

Brody Jason Merrill Cecilia Guerrero Pardo #  
John Frederick Simon Timothy Allen Walsh

State of Texas SS: \_\_\_\_\_  
County of Galveston

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.

Timothy A. Walsh Ilse JeLayne Hoffman Michelle Annette Gage  
President AVP, Corporate Secretary Vice President, Finance & Assistant Treasurer

Subscribed and sworn to before me this 22nd day of July, 2022  
John Ybarra

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



STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	5,578,923		5,578,923	6,077,417
2. Stocks:				
2.1 Preferred stocks .....				
2.2 Common stocks .....				
3. Mortgage loans on real estate:				
3.1 First liens .....				
3.2 Other than first liens.....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....				
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....				
4.3 Properties held for sale (less \$ ..... encumbrances) .....				
5. Cash (\$ .....1,665,115 ), cash equivalents (\$ .....1,005,720 ) and short-term investments (\$ ..... ) .....	2,670,835		2,670,835	12,491,050
6. Contract loans (including \$ ..... premium notes) .....				
7. Derivatives .....				
8. Other invested assets .....				
9. Receivables for securities .....				
10. Securities lending reinvested collateral assets .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	8,249,758		8,249,758	18,568,467
13. Title plants less \$ ..... charged off (for Title insurers only) .....				
14. Investment income due and accrued .....	74,411		74,411	79,322
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	(22,051)		(22,051)	11,468
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	4,595,271		4,595,271	4,584,033
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	3,503,832		3,503,832	
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 .....	58,777		58,777	58,777
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 .....	713,342		713,342	80,517
24. Health care (\$ ..... ) and other amounts receivable .....				
25. Aggregate write-ins for other than invested assets .....	776,215		776,215	105,205
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	17,949,555		17,949,555	23,487,789
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28. Total (Lines 26 and 27)	17,949,555		17,949,555	23,487,789
<b>DETAILS OF WRITE-INS</b>				
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 State Taxes .....	776,215		776,215	97,926
2502. Other assets .....				7,279
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	776,215		776,215	105,205

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ ..... )		
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses		
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)	2,812	(123)
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses))		
7.2 Net deferred tax liability		
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ .....7,701,604 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... for medical loss ratio rebate per the Public Health Service Act)		
10. Advance premium	92,559	176,278
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	10,059,059	7,616,411
13. Funds held by company under reinsurance treaties		
14. Amounts withheld or retained by company for account of others	48,183	49,472
15. Remittances and items not allocated	(4,343)	(13,860)
16. Provision for reinsurance (including \$ ..... certified)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	915,438	8,780,070
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities	89,066	133,101
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	11,202,774	16,741,349
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	11,202,774	16,741,349
29. Aggregate write-ins for special surplus funds		
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)	6,746,781	6,746,440
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... )		
36.2 ..... shares preferred (value included in Line 31 \$ ..... )		
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	6,746,781	6,746,440
38. Totals (Page 2, Line 28, Col. 3)	17,949,555	23,487,789
<b>DETAILS OF WRITE-INS</b>		
2501. Escheat funds held in trust	89,066	133,101
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)	89,066	133,101
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)		

## STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**STATEMENT OF INCOME**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>UNDERWRITING INCOME</b>			
1. Premiums earned:			
1.1 Direct (written \$ 17,872,783 )	18,015,772	21,375,150	41,195,113
1.2 Assumed (written \$ )			
1.3 Ceded (written \$ 17,871,943 )	18,014,932	21,373,830	41,193,793
1.4 Net (written \$ 840 )	840	1,320	1,320
<b>DEDUCTIONS:</b>			
2. Losses incurred (current accident year \$ ):			
2.1 Direct	11,502,926	12,709,706	21,990,760
2.2 Assumed			
2.3 Ceded	11,502,926	12,709,706	21,990,760
2.4 Net			
3. Loss adjustment expenses incurred			
4. Other underwriting expenses incurred	92,866	1,417,808	9,395,500
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	92,866	1,417,808	9,395,500
7. Net income of protected cells			
8. Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	(92,026)	(1,416,488)	(9,394,180)
<b>INVESTMENT INCOME</b>			
9. Net investment income earned	60,291	130,237	237,984
10. Net realized capital gains (losses) less capital gains tax of \$		1,265,491	9,186,771
11. Net investment gain (loss) (Lines 9 + 10)	60,291	1,395,728	9,424,755
<b>OTHER INCOME</b>			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ )			
13. Finance and service charges not included in premiums			
14. Aggregate write-ins for miscellaneous income	32,076	42,856	72,739
15. Total other income (Lines 12 through 14)	32,076	42,856	72,739
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	341	22,096	103,314
17. Dividends to policyholders			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	341	22,096	103,314
19. Federal and foreign income taxes incurred		474	655
20. Net income (Line 18 minus Line 19)(to Line 22)	341	21,622	102,659
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year	6,746,440	12,572,918	12,572,918
22. Net income (from Line 20)	341	21,622	102,659
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$		(82,519)	(5,826,689)
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax		(20,635)	(102,448)
27. Change in nonadmitted assets			
28. Change in provision for reinsurance			
29. Change in surplus notes			
30. Surplus (contributed to) withdrawn from protected cells			
31. Cumulative effect of changes in accounting principles			
32. Capital changes:			
32.1 Paid in			
32.2 Transferred from surplus (Stock Dividend)			
32.3 Transferred to surplus			
33. Surplus adjustments:			
33.1 Paid in			
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			
36. Change in treasury stock			
37. Aggregate write-ins for gains and losses in surplus			
38. Change in surplus as regards policyholders (Lines 22 through 37)	341	(81,532)	(5,826,478)
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	6,746,781	12,491,386	6,746,440
<b>DETAILS OF WRITE-INS</b>			
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)			
1401. Premium tax credit savings	32,076	42,856	42,856
1402. Other income miscellaneous			29,883
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	32,076	42,856	72,739
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page			
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)			

## STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	2,382,050	240,995	1,128,280
2. Net investment income .....	113,696	184,709	346,404
3. Miscellaneous income .....	32,076	42,856	72,739
4. Total (Lines 1 to 3) .....	2,527,822	468,560	1,547,423
5. Benefit and loss related payments .....	3,503,832		
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
7. Commissions, expenses paid and aggregate write-ins for deductions .....	89,931	1,419,918	9,452,935
8. Dividends paid to policyholders .....			
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....		474	655
10. Total (Lines 5 through 9) .....	3,593,763	1,420,392	9,453,590
11. Net cash from operations (Line 4 minus Line 10) .....	(1,065,941)	(951,832)	(7,906,166)
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	450,000	350,000	399,180
12.2 Stocks .....		1,830,356	12,458,896
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 .....			
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	450,000	2,180,356	12,858,076
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....			
13.2 Stocks .....		1,824	18,317
13.3 Mortgage loans .....			
13.4 Real estate .....			
13.5 Other invested assets .....			
13.6 Miscellaneous applications .....			
13.7 Total investments acquired (Lines 13.1 to 13.6) .....		1,824	18,317
14. Net increase (or decrease) in contract loans and premium notes .....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	450,000	2,178,532	12,839,759
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....			
16.2 Capital and paid in surplus, less treasury stock .....			
16.3 Borrowed funds .....		(501,827)	(501,827)
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....			
16.5 Dividends to stockholders .....			
16.6 Other cash provided (applied) .....	(9,204,274)	598,596	7,623,858
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	(9,204,274)	96,770	7,122,032
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(9,820,215)	1,323,470	12,055,624
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	12,491,050	435,425	435,425
19.2 End of period (Line 18 plus Line 19.1) .....	2,670,835	1,758,895	12,491,050

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

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## NOTES TO FINANCIAL STATEMENTS

**NOTE 1 Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

The financial statements of American National County Mutual Insurance Company (the Company) are presented on the basis of accounting practices prescribed or permitted by the State of Texas Department of Insurance.

The Texas Department of Insurance recognizes only statutory accounting practices prescribed by the state of Texas for determining and reporting the financial condition and results of operations of an insurance company for determining its solvency under the Texas Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Texas. The state may adopt certain prescribed accounting practices that differ from those found in NAIC SAP.

	SSAP #	F/S Page	F/S Line #	2022	2021
NET INCOME					
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 341	\$ 102,659
(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	\$ 341	\$ 102,659
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 6,746,781	\$ 6,746,440
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 6,746,781	\$ 6,746,440

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

No significant change.

**C. Accounting Policy**

1) No significant change.

2) The Company has no investment in mandatory convertible securities or SVO identified investments. Bonds not backed by other loans, with NAIC ratings of 3-6, are stated at the lower of amortized cost or market value; all other NAIC ratings are stated at amortized cost using scientific interest method.

3-5) No significant change.

6) Loan-backed securities are generally stated at amortized cost using the retrospective method, except for those with NAIC designation 3-6 which are stated at lower of amortized cost or fair value.

7-13) No significant change.

**D. Going Concern**

Based upon its evaluation of relevant conditions and events, management did not have substantial doubt about the Company's ability to continue as a going concern.

**NOTE 2 Accounting Changes and Corrections of Errors**

No significant change.

**NOTE 3 Business Combinations and Goodwill**

No significant change.

**NOTE 4 Discontinued Operations**

No significant change.

**NOTE 5 Investments****A. Mortgage Loans, including Mezzanine Real Estate Loans**

No significant change.

**B. Debt Restructuring**

No significant change.

**C. Reverse Mortgages**

No significant change.

**D. Loan-Backed Securities**

(1) Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from independent third party pricing services or internal estimates.

(2) At June 30, 2022, the Company did not have any securities within the scope of SSAP No. 43R, Revised Statutory Accounting for Loan-backed and Structured Securities, with a recognized other-than-temporary impairment due to the intent to sell or an inability or lack of intent to retain the security for a period of time sufficient to recover the amortized cost basis.

(3) At June 30, 2022, the Company did not hold any loan-backed and structured securities with a recognized credit-related other-than-temporary impairment.

(4)

a) The aggregate amount of unrealized losses:

1. Less than 12 Months
2. 12 Months or Longer

b) The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months
2. 12 Months or Longer

## NOTES TO FINANCIAL STATEMENTS

(5) All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether an other-than-temporary impairment should be recognized. As of June 30, 2022, the Company believes it has the intent and ability to hold securities long enough to allow the cost basis of these securities to be recovered. Although the investment securities above did not meet management's criteria for other-than-temporary impairment at this time, it is possible that future events or information could cause them to conclude that declines in value are other-than-temporary.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions  
Not applicable - The Company has no repurchase agreements or securities lending transactions.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing  
Not applicable - The Company has no repurchase agreements transactions.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing  
Not applicable - The Company has no reverse repurchase agreements transactions.

H. Repurchase Agreements Transactions Accounted for as a Sale  
Not applicable - The Company has no repurchase agreements transactions.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale  
Not applicable - The Company has no reverse repurchase agreements transactions.

J. Real Estate  
No significant change.

K. Low Income Housing tax Credits (LIHTC)  
No significant change.

L. Restricted Assets  
No significant change.

M. Working Capital Finance Investments  
Not applicable - The Company has no working capital finance investments.

N. Offsetting and Netting of Assets and Liabilities  
Not applicable - The Company has no offsetting and netting of assets and liabilities.

O. 5GI Securities  
No significant change.

P. Short Sales  
No significant change.

Q. Prepayment Penalty and Acceleration Fees  
No significant change.

R. Reporting Entity's Share of Cash Pool by Asset Type  
Not applicable - The Company did not participate in any cash pools.

**NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies**  
No significant change.

**NOTE 7 Investment Income**  
No significant change.

**NOTE 8 Derivative Instruments**  
Not applicable - The Company has no investments in derivative instruments.

**NOTE 9 Income Taxes**  
No significant change.

**NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

A-F No significant change

G. The Company is managed by American National Insurance Company, a life insurance company, domiciled in the state of Texas ("ANICO"). ANICO is owned by American National Group Inc., a Delaware corporation ("ANAT").

Brookfield Asset Management Reinsurance Partners Ltd. ("Brookfield Reinsurance") became the ultimate parent as a result of the completed acquisition with ANAT on May 25, 2022.

H-O No significant change

**NOTE 11 Debt**

A. No significant change.

B. FHLB (Federal Home Loan Bank) Agreements  
Not applicable - The Company has no Federal Home Loan Bank agreements.

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

A. Defined Benefit Plan  
The Company does not participate in a defined benefit plan.

B. Investment Strategies for Plan Assets  
No significant change.

C. The fair value of each class of plan assets  
No significant change.

D. Basis of Long Term Rate of Return on Plan Assets  
No significant change.

E. Defined Contribution Plan  
No significant change.

## NOTES TO FINANCIAL STATEMENTS

- F. Multiemployer Plans  
No significant change.
- G. Consolidated/Holding Company Plans  
No significant change.
- H. Postemployment Benefits and Compensated Absences  
No significant change.
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)  
No significant change.

**NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**  
No significant change.

**NOTE 14 Liabilities, Contingencies and Assessments**  
No significant change.

**NOTE 15 Leases**  
No significant change.

**NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk**  
No significant change.

**NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**  
Not applicable – The Company had no sales, transfers, or servicing of financial assets and extinguishment of liabilities during the reporting periods.

**NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans**  
No significant change.

**NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**  
No significant change.

**NOTE 20 Fair Value Measurements**

A.

(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					
Total assets at fair value/NAV	\$ -	\$ -	\$ -	\$ -	\$ -

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
b. Liabilities at fair value					
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

(2) There were no Level 3 securities for the period ending June 30, 2022.

(3) Transfers between levels, if any, are recognized at the beginning of the reporting period.

(4) The market values of equity and debt securities are obtained by various pricing services. There has been no change in the valuation techniques and related inputs.

(5) The Company does not own any derivative securities.

B.

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability. A fair value hierarchy is used to determine fair value based on a hypothetical transaction at the measurement date from the perspective of a market participant. An asset or liability's classification within the fair value hierarchy is based on the lowest level of significant input to its valuation. The input levels are defined as follows:

Level 1 - Unadjusted quoted prices in active markets for identical assets or liabilities. The Company defines active markets based on average trading volume for equity securities. The size of the bid/ask spread is used as an indicator of market activity for fixed maturity securities.

Level 2 - Quoted prices in markets that are not active or inputs that are observable directly or indirectly. Level 2 inputs include quoted prices for similar assets or liabilities other than quoted prices in Level 1; quoted prices in markets that are not active; or other inputs that are observable or can be derived principally from or corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 - Unobservable inputs that are supported by little or no market activity and are significant to the fair value of the assets or liabilities. Unobservable inputs reflect the Company's own assumptions about the assumptions that market participants would use in pricing the asset or liability. Level 3 assets and liabilities include financial instruments whose values are determined using pricing models and third-party evaluation, as well as instruments for which the determination of fair value requires significant management judgment or estimation.

The Company has evaluated the various types of securities in its investment portfolio to determine an appropriate fair value hierarchy level based upon trading activity and the observability of market inputs. Based on the results of this evaluation and investment class analysis, each price was classified into Level 1, 2, or 3.

Equity and fixed income securities are priced by independent pricing services. The pricing service utilizes market quotations for fixed maturity securities that have quoted prices in active markets. Since fixed maturities generally do not trade on a daily basis, the pricing service prepares estimates of fair value measurements for these securities using its proprietary pricing applications, which include available relevant market information, benchmark curves, benchmarking of like securities, sector groupings and matrix pricing. Additionally, the pricing service uses an Option Adjusted Spread model to develop prepayment and interest rate scenarios.

## NOTES TO FINANCIAL STATEMENTS

The pricing service evaluates each asset class based on relevant market information, relevant credit information, perceived market movements and sector news. The market inputs utilized in the pricing evaluation, listed in the approximate order of priority, include benchmark yields, reported trades, broker/dealer quotes, issuer spreads, two-sided markets, benchmark securities, bids, offers, reference data, and economic events. The extent of the use of each market input depends on the asset class and the market conditions. Depending on the security, the priority of the use of inputs may change or some market inputs may not be relevant. For some securities additional inputs may be necessary.

The Company has reviewed the inputs and methodology used by the pricing service and the techniques applied by the pricing service to produce quotes that represent the fair value of a specific security. The review of the pricing service's methodology confirms the service is utilizing information from organized transactions or a technique that represents a market participant's assumptions. The Company does not adjust quotes received by the pricing service.

The pricing service utilized by the Company has indicated that they will only produce an estimate of fair value if there is objectively verifiable information available. If the pricing service discontinues pricing an investment, the Company would be required to produce an estimate of fair value using some of the same methodologies as the pricing service, but would have to make assumptions for market-based inputs that are unavailable due to market conditions.

The fair value estimates of most fixed maturity investments including municipal bonds are based on observable market information rather than market quotes. Accordingly, the estimates of fair value for such fixed maturities provided by the pricing service are included in the amount disclosed in Level 2 of the hierarchy.

Additionally, the Company holds a small amount of fixed maturities that have characteristics that make them unsuitable for matrix pricing. For these fixed securities, a quote from a broker (typically a market maker) is obtained. Due to the disclaimers on the quotes that indicate that the price is indicative only, the Company includes these fair value estimates in Level 3. The pricing of certain private placement debt also includes significant non-observable inputs, the internally determined credit rating of the security and an externally provided credit spread, and are classified in Level 3.

For public common stocks, the Company receives prices from a nationally recognized pricing service that are based on observable market transactions and these securities are disclosed in Level 1. For certain preferred stock held, current market quotes in active markets are unavailable. In these instances, the Company receives an estimate of fair value from the pricing service that provides fair value estimates for the fixed maturity securities. The service utilizes some of the same methodologies to price the preferred stocks as it does for the fixed maturities. These estimates for equity securities are disclosed in Level 2.

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 5,570,010	\$ 5,578,923	\$ 48,422	\$ 5,521,588			

D. Not Practicable to Estimate Fair Value

As of June 30, 2022, there were no financial instruments for which it is not practicable for the Company to estimate their fair value.

E. Investments measured using Net Asset Value

The Company had no investments measured using Net Asset Value.

**NOTE 21 Other Items**

No significant change.

**NOTE 22 Events Subsequent**

No significant change.

**NOTE 23 Reinsurance**

No significant change.

**NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination**

The Company's CA\$HBACK program refunds the policyholder 25% of the qualifying auto and homeowner premiums if the policyholder remains claim free for a period of three years. The Company estimates retrospective premium adjustments by the application of the historical ratio of return premium to original qualifying CA\$HBACK premium. This ratio is applied to the qualifying eligible CA\$HBACK premium to determine future retrospective return premium. The Company records accrued retrospective return premium as an adjustment to earned premiums.

**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**

- A. Net incurred losses and loss adjustment expenses attributable to insured events of prior years are unchanged in 2022. This is because all ANCMC loss and loss adjustment liabilities are ceded. Original direct estimates are increased or decreased as additional information becomes known regarding individual claims and such adjustments are included in current operations.
- B. There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

**NOTE 26 Intercompany Pooling Arrangements**

No significant change.

**NOTE 27 Structured Settlements**

No significant change.

**NOTE 28 Health Care Receivables**

No significant change.

**NOTE 29 Participating Policies**

No significant change.

**NOTE 30 Premium Deficiency Reserves**

No significant change.

**NOTE 31 High Deductibles**

No significant change.

**NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**

No significant change.

**NOTE 33 Asbestos/Environmental Reserves**

No significant change.

**NOTE 34 Subscriber Savings Accounts**

## NOTES TO FINANCIAL STATEMENTS

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No significant change.

**NOTE 35 Multiple Peril Crop Insurance**

No significant change.

**NOTE 36 Financial Guaranty Insurance**

Not applicable – The Company does not issue financial guaranty insurance.

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES

### GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [ X ]
- 1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [ X ]
- 2.2 If yes, date of change: .....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [ X ] No [ ]  
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [ X ] No [ ]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.  
Parent company American National Group, Inc. was acquired by Brookfield Asset Management Reinsurance Partners Ltd. on 5/25/2022
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? ..... Yes [ X ] No [ ]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. .... 1837429
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [ X ]
- 4.2 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 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [ X ] N/A [ ]  
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2020
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2020
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 06/10/2022
- 6.4 By what department or departments?  
Texas Department of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] N/A [ X ]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ ] No [ ] N/A [ X ]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ X ]
- 7.2 If yes, give full information:
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ X ] No [ ]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
ANICO Financial Services, Inc .....	Galveston, Texas .....	NO	NO	NO	YES

## GENERAL INTERROGATORIES

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

### FINANCIAL

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

### INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [ X ]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ .....
13. Amount of real estate and mortgages held in short-term investments: ..... \$ .....
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [ ] No [ X ]
- 14.2 If yes, please complete the following:
- |   | 1<br>Prior Year-End<br>Book/Adjusted<br>Carrying Value | 2<br>Current Quarter<br>Book/Adjusted<br>Carrying Value |
|---|--|---|
| 14.21 Bonds .....   | \$ .....   | \$ .....  |
| 14.22 Preferred Stock .....   | \$ .....   | \$ .....  |
| 14.23 Common Stock .....  | \$ .....   | \$ .....  |
| 14.24 Short-Term Investments .....  | \$ .....   | \$ .....  |
| 14.25 Mortgage Loans on Real Estate .....   | \$ .....   | \$ .....  |
| 14.26 All Other .....   | \$ .....   | \$ .....  |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) ..... | \$ .....   | \$ .....  |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....                       | \$ .....   | \$ .....  |
- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [ X ]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ] N/A [ X ]  
If no, attach a description with this statement.
16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. .... \$ .....
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. .... \$ .....
- 16.3 Total payable for securities lending reported on the liability page. .... \$ .....

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company  
**GENERAL INTERROGATORIES**

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

1 Name of Custodian(s)	2 Custodian Address
Moody National Bank .....	2302 Post Office Street, Galveston, Texas 77550 .....

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

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

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

- 17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Anne LeMire .....	I.....
Scott Brast .....	I.....

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

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

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

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed

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

- 18.2 If no, list exceptions:

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

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

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:  
a. The shares were purchased prior to January 1, 2019.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.  
d. The fund only or predominantly holds bonds in its portfolio.  
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.  
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.  
Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [ X ]

# GENERAL INTERROGATORIES

## PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? ..... Yes [ ] No [ ] N/A [ X ]  
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? ..... Yes [ ] No [ X ]  
If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? ..... Yes [ ] No [ X ]

3.2 If yes, give full and complete information thereto.

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? ..... Yes [ ] No [ X ]

4.2 If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
TOTAL										

5. Operating Percentages:

5.1 A&H loss percent ..... %

5.2 A&H cost containment percent ..... %

5.3 A&H expense percent excluding cost containment expenses ..... %

6.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

6.2 If yes, please provide the amount of custodial funds held as of the reporting date ..... \$.....

6.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

6.4 If yes, please provide the balance of the funds administered as of the reporting date ..... \$.....

7. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [ ] No [ X ]

7.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ X ]

### SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
<b>NONE</b>						

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Current Year to Date - Allocated by States and Territories

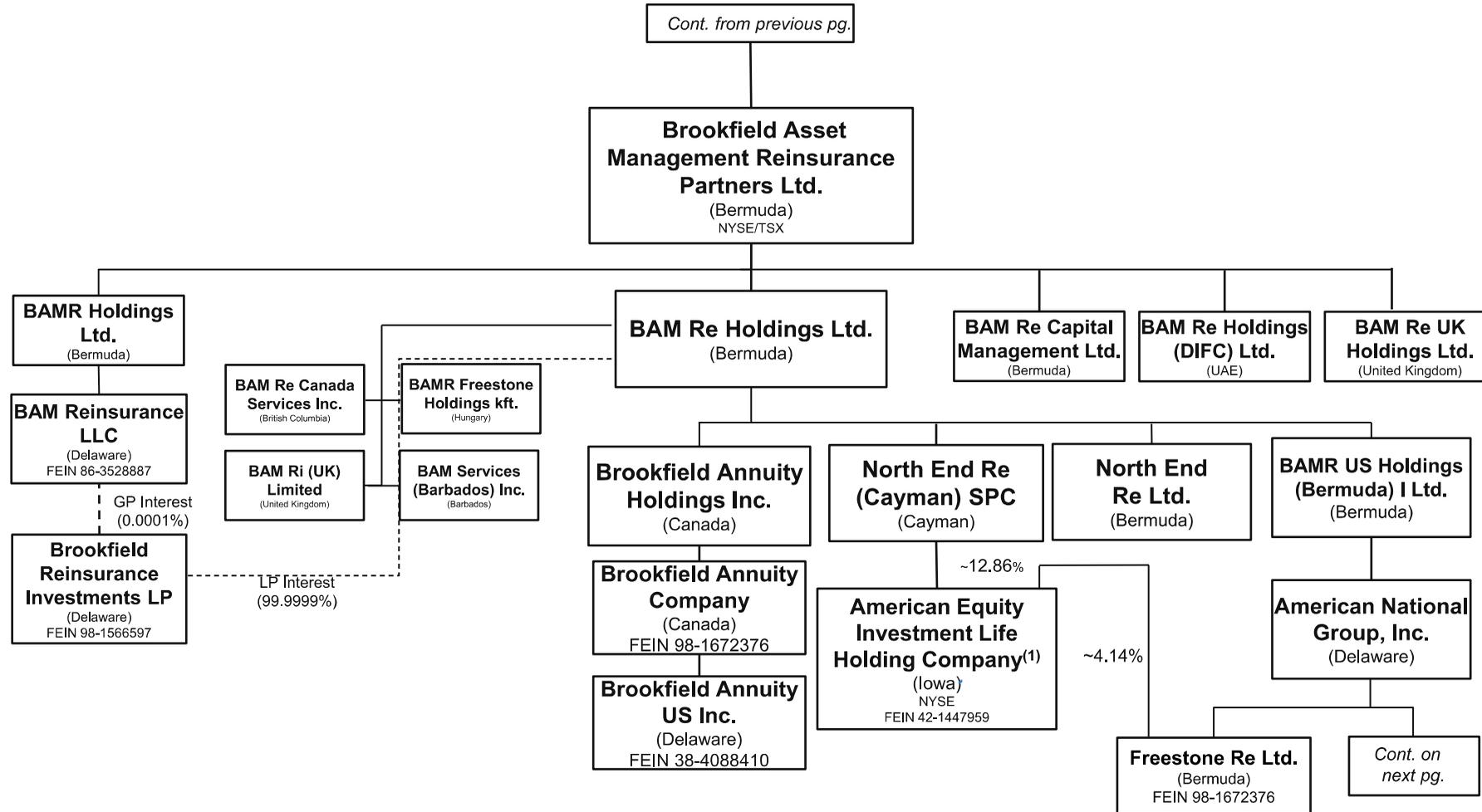
States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama .....AL	N						
2. Alaska .....AK	N						
3. Arizona .....AZ	N						
4. Arkansas .....AR	N						
5. California .....CA	N						
6. Colorado .....CO	N						
7. Connecticut .....CT	N						
8. Delaware .....DE	N						
9. District of Columbia .....DC	N						
10. Florida .....FL	N						
11. Georgia .....GA	N						
12. Hawaii .....HI	N						
13. Idaho .....ID	N						
14. Illinois .....IL	N						
15. Indiana .....IN	N						
16. Iowa .....IA	N						
17. Kansas .....KS	N						
18. Kentucky .....KY	N						
19. Louisiana .....LA	N						
20. Maine .....ME	N						
21. Maryland .....MD	N						
22. Massachusetts .....MA	N						
23. Michigan .....MI	N						
24. Minnesota .....MN	N						
25. Mississippi .....MS	N						
26. Missouri .....MO	N						
27. Montana .....MT	N						
28. Nebraska .....NE	N						
29. Nevada .....NV	N						
30. New Hampshire .....NH	N						
31. New Jersey .....NJ	N						
32. New Mexico .....NM	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	L	17,872,783	20,884,824	9,641,421	10,781,911	13,394,057	13,354,671
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. Totals	XXX	17,872,783	20,884,824	9,641,421	10,781,911	13,394,057	13,354,671
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:

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG .....1  
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI) .....  
 D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile .....  
 R - Registered - Non-domiciled RRGs .....  
 Q - Qualified - Qualified or accredited reinsurer .....  
 N - None of the above - Not allowed to write business in the state .....56

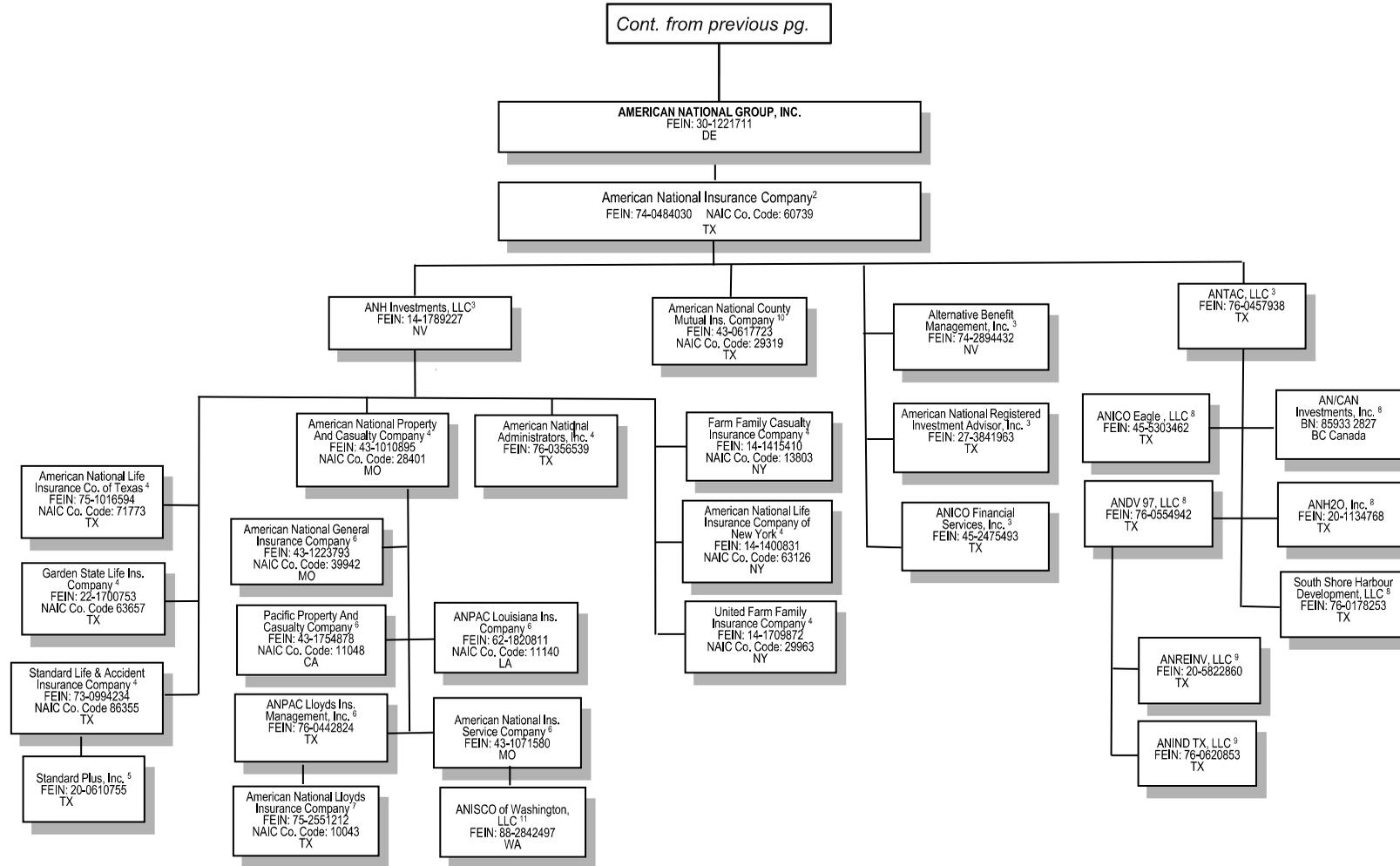


**Abbreviated Organizational Chart (continued)**



(1) On June 15, 2022, North End Re (Cayman) SPC (“North End Cayman”) transferred approximately 4.14% of the voting securities of American Equity Investment Life Holding Company (“AEL”) to Freestone Re Ltd. (“Freestone Re”). As a result of this restructuring, North End Cayman and Freestone Re own approximately 12.86% and 4.14%, respectively, of the voting securities of AEL.

Abbreviated Organizational Chart (continued)<sup>1</sup>



(1) In addition to the entities shown in this chart, American National Insurance Company owns a direct or indirect interest in certain other entities. Such ownership is primarily in connection with real estate investments. In addition, American National Insurance Company owns several "shell" companies, which are currently inactive.

(2) 100% owned by American National Group, Inc.

(3) 100% owned by American National Insurance Company.

(4) 100% owned by ANH Investments, LLC.

(5) 100% owned by Standard Life and Accident Insurance Company.

(6) 100% owned by American National Property And Casualty Company.

(7) Not a subsidiary company, but managed by ANPAC Lloyds Insurance Management, Inc.

(8) 100% owned by ANTAC, LLC.

(9) 100% owned by ANDV 97, LLC.

(10) Not a subsidiary company but managed by American National Insurance Company.

(11) 100% owned by American National Insurance Service Company.

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0408	American National Financial Group	60739	74-0484030	1343722	0		American National Insurance Company	TX	IA	American National Group, Inc.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	71773	75-1016594	1343731	0		American National Life Insurance Company of Texas	TX	IA	ANH Investments, LLC.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	86355	73-0994234	0	0		Standard Life and Accident Insurance Company	TX	IA	ANH Investments, LLC.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	63657	22-1700753	0	0		Garden State Life Insurance Company	TX	IA	ANH Investments, LLC.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	63126	14-1400831	0	0		American National Life Insurance Company of New York	NY	IA	ANH Investments, LLC.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	13803	14-1415410	0	0		Farm Family Casualty Insurance Company	NY	IA	ANH Investments, LLC.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	29963	14-1709872	0	0		United Farm Family Insurance Company	NY	IA	ANH Investments, LLC.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	28401	43-1010895	1343946	0		American National Property and Casualty Company	MO	IA	ANH Investments, LLC.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	YES	1
.0408	American National Financial Group	39942	43-1223793	0	0		American National General Insurance Company	MO	IA	American National Property and Casualty Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	29319	43-0617723	0	0		American National County Mutual Insurance Company	TX	RE	American National Insurance Company	Management	0.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	10043	75-2551212	0	0		American National Lloyds Insurance Company	TX	IA	ANPAC Lloyds Insurance Management, Inc.	Management	0.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	11048	43-1754878	0	0		Pacific Property and Casualty Company	CA	IA	American National Property and Casualty Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
.0408	American National Financial Group	11140	62-1820811	0	0		ANPAC Louisiana Insurance Company	LA	IA	American National Property and Casualty Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	30-1221711	0	0		American National Group, Inc.	DE	NIA	BAMR US Holdings (Bermuda) I Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	87-3278551	0	0		ANH Investments, LLC.	NV	NIA	American National Insurance Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	76-0457938	0	0		ANTAC, LLC	TX	NIA	American National Insurance Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	27-3841963	0	1518195		American National Registered Investment Advisor, Inc.	TX	NIA	American National Insurance Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	74-2894432	0	0		Alternative Benefit Management, Inc.	NV	NIA	American National Insurance Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	45-2475493	0	0		ANICO Financial Services, Inc.	TX	NIA	American National Insurance Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	76-0356539	0	0		American National Administrators, Inc.	TX	NIA	ANH Investments, LLC.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	43-1071580	0	0		American National Insurance Service Company	MO	NIA	American National Property and Casualty Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	88-2842497	0	0		ANISCO of Washington, LLC	WA	NIA	American National Insurance Service Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	76-0442824	0	0		ANPAC Lloyds Insurance Management, Inc.	TX	NIA	American National Property and Casualty Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	76-0620853	0	0		ANIND TX, LLC	TX	NIA	ANDV 97, LLC	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	20-5822860	0	0		ANREINW, LLC	TX	NIA	ANDV 97, LLC	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	76-0554942	0	0		ANDV 97, LLC	TX	NIA	ANTAC, LLC	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1
		00000	45-5303462	0	0		ANICO Eagle, LLC	TX	NIA	ANTAC, LLC	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
		.00000	85-9332827	0	0		AN/CAN Investments, Inc.	.CAN	.NIA	ANTAC, LLC	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000	20-1134768	0	0		ANH20, Inc.	.TX	.NIA	ANTAC, LLC	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000	98-1672376	0	0		Freestone Re Ltd.	.BMJ	.IA	American National Group, Inc.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000	76-0178253	0	0		South Shore Harbour Development, LLC	.TX	.NIA	ANTAC, LLC	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000	20-0610755	0	0		Standard Plus, Inc.	.TX	.NIA	Standard Life and Accident Insurance Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAMR US Holdings (Bermuda) I Ltd.	.BMJ	.NIA	BAM Re Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAM Re Holdings Ltd.	.BMJ	.NIA	Brookfield Asset Management Reinsurance Partners Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	1837429	NYSE, TSX	Brookfield Asset Management Reinsurance Partners Ltd.	.BMJ	.NIA	BAM Re Partners Trust	Other	0.000	Bruce Flatt and Brian Kingston	.NO	.2
		.00000		0	0		BAM Re Partners Trust	.BMJ	.NIA	BAM Re Trustee Ltd.	Management	0.000	Bruce Flatt and Brian Kingston	.NO	
		.00000		0	0		BAM Re Trustee Ltd.	.BMJ	.NIA	Partners FC Ltd.	Ownership	40.000	Bruce Flatt	.NO	
		.00000		0	0		BAM Re Trustee Ltd.	.BMJ	.NIA	Partners BK Ltd.	Ownership	40.000	Brian Kingston	.NO	
		.00000		0	0		Partners FC Ltd.	.BMJ	.NIA	Partners FC II Ltd.	Ownership	100.000	Bruce Flatt	.NO	
		.00000		0	0		Partners FC II Ltd.	.BMJ	.NIA	Bruce Flatt	Ownership	100.000	Bruce Flatt	.NO	
		.00000		0	0		Partners BK Ltd.	.BMJ	.NIA	Brian Kingston	Ownership	100.000	Brian Kingston	.NO	
		.00000	98-1566597	0	0		Brookfield Reinsurance Investments LP	.DE	.NIA	BAM Reinsurance LLC	Management	0.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000	86-3528887	0	0		BAM Reinsurance LLC	.DE	.NIA	BAMR Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAMR Holdings Ltd.	.BMJ	.NIA	Brookfield Asset Management Reinsurance Partners Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAM Ri (UK) Limited	.GBR	.NIA	BAM Re Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAM Re Canada Services Inc.	.CAN	.NIA	BAM Re Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAM Services (Barbados) Inc.	.BRB	.NIA	BAM Re Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAMR Freestone Holdings kft.	.HUN	.NIA	BAM Re Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		Brookfield Annuity Holdings Inc.	.CAN	.NIA	BAM Re Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		North End Re (Cayman) SPC	.CYM	.IA	BAM Re Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		North End Re Ltd.	.BMJ	.IA	BAM Re Holdings Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000	38-4088410	0	0		Brookfield Annuity US Inc.	.DE	.IA	Brookfield Annuity Company	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000	98-4672376	0	0		Brookfield Annuity Company	.CAN	.IA	Brookfield Annuity Holdings Inc.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
.2658	American Equity Investment Group	.00000	42-1447959	3981379	1039828	NYSE	American Equity Investment Life Holding Company	.IA	.NIA	North End Re (Cayman) SPC	Ownership	12.860	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAM Re Capital Management Ltd.	.BMJ	.NIA	Brookfield Asset Management Reinsurance Partners Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1
		.00000		0	0		BAM Re Holdings (DIFC) Ltd.	.APE	.NIA	Brookfield Asset Management Reinsurance Partners Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	.NO	.1

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
		00000		0	0		BAM Re UK Holdings Ltd.	GBR	NIA	Brookfield Asset Management Reinsurance Partners Ltd.	Ownership	100.000	Brookfield Asset Management Reinsurance Partners Ltd.	NO	1

Asterisk	Explanation
1	Bruce Flatt and Brian Kingston are also ultimate controlling persons.
2	BAM Re Partners Trust owns 100% of the Class B Limited Voting Shares of Brookfield Asset Management Reinsurance Partners Ltd.

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**PART 1 - LOSS EXPERIENCE**

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire				
2.1 Allied Lines				
2.2 Multiple peril crop				
2.3 Federal flood				
2.4 Private crop				
2.5 Private flood				
3. Farmowners multiple peril				
4. Homeowners multiple peril				
5. Commercial multiple peril				
6. Mortgage guaranty				
8. Ocean marine				
9. Inland marine	840			
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake				
13.1 Comprehensive (hospital and medical) individual				
13.2 Comprehensive (hospital and medical) group				
14. Credit accident and health				
15.1 Vision only				
15.2 Dental only				
15.3 Disability income				
15.4 Medicare supplement				
15.5 Medicaid Title XIX				
15.6 Medicare Title XVIII				
15.7 Long-term care				
15.8 Federal employees health benefits plan				
15.9 Other health				
16. Workers' compensation				
17.1 Other liability - occurrence				
17.2 Other liability - claims-made				
17.3 Excess workers' compensation				
18.1 Products liability - occurrence				
18.2 Products liability - claims-made				
19.1 Private passenger auto no-fault (personal injury protection)	171,219	157,302	91.9	32.9
19.2 Other private passenger auto liability	6,372,383	3,785,353	59.4	67.2
19.3 Commercial auto no-fault (personal injury protection)	11,327	18,000	158.9	(34.9)
19.4 Other commercial auto liability	587,497	1,586,918	270.1	107.7
21.1 Private passenger auto physical damage	5,261,256	3,851,938	73.2	79.0
21.2 Commercial auto physical damage	265,360	385,661	145.3	68.6
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft				
27. Boiler and machinery				
28. Credit	5,345,890	1,717,754	32.1	35.8
29. International				
30. Warranty				
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business				
35. Totals	18,015,772	11,502,926	63.8	59.5
<b>DETAILS OF WRITE-INS</b>				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)				

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**PART 2 - DIRECT PREMIUMS WRITTEN**

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire .....			
2.1	Allied Lines .....			
2.2	Multiple peril crop .....			
2.3	Federal flood .....			
2.4	Private crop .....			
2.5	Private flood .....			
3.	Farmowners multiple peril .....			
4.	Homeowners multiple peril .....			
5.	Commercial multiple peril .....			
6.	Mortgage guaranty .....			
8.	Ocean marine .....			
9.	Inland marine .....	240	840	1,320
10.	Financial guaranty .....			
11.1	Medical professional liability - occurrence .....			
11.2	Medical professional liability - claims-made .....			
12.	Earthquake .....			
13.1	Comprehensive (hospital and medical) individual .....			
13.2	Comprehensive (hospital and medical) group .....			
14.	Credit accident and health .....			
15.1	Vision only .....			
15.2	Dental only .....			
15.3	Disability income .....			
15.4	Medicare supplement .....			
15.5	Medicaid Title XIX .....			
15.6	Medicare Title XVIII .....			
15.7	Long-term care .....			
15.8	Federal employees health benefits plan .....			
15.9	Other health .....			
16.	Workers' compensation .....			
17.1	Other liability - occurrence .....			
17.2	Other liability - claims-made .....			
17.3	Excess workers' compensation .....			
18.1	Products liability - occurrence .....			
18.2	Products liability - claims-made .....			
19.1	Private passenger auto no-fault (personal injury protection) .....	71,810	164,576	179,182
19.2	Other private passenger auto liability .....	2,732,405	6,190,419	6,829,622
19.3	Commercial auto no-fault (personal injury protection) .....	10,134	14,547	9,274
19.4	Other commercial auto liability .....	395,306	636,375	568,973
21.1	Private passenger auto physical damage .....	2,295,439	5,192,555	5,403,752
21.2	Commercial auto physical damage .....	224,926	381,981	259,858
22.	Aircraft (all perils) .....			
23.	Fidelity .....			
24.	Surety .....			
26.	Burglary and theft .....			
27.	Boiler and machinery .....			
28.	Credit .....	2,568,148	5,291,490	7,632,843
29.	International .....			
30.	Warranty .....			
31.	Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business .....			
35.	Totals	8,298,409	17,872,783	20,884,824
<b>DETAILS OF WRITE-INS</b>				
3401.	.....			
3402.	.....			
3403.	.....			
3498.	Summary of remaining write-ins for Line 34 from overflow page .....			
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**PART 3 (000 omitted)**

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13	
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2022 Loss and LAE Payments on Claims Reported as of Prior Year-End	2022 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2022 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)	
1. 2019 + Prior .....														
2. 2020 .....														
3. Subtotals 2020 + Prior .....														
4. 2021 .....														
5. Subtotals 2021 + Prior .....														
6. 2022 .....	XXX	XXX	XXX	XXX			XXX				XXX	XXX	XXX	
7. Totals .....														
8. Prior Year-End Surplus As Regards Policyholders	6,746											Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
												1.	2.	3.
												Col. 13, Line 7 As a % of Col. 1 Line 8		
												4.		

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

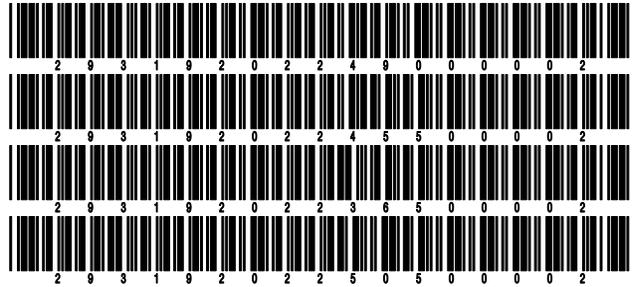
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? .....	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? .....	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....	NO
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....	NO
<b>AUGUST FILING</b>	
5. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter. ....	YES

Explanations:

- 1.
- 2.
- 3.
- 4.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]
2. Supplement A to Schedule T [Document Identifier 455]
3. Medicare Part D Coverage Supplement [Document Identifier 365]
4. Director and Officer Supplement [Document Identifier 505]



**OVERFLOW PAGE FOR WRITE-INS**

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**SCHEDULE A - VERIFICATION**

Real Estate

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

**NONE**

**SCHEDULE B - VERIFICATION**

Mortgage Loans

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

**NONE**

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

**NONE**

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	6,077,417	17,203,472
2. Cost of bonds and stocks acquired .....		18,317
3. Accrual of discount .....	135	265
4. Unrealized valuation increase (decrease) .....		(7,375,336)
5. Total gain (loss) on disposals .....		9,188,238
6. Deduct consideration for bonds and stocks disposed of .....	450,000	12,858,076
7. Deduct amortization of premium .....	48,629	97,995
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		1,468
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	5,578,923	6,077,417
12. Deduct total nonadmitted amounts .....		
13. Statement value at end of current period (Line 11 minus Line 12)	5,578,923	6,077,417

STATEMENT AS OF JUNE 30, 2022 OF THE American National County Mutual Insurance Company

**SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a) .....	5,603,100			(24,177)	5,603,100	5,578,923		6,077,417
2. NAIC 2 (a) .....								
3. NAIC 3 (a) .....								
4. NAIC 4 (a) .....								
5. NAIC 5 (a) .....								
6. NAIC 6 (a) .....								
7. Total Bonds	5,603,100			(24,177)	5,603,100	5,578,923		6,077,417
<b>PREFERRED STOCK</b>								
8. NAIC 1 .....								
9. NAIC 2 .....								
10. NAIC 3 .....								
11. NAIC 4 .....								
12. NAIC 5 .....								
13. NAIC 6 .....								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	5,603,100			(24,177)	5,603,100	5,578,923		6,077,417

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$ ..... ; NAIC 2 \$ ..... ; NAIC 3 \$ ..... NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

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Schedule DA - Part 1 - Short-Term Investments

**N O N E**

Schedule DA - Verification - Short-Term Investments

**N O N E**

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

**N O N E**

Schedule DB - Part B - Verification - Futures Contracts

**N O N E**

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

**N O N E**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

**N O N E**

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of  
Derivatives

**N O N E**

**SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	6,640,193	29,830
2. Cost of cash equivalents acquired .....	2,610,181	13,357,207
3. Accrual of discount .....		
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....		
6. Deduct consideration received on disposals .....	8,244,654	6,746,844
7. Deduct amortization of premium .....		
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	1,005,720	6,640,193
11. Deduct total nonadmitted amounts .....		
12. Statement value at end of current period (Line 10 minus Line 11)	1,005,720	6,640,193

Schedule A - Part 2 - Real Estate Acquired and Additions Made

**N O N E**

Schedule A - Part 3 - Real Estate Disposed

**N O N E**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

**N O N E**

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

**N O N E**

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

**N O N E**

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

**N O N E**

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired

**N O N E**

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of

**N O N E**

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

**N O N E**

Schedule DB - Part B - Section 1 - Futures Contracts Open

**N O N E**

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

**N O N E**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

**N O N E**

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

**N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

**N O N E**



