



BE-140 Identification Number

2018 BENCHMARK SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Due date:

September 30, 2019

Extension information:

See Part V, page 26 of the General Instructions.

Electronic filing:

www.bea.gov/efile

Mail via U.S. Postal Service:

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

Send via Private Express Delivery:

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

Fax reports to:

(301) 278-9506

Name and address of U.S. Reporter

00080	Company Name: 0			
	In care of: 1			
00090	Attention: 0			
10000	Address: 0			
10001	City 0	10002	State 0	10003
				Zip 0

Assistance:

E-mail: be-140help@bea.gov
Telephone: (301) 278-9303
FAQs, tools, and blank forms: www.bea.gov/be140

BE-140 Filing Requirements:

- A BE-140 survey is required of each U.S. insurance company that had insurance transactions with foreign persons in the categories covered by the survey during the 2018 calendar year. Any U.S. insurance company that did not have covered transactions with foreign persons is required to complete the survey through page 6, if notified by BEA about the survey.
- Any U.S. insurance company that had transactions with foreign persons that exceeded \$2 million (positive or negative) in at least one of the insurance categories covered by the survey during calendar year 2018, on an accrual basis, is required to provide data on the total transactions of each of the covered types of insurance transactions and must disaggregate the totals by country and by relationship to the foreign counterparty (foreign affiliate, affiliated foreign group, or unaffiliated foreign person).
- Any U.S. insurance company that had transactions with foreign persons during calendar year 2018 that were between positive \$2 million and negative \$2 million is required to provide data on total transactions.

Authority, Confidentiality, Penalties

This survey is being conducted under the International Investment and Trade in Services Survey Act (P.L. 94-472, 90 Stat. 2059, 22 U.S.C. 3101-3108, as amended - hereinafter "the Act"). The filing of reports is mandatory, and the Act provides that your report to BEA is confidential. Persons who fail to report may be subject to penalties. See page 25 of the General Instructions for additional details.

Contact Information**Provide information of person to consult about this report:**

10004	Name 0		10008	Telephone number 0	Extension
10010	E-mail address 0		10009	Fax number 0	

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

Certification

The undersigned official certifies that this report has been prepared in accordance with the applicable instructions, is complete, and is substantially accurate including estimates that may have been provided.

	10011	Signature of authorized official 0	Date 0		10012	Telephone number 0	Extension
		Name 0	Title 0				

Identification of U.S. Reporter

1 What was the status of the U.S. Reporter during the 2018 calendar year?

- 10017
- ¹ 1 In existence the entire reporting period — *Continue filling out this form.*
- ¹ 2 In existence during only part of the reporting period — *Continue filling out this form for the portion of the reporting period the U.S. Reporter was in existence and, in the comments section below, explain why it did not exist for part of the period.*
- ¹ 3 Not in existence during the reporting period — *In the comments section below, explain why your company was not in existence during the reporting period. Please return the form according to the instructions on page 1.*

2 Was the U.S. Reporter owned more than 50 percent by another U.S. entity or business enterprise at any point during the 2018 calendar year?

See Part IV.E of the General Instructions on page 26 for the definition of business enterprise.

- 10018
- ¹ 1 No — *Continue filling out this form.*
- ¹ 2 Yes — *Check A or B:*
- ² 1 **A** — Owned by another U.S. entity or business enterprise for part of the reporting period — *Enter the name, contact information, and address of the controlling U.S. entity below and continue filling out this form, but only report transactions for the period during which the U.S. Reporter was NOT owned by another U.S. entity. Provide any comments in the section below.*
- ² 2 **B** — Owned by another U.S. entity or business enterprise for the entire reporting period — *Enter the name, contact information, and address of the controlling U.S. entity below, provide any comments in the section below, and return this form according to the instructions on page 1.*

10022	Name 0			Comments
10023	Contact name 0	10024	Telephone number 0	
10025	Address — <i>Number and street</i> 0			
10026	City, State, Zip 0			

3 What is the U.S. Reporter's principal line of insurance?

- 10019
- ¹ 1 Life insurance
- ¹ 2 Property and casualty insurance
- ¹ 3 Other — *Specify* ¹⁰⁰²⁰ 0

4 What best describes the U.S. Reporter's organization?

- 10021
- ¹ 1 Insurance Company
- ¹ 2 Insurance Broker
- ¹ 3 Insurance Group — *Please attach a list of member companies that are consolidated in this report, or enter in the comment box adjacent to question 2.*

5 What is the primary Employer Identification Number (EIN) used by the U.S. Reporter to file U.S. income or payroll taxes?

10016

1

____ - ____

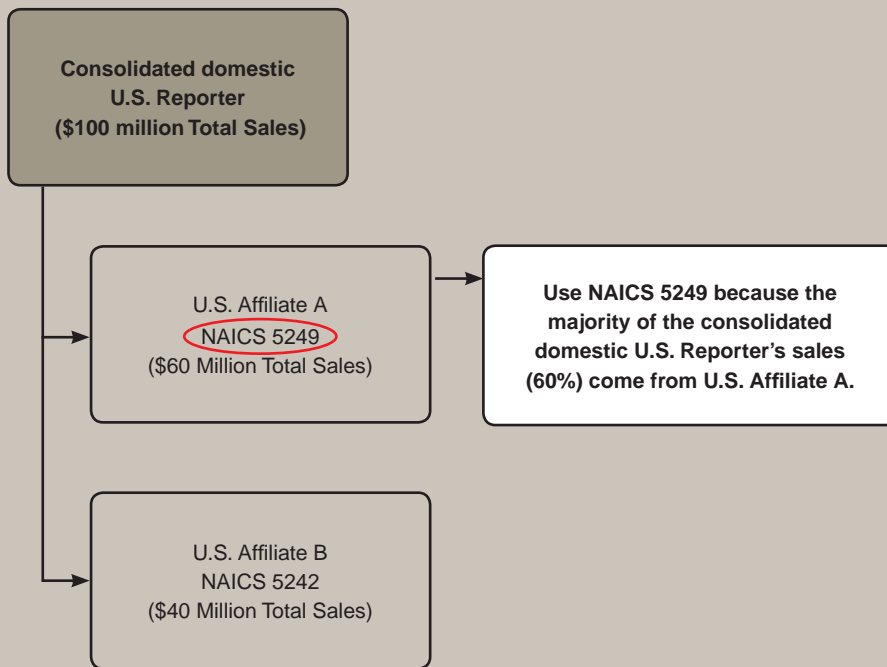
6 Using the summary of NAICS classifications on the next page, as well as the example below, enter the 4-digit code that best describes the primary sales activity of the consolidated domestic U.S. Reporter. After entering your response, continue to page 5.

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

11008 1

EXAMPLE FOR DETERMINING PRIMARY SALES ACTIVITY (NAICS CODE)

Report the NAICS code that best describes the primary sales activity of the consolidated domestic U.S. Reporter. For example, if 60% of the consolidated domestic U.S. Reporter’s sales are generated by Affiliate A, a direct life insurance carrier (NAICS 5249), and 40% of the consolidated domestic U.S. Reporter’s sales are generated by Affiliate B, who is engaged in brokerage and other insurance related activities (NAICS 5242), then you should report your NAICS as 5249.



➔ Continue to page 5

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

Agriculture, Forestry, Fishing, and Hunting

1110 Crop production
 1120 Animal production and aquaculture
 1130 Forestry and logging
 1140 Fishing, hunting, and trapping
 1150 Support activities for agriculture and forestry

Mining

2111 Oil and gas extraction
 2121 Coal
 2123 Nonmetallic minerals
 2124 Iron ores
 2125 Gold and silver ores
 2126 Copper, nickel, lead, and zinc ores
 2127 Other metal ores
 2132 Support activities for oil and gas operations
 2133 Support activities for mining, except for oil and gas operations

Utilities

2211 Electric power generation, transmission, and distribution
 2212 Natural gas distribution
 2213 Water, sewage, and other systems

Construction

2360 Construction of buildings
 2370 Heavy and civil engineering construction
 2380 Specialty trade contractors

Manufacturing

3111 Animal foods
 3112 Grain and oilseed milling
 3113 Sugar and confectionery products
 3114 Fruit and vegetable preserving and specialty foods
 3115 Dairy products
 3116 Meat products
 3117 Seafood product preparation and packaging
 3118 Bakery products and tortillas
 3119 Other food products
 3121 Beverages
 3122 Tobacco
 3130 Textile mills
 3140 Textile product mills
 3150 Apparel
 3160 Leather and allied products
 3210 Wood products
 3221 Pulp, paper, and paperboard mills
 3222 Converted paper products
 3231 Printing and related support activities
 3242 Integrated petroleum refining and extraction
 3243 Petroleum refining without extraction
 3244 Asphalt and other petroleum and coal products
 3251 Basic chemicals
 3252 Resins, synthetic rubbers, and artificial and synthetic fibers and filaments
 3253 Pesticides, fertilizers, and other agricultural chemicals
 3254 Pharmaceuticals and medicines
 3255 Paints, coatings, and adhesives
 3256 Soap, cleaning compounds, and toilet preparations
 3259 Other chemical products and preparations
 3261 Plastics products
 3262 Rubber products
 3271 Clay products and refractories
 3272 Glass and glass products
 3273 Cement and concrete products
 3274 Lime and gypsum products
 3279 Other nonmetallic mineral products
 3311 Iron and steel mills
 3312 Steel products from purchased steel
 3313 Alumina and aluminum production and processing
 3314 Nonferrous metal (except aluminum) production and processing
 3315 Foundries
 3321 Forging and stamping
 3322 Cutlery and handtools
 3323 Architectural and structural metals
 3324 Boilers, tanks, and shipping containers
 3325 Hardware
 3326 Spring and wire products
 3327 Machine shop products, turned products, and screws, nuts, and bolts
 3328 Coating, engraving, heat treating, and allied activities
 3329 Other fabricated metal products
 3331 Agriculture, construction, and mining machinery
 3332 Industrial machinery
 3333 Commercial and service industry machinery

3334 Ventilation, heating, air-conditioning, and commercial refrigeration equipment
 3335 Metalworking machinery
 3336 Engines, turbines, and power transmission equipment
 3339 Other general purpose machinery
 3341 Computer and peripheral equipment
 3342 Communications equipment
 3343 Audio and video equipment
 3344 Semiconductors and other electronic components
 3345 Navigational, measuring, electromedical, and control instruments
 3346 Manufacturing and reproducing magnetic and optical media
 3351 Electric lighting equipment
 3352 Household appliances
 3353 Electrical equipment
 3359 Other electrical equipment and components
 3361 Motor vehicles
 3362 Motor vehicle bodies and trailers
 3363 Motor vehicle parts
 3364 Aerospace products and parts
 3365 Railroad rolling stock
 3366 Ship and boat building
 3369 Other transportation equipment
 3370 Furniture and related products
 3391 Medical equipment and supplies
 3399 Other miscellaneous manufacturing

Wholesale Trade, Durable Goods

4231 Motor vehicles and motor vehicle parts and supplies
 4232 Furniture and home furnishing
 4233 Lumber and other construction materials
 4234 Professional and commercial equipment and supplies
 4235 Metal and mineral (except petroleum)
 4236 Household appliances, and electrical and electronic goods
 4237 Hardware, and plumbing and heating equipment and supplies
 4238 Machinery, equipment, and supplies
 4239 Miscellaneous durable goods

Wholesale Trade, Non-Durable Goods

4241 Paper and paper product
 4242 Drugs and druggists' sundries
 4243 Apparel, piece goods, and notions
 4244 Grocery and related product
 4245 Farm product raw material
 4246 Chemical and allied products
 4247 Petroleum and petroleum products
 4248 Beer, wine, and distilled alcoholic beverage
 4249 Miscellaneous nondurable goods

Wholesale Trade, Electronic Markets and Agents And Brokers

4251 Wholesale electronic markets and agents and brokers

Retail Trade

4410 Motor vehicle and parts dealers
 4420 Furniture and home furnishings
 4431 Electronics and appliance
 4440 Building material and garden equipment and supplies dealers
 4450 Food and beverage
 4461 Health and personal care
 4471 Gasoline stations
 4480 Clothing and clothing accessories
 4510 Sporting goods, hobby, book, and music
 4520 General merchandise
 4530 Miscellaneous store retailers
 4540 Non-store retailers

Transportation and Warehousing

4810 Air transportation
 4821 Rail transportation
 4833 Petroleum tanker operations
 4839 Other water transportation
 4840 Truck transportation
 4850 Transit and ground passenger transportation
 4863 Pipeline transportation of crude oil, refined petroleum products, and natural gas
 4868 Other pipeline transportation
 4870 Scenic and sightseeing transportation
 4880 Support activities for transportation
 4920 Couriers and messengers
 4932 Petroleum storage for hire
 4939 Other warehousing and storage

Information

5111 Newspaper, periodical, book, and directory publishers
 5112 Software publishers
 5121 Motion picture and video industries
 5122 Sound recording industries

5151 Radio and television broadcasting
 5152 Cable and other subscription programming
 5173 Wired and wireless telecommunications carriers
 5174 Satellite telecommunications
 5179 Other telecommunications
 5182 Data processing, hosting, and related services
 5191 Other information services

Finance and Insurance

5221 Depository credit intermediation (Banking)
 5223 Activities related to credit intermediation
 5224 Non-depository credit intermediation, except branches and agencies
 5229 Nondepository branches and agencies
 5231 Securities and commodity contracts intermediation and brokerage
 5238 Other financial investment activities and exchanges
 5242 Agencies, brokerages, and other insurance related activities
 5243 Insurance carriers, except direct life insurance carriers
 5249 Direct life insurance carriers
 5252 Funds, trusts, and other finance vehicles

Real Estate and Rental and Leasing

5310 Real estate
 5321 Automotive equipment rental and leasing
 5329 Other rental and leasing services
 5331 Lessors of nonfinancial intangible assets, except copyrighted works

Professional, Scientific, and Technical Services

5411 Legal services
 5412 Accounting, tax preparation, bookkeeping, and payroll services
 5413 Architectural, engineering, and related services
 5414 Specialized design services
 5415 Computer systems design and related services
 5416 Management, scientific, and technical consulting services
 5417 Scientific research and development services
 5418 Advertising, public relations, and related services
 5419 Other professional, scientific, and technical services

Management of Companies and Enterprises

5512 Holding companies, except bank holding companies
 5513 Corporate, subsidiary, and regional management offices

Administrative and Support, Waste Management, and Remediation Services

5611 Office administrative services
 5612 Facilities support services
 5613 Employment services
 5614 Business support services
 5615 Travel arrangement and reservation services
 5616 Investigation and security services
 5617 Services to buildings and dwellings
 5619 Other support services
 5620 Waste management and remediation services

Educational Services

6110 Educational services

Health Care and Social Assistance

6210 Ambulatory health care services
 6220 Hospitals
 6230 Nursing and residential care facilities
 6240 Social assistance services

Arts, Entertainment, and Recreation

7110 Performing arts, spectator sports, and related industries
 7121 Museums, historical sites, and similar institutions
 7130 Amusement, gambling, and recreation industries

Accommodation and Food Services

7210 Accommodation
 7220 Food services and drinking places

Other Services

8110 Repair and maintenance
 8120 Personal and laundry services
 8130 Religious, grantmaking, civic, professional, and similar organizations

Public Administration

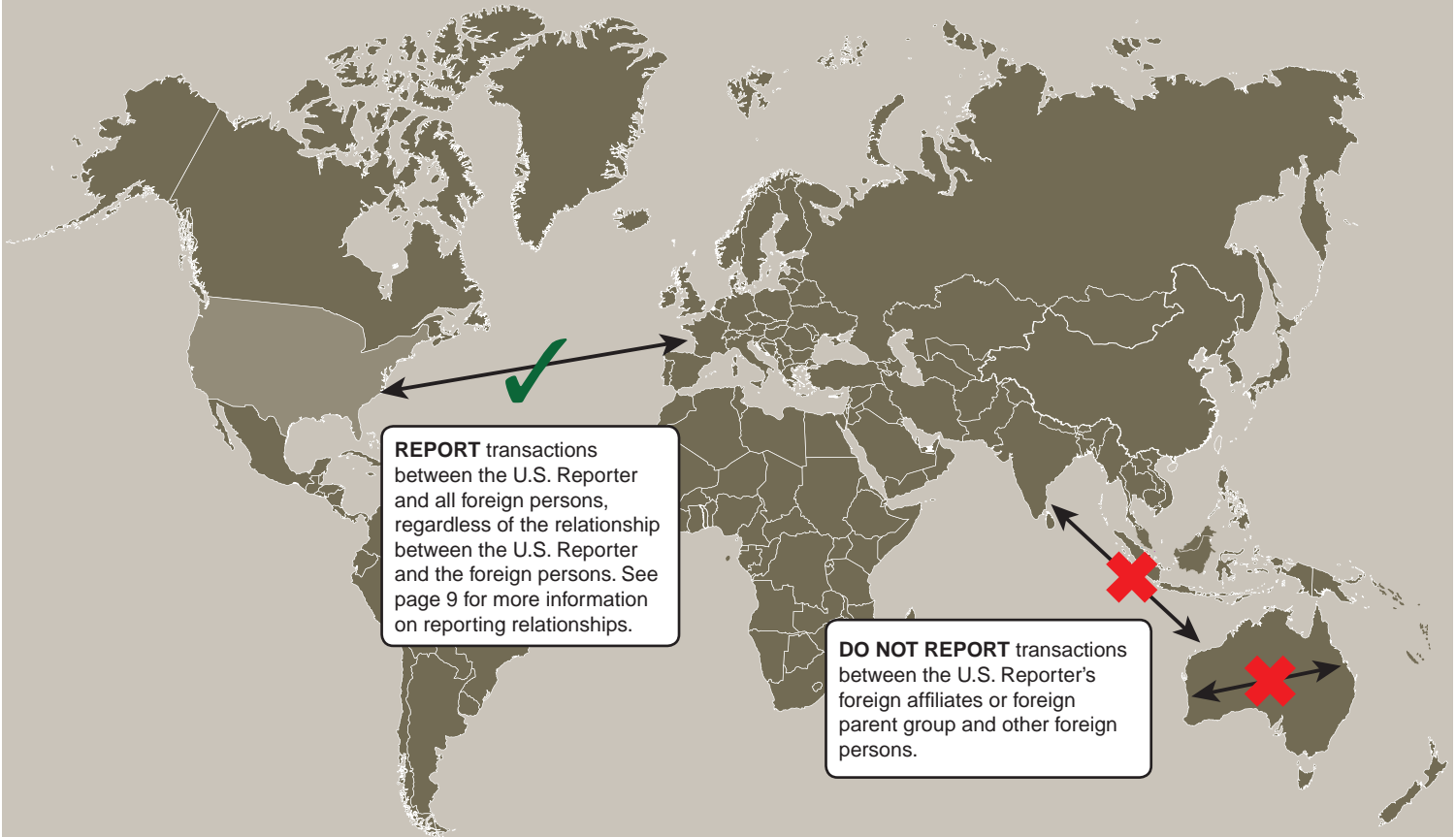
9200 Public administration

Determination of Reporting Status

Determining Reportable and Non-Reportable Transactions

The scope of this survey is limited to insurance transactions between the consolidated domestic U.S. Reporter and foreign persons*. A full list of the services covered can be found on page 6. Additional information, including FAQ's and video tutorials, can be found at: www.bea.gov/be140.

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



DO REPORT:

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

DO NOT REPORT:

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

More information about the scope and purpose of this survey can be found in the General Instructions beginning on page 25.



Continue to the next page

Determination of Reporting Status – Continued

7 Report total amounts for the following types of insurance transactions between the U.S. Reporter and foreign persons* during the 2018 calendar year.

* A foreign person refers to an individual or entity resident outside of the United States or subject to the jurisdiction of a country other than the United States, regardless of whether it is affiliated with the U.S. Reporter.

Report all currency amounts in thousands of dollars, (omitting 000). Example: If the amount is \$1,555,555.00 report as 1,556. (See Part VI on page 28 of the General Instructions for detailed instructions on calculating the amount of each transaction type in the table below.)

Transaction code	Transaction Type	Amount			
		code	Bil.	Mil.	Thou. Dols.
1	Premiums earned on reinsurance assumed from insurance companies resident abroad	1 21001	\$		000
2	Losses incurred on reinsurance assumed from insurance companies resident abroad	1 21002	\$		000
3	Premiums incurred on reinsurance ceded to insurance companies resident abroad	1 21003	\$		000
4	Losses recovered on reinsurance ceded to insurance companies resident abroad	1 21004	\$		000
5	Premiums earned from primary insurance sold to foreign persons	1 21005	\$		000
6	Losses incurred on primary insurance sold to foreign persons	1 21006	\$		000
7	Receipts for auxiliary insurance services provided to foreign persons	1 21007	\$		000
8	Payments for auxiliary insurance services provided by foreign persons	1 21008	\$		000
	Total	1 21009	\$		000

8 Did the U.S. Reporter have transactions with foreign persons, in one or more of the transaction types listed above, that were greater than positive \$2 million, or less than negative \$2 million during the 2018 calendar year?

22000
1 Yes — For each transaction type greater than \$500.00 during the reporting period, you are required to report additional details on the country and relationship to the foreign transactor(s) on Schedules **A** and/or **B** as indicated in the table below. You may also be subject to additional reporting on Schedules **C** and/or **D** based on your response to question **11**. Continue to the next question.

Schedule	Transaction Codes	Pages
Schedule A	1–4	11–13
Schedule B	5–8	15–17
Schedule C		19–21
Schedule D		23–24

2 No — If you do not wish to provide additional information on a voluntary basis on Schedule(s) **A–D**, STOP here and return the form according to the instructions on page 1. Otherwise, continue to the next page.

Comments

U.S. Reporter's Large, Infrequent Transactions with Foreign Persons

9 Did the U.S. Reporter have any large, infrequent transactions that exceeded \$250 million (positive, or negative for a recapture) in 2018?

Large, infrequent transactions are individual transactions related to a single contract (including reinsurance premiums assumed or ceded, primary insurance losses incurred, or reinsurance losses incurred or recovered) that exceeded \$250 million. Examples of large, infrequent transactions include reserve transfers on both new and existing contracts as well as recapture agreements (which should be expressed in negative amounts).

23000

¹ Yes — Continue to the next question.

¹ No — Skip to the next page.

10 List each large, infrequent transaction that exceeded \$250 million (positive, or negative for a recapture) in the table below. Report amounts in thousands of dollars.

If the U.S. Reporter had more than 10 large, infrequent transactions in excess of \$250 million, please list the 10 largest transactions.

IMPORTANT – Report amounts in thousands of U.S. dollars (omitting 000).

Round amounts of less than \$500.00 to 0. Do not enter amounts in the shaded portions of each item.

Bil. Mil. Thous. Dols.

Example: If amount is \$1,334,891.00, report as ¹ \$ 1 335 000

Transaction ID	Premium				Loss				Description of Transaction
	Bil.	Mil.	Thou.	Dols.	Bil.	Mil.	Thou.	Dols.	
23001 1.	¹ \$			000	² \$			000	³
23002 2.	¹ \$			000	² \$			000	³
23003 3.	¹ \$			000	² \$			000	³
23004 4.	¹ \$			000	² \$			000	³
23005 5.	¹ \$			000	² \$			000	³
23006 6.	¹ \$			000	² \$			000	³
23007 7.	¹ \$			000	² \$			000	³
23008 8.	¹ \$			000	² \$			000	³
23009 9.	¹ \$			000	² \$			000	³
23010 10.	¹ \$			000	² \$			000	³

11 Did any of the large, infrequent transactions reported in Question 10 include the following?

23011

¹ A transfer of reserves, or recapture of reserves (reported as a negative amount) — If yes, after completing **Schedules A** and **B**, complete **Schedule C** for each reserve transfer transaction.

¹ Catastrophic losses arising from Hurricanes Florence, Michael, and other natural disasters (both within, or outside of the United States), or, losses from reinsurance assumed from abroad in relation to these events — If yes, after completing **Schedules A** and **B**, complete **Schedule D** for each catastrophic loss transaction.

¹ Both **1** and **2** — After completing **Schedules A** and **B**, complete **Schedule C** for reserve transfer transactions and **Schedule D** for catastrophic losses.

¹ None — If none, continue to **Schedules A** and **B**, and return the report when completed.

For Reporters of Primary Insurance Services

12 Will you be reporting primary insurance transactions (transaction codes 5 and/or 6) with **foreign affiliates**, the **foreign parent group**, or **unaffiliated foreign persons** on **Schedule B**, on pages 15 through 17?

24000

- ¹ **1** Yes — Continue to the next question.
- ¹ **2** No — Skip to page 9.

13 For the primary insurance transactions reported in codes 5 and/or 6 on the **Schedule B**, indicate the primary line of insurance associated with those transactions during the year in the appropriate check box below.

After identifying the primary line of insurance by checking the appropriate box below, please provide an estimate for what percentage of the U.S. Reporter's total primary insurance transactions were in each category, in the columns to the right.

NOTE – These percentages can be an estimate based on your knowledge of the U.S. Reporter's operations.

Primary type of primary insurance sold
(Select One)

24001

¹ **1** Life insurance

¹ **2** Freight insurance

¹ **3** Other primary insurance – Specify

24002

0

	Percentage of primary insurance:	
	Premiums earned	Losses incurred
24003 Life insurance	1 %	2 %
24004 Freight insurance	1 %	2 %
24005 Other primary insurance	1 %	2 %
Total:	%	%

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

Transactions accrued during calendar year 2018 should be reported by the country of the foreign transactor, and by the foreign transactor's relationship to the **U.S. Reporter**. The relationship between the **U.S. Reporter** and the foreign transactor falls into one of three categories:

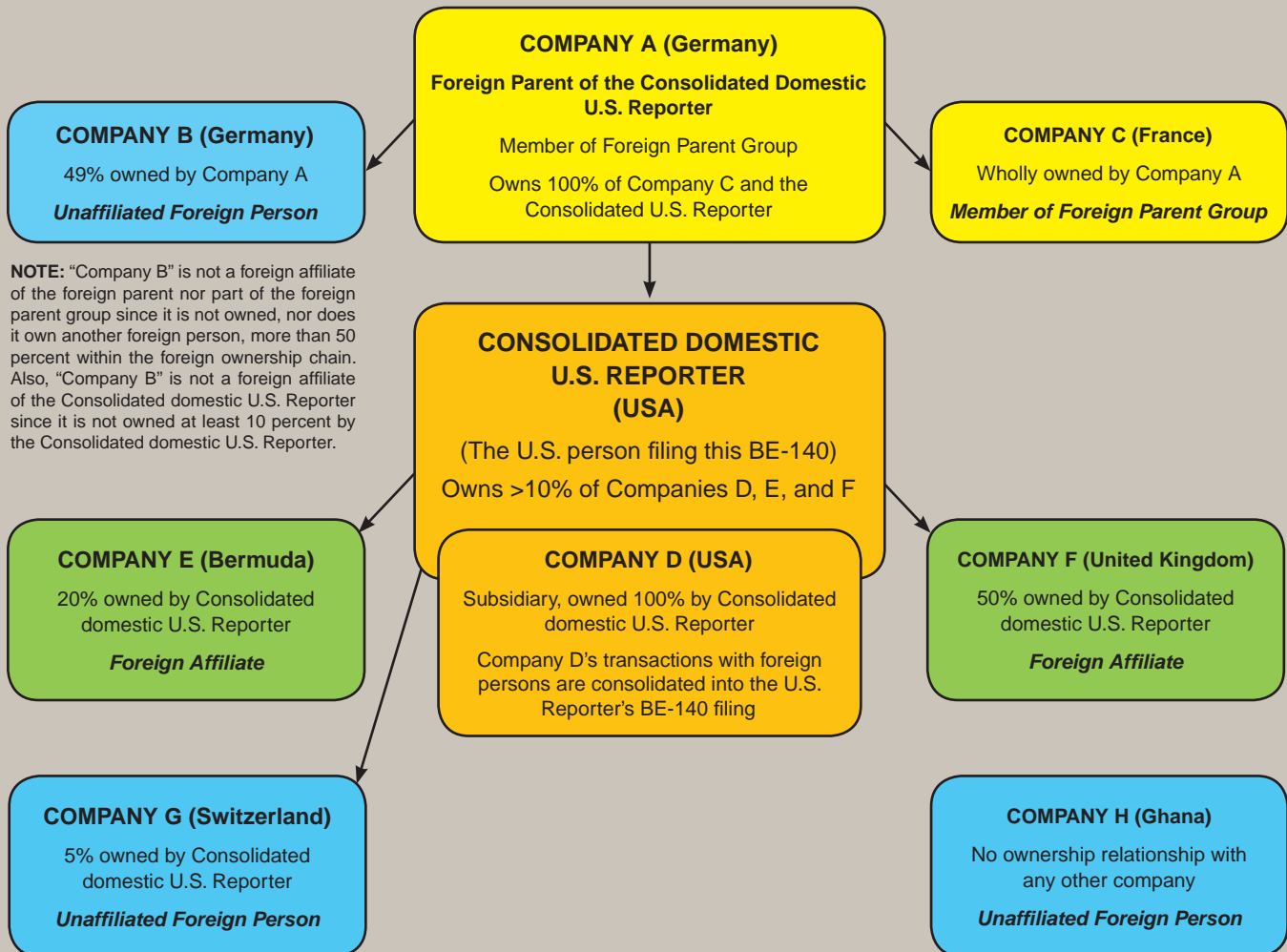
Foreign Affiliates – A foreign affiliate is defined as a person domiciled in a foreign country that is owned at least 10 percent (based on voting interest), directly or indirectly, by the U.S. Reporter.

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

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

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

The diagram below illustrates each of these relationships with regards to the U.S. Reporter.



→ Continue to the next page.

Reporting Instructions for Schedule A

Reporting Instructions

IMPORTANT — Transactions accrued during calendar year 2018 should be reported by country, transaction type, and according to the U.S. Reporter’s relationship with the foreign transactor. **ONLY** report transactions between the U.S. Reporter’s domestic operations and foreign persons. **DO NOT** report transactions between the U.S. Reporter’s foreign affiliates and foreign persons, between the U.S. Reporter’s domestic operations and other U.S. persons, or transactions between other U.S. persons and the U.S. Reporter’s foreign affiliates.

Transaction code	Report Reinsurance Transactions on Schedule A
1	Premiums earned on reinsurance assumed from insurance companies resident abroad
2	Losses incurred on reinsurance assumed from insurance resident abroad
3	Premiums incurred on reinsurance ceded to insurance companies resident abroad
4	Losses recovered on reinsurance ceded to insurance companies resident abroad

How to Report:

1) Using the table below, identify which schedule(s) must be completed based on the U.S. Reporter’s relationship with the foreign transactor (see page 9 for more information on reporting relationships).

Schedule	Relationship with the consolidated domestic U.S. Reporter	Page
A1	Foreign affiliates	11
A2	Foreign parent(s) and other members of the foreign parent group	12
A3	Unaffiliated foreign persons	13

2) In column 1 of the appropriate schedule, enter the country of the foreign transactor.

3) In columns 3 through 6, enter the U.S. Reporter’s totals for each type of transaction with the country named in column 1.

Example:

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

Per the table above, premiums incurred on reinsurance ceded to the foreign parent group are reportable on **Schedule A2**, which is on page 12.

Schedule A2	Foreign parent(s) and other members of the foreign parent group	Page 12
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On **Schedule A2**, enter “Germany” in column 1. Enter “3,525” in the column marked premiums incurred on reinsurance ceded (column 5).

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

Example

COUNTRY	BEA USE ONLY	Transactions with Foreign parent(s) and other members of the foreign parent group					
				Reinsurance assumed		Reinsurance ceded	
		(1)	(2)	Transaction code 1 Premiums earned on reinsurance assumed (3)	Transaction code 2 Losses incurred on reinsurance assumed (4)	Transaction code 3 Premiums incurred for reinsurance ceded (5)	Transaction code 4 Losses recovered on reinsurance ceded (6)
32000	1	2	3	4	5	6	
1. Germany	002	1	2	3 \$ 000	4 \$ 000	5 \$ 3,525	6 \$ 000

If you need to report additional detail for any of the schedules, please use the overflow sheets provided (pages 30–32 of the survey) or download additional overflow sheets at www.bea.gov/be140. (eFile users- select “Add overflow” from the Report Homepage.)

SCHEDULE A1 — Reinsurance Transactions with Foreign Affiliates

If you need to report additional detail for any of the schedules, please use the overflow sheets provided (pages 30–32 of the survey) or download additional overflow sheets at www.bea.gov/be140. (eFile users- select “Add overflow” from the Report Homepage.)

COUNTRY	BEA USE ONLY		Transactions with foreign affiliates					
			Reinsurance assumed			Reinsurance ceded		
			Transaction code 1	Transaction code 2	Transaction code 3	Transaction code 4		
			Premiums earned on reinsurance assumed	Losses incurred on reinsurance assumed	Premiums incurred on reinsurance ceded	Losses recovered on reinsurance ceded		
	(1)	(2)	(3)	(4)	(5)	(6)		
	31000	1	2	3	4	5	6	
1.	002	1	2	3 \$	4 \$	5 \$	6 \$	000
2.	003	1	2	3	4	5	6	000
3.	004	1	2	3	4	5	6	000
4.	005	1	2	3	4	5	6	000
5.	006	1	2	3	4	5	6	000
6.	007	1	2	3	4	5	6	000
7.	008	1	2	3	4	5	6	000
8.	009	1	2	3	4	5	6	000
9.	010	1	2	3	4	5	6	000
10.	011	1	2	3	4	5	6	000
11.	012	1	2	3	4	5	6	000
12.	013	1	2	3	4	5	6	000
13.	014	1	2	3	4	5	6	000
14.	015	1	2	3	4	5	6	000
15.	016	1	2	3	4	5	6	000
16.	017	1	2	3	4	5	6	000
17.	018	1	2	3	4	5	6	000
18.	019	1	2	3	4	5	6	000
19.	020	1	2	3	4	5	6	000
20.	021	1	2	3	4	5	6	000
21.	022	1	2	3	4	5	6	000
22.	023	1	2	3	4	5	6	000
23.	024	1	2	3	4	5	6	000
24.	025	1	2	3	4	5	6	000
25.	026	1	2	3	4	5	6	000
26.	027	1	2	3	4	5	6	000
27.	028	1	2	3	4	5	6	000
28.	029	1	2	3	4	5	6	000
29.	030	1	2	3	4	5	6	000
30.	031	1	2	3	4	5	6	000
31.	032	1	2	3	4	5	6	000
32.	033	1	2	3	4	5	6	000
33.	034	1	2	3	4	5	6	000
34. Total all countries this page	001	1	2	3	4	5	6	000

SCHEDULE A2 — Reinsurance Transactions with Foreign Parent(s) and Other Members of the Foreign Parent Group

If you need to report additional detail for any of the schedules, please use the overflow sheets provided (pages 30–32 of the survey) or download additional overflow sheets at www.bea.gov/be140. (eFile users- select "Add overflow" from the Report Homepage.)

COUNTRY	Transactions with foreign parent(s) and other members of the foreign parent group									
	BEA USE ONLY		Reinsurance assumed				Reinsurance ceded			
			Transaction code 1	Transaction code 2	Transaction code 3	Transaction code 4				
	(1)	(2)	Premiums earned on reinsurance assumed (3)	Losses incurred on reinsurance assumed (4)	Premiums incurred on reinsurance ceded (5)	Losses recovered on reinsurance ceded (6)				
32000	1	2	3	4	5	6				
1.	002	1	2	3 \$ 000	4 \$ 000	5 \$ 000	6 \$ 000			000
2.	003	1	2	3 000	4 000	5 000	6 000			000
3.	004	1	2	3 000	4 000	5 000	6 000			000
4.	005	1	2	3 000	4 000	5 000	6 000			000
5.	006	1	2	3 000	4 000	5 000	6 000			000
6.	007	1	2	3 000	4 000	5 000	6 000			000
7.	008	1	2	3 000	4 000	5 000	6 000			000
8.	009	1	2	3 000	4 000	5 000	6 000			000
9.	010	1	2	3 000	4 000	5 000	6 000			000
10.	011	1	2	3 000	4 000	5 000	6 000			000
11.	012	1	2	3 000	4 000	5 000	6 000			000
12.	013	1	2	3 000	4 000	5 000	6 000			000
13.	014	1	2	3 000	4 000	5 000	6 000			000
14.	015	1	2	3 000	4 000	5 000	6 000			000
15.	016	1	2	3 000	4 000	5 000	6 000			000
16.	017	1	2	3 000	4 000	5 000	6 000			000
17.	018	1	2	3 000	4 000	5 000	6 000			000
18.	019	1	2	3 000	4 000	5 000	6 000			000
19.	020	1	2	3 000	4 000	5 000	6 000			000
20.	021	1	2	3 000	4 000	5 000	6 000			000
21.	022	1	2	3 000	4 000	5 000	6 000			000
22.	023	1	2	3 000	4 000	5 000	6 000			000
23.	024	1	2	3 000	4 000	5 000	6 000			000
24.	025	1	2	3 000	4 000	5 000	6 000			000
25.	026	1	2	3 000	4 000	5 000	6 000			000
26.	027	1	2	3 000	4 000	5 000	6 000			000
27.	028	1	2	3 000	4 000	5 000	6 000			000
28.	029	1	2	3 000	4 000	5 000	6 000			000
29.	030	1	2	3 000	4 000	5 000	6 000			000
30.	031	1	2	3 000	4 000	5 000	6 000			000
31.	032	1	2	3 000	4 000	5 000	6 000			000
32.	033	1	2	3 000	4 000	5 000	6 000			000
33.	034	1	2	3 000	4 000	5 000	6 000			000
34. Total all countries this page	001	1	2	3 000	4 000	5 000	6 000			000

SCHEDULE A3 — Reinsurance Transactions with Unaffiliated Foreign Persons

If you need to report additional detail for any of the schedules, please use the overflow sheets provided (pages 30–32 of the survey) or download additional overflow sheets at www.bea.gov/be140. (eFile users- select "Add overflow" from the Report Homepage.)

COUNTRY	BEA USE ONLY		Transactions with unaffiliated foreign persons					
			Reinsurance assumed			Reinsurance ceded		
			Transaction code 1	Transaction code 2	Transaction code 3	Transaction code 4		
			Premiums earned on reinsurance assumed	Losses incurred on reinsurance assumed	Premiums incurred on reinsurance ceded	Losses recovered on reinsurance ceded		
	(1)	(2)	(3)	(4)	(5)	(6)		
33000	1	2	3	4	5	6		
1.	002	1	2	3	4	5	6	
2.	003	1	2	3	4	5	6	
3.	004	1	2	3	4	5	6	
4.	005	1	2	3	4	5	6	
5.	006	1	2	3	4	5	6	
6.	007	1	2	3	4	5	6	
7.	008	1	2	3	4	5	6	
8.	009	1	2	3	4	5	6	
9.	010	1	2	3	4	5	6	
10.	011	1	2	3	4	5	6	
11.	012	1	2	3	4	5	6	
12.	013	1	2	3	4	5	6	
13.	014	1	2	3	4	5	6	
14.	015	1	2	3	4	5	6	
15.	016	1	2	3	4	5	6	
16.	017	1	2	3	4	5	6	
17.	018	1	2	3	4	5	6	
18.	019	1	2	3	4	5	6	
19.	020	1	2	3	4	5	6	
20.	021	1	2	3	4	5	6	
21.	022	1	2	3	4	5	6	
22.	023	1	2	3	4	5	6	
23.	024	1	2	3	4	5	6	
24.	025	1	2	3	4	5	6	
25.	026	1	2	3	4	5	6	
26.	027	1	2	3	4	5	6	
27.	028	1	2	3	4	5	6	
28.	029	1	2	3	4	5	6	
29.	030	1	2	3	4	5	6	
30.	031	1	2	3	4	5	6	
31.	032	1	2	3	4	5	6	
32.	033	1	2	3	4	5	6	
33.	034	1	2	3	4	5	6	
34. Total all countries this page	001	1	2	3	4	5	6	

Reporting Instructions for Schedule B

Reporting Instructions

IMPORTANT — Transactions accrued during calendar year 2018 should be reported by country, transaction type, and according to the U.S. Reporter’s relationship with the foreign transactor. **ONLY** report transactions between the U.S. Reporter’s domestic operations and foreign persons. **DO NOT** report transactions between the U.S. Reporter’s foreign affiliates and foreign persons, between the U.S. Reporter’s domestic operations and other U.S. persons, or transactions between other U.S. persons and the U.S. Reporter’s foreign affiliates.

Transaction code	Report Primary and Auxiliary Insurance Transactions on Schedule B
5	Premiums earned from primary insurance sold to foreign persons
6	Losses incurred on primary insurance sold to foreign persons
7	Receipts for auxiliary insurance services provided to foreign persons
8	Payments for auxiliary insurance services provided by foreign persons

How to Report:

1) Using the table below, identify which schedule(s) you are required to report for on the **Schedule B**, based on the the U.S. Reporter’s relationship with the foreign transactor (see page 9 for more information on reporting relationships).

Schedule	Relationship with the consolidated domestic U.S. Reporter	Page
B1	Foreign affiliates	15
B2	Foreign parent(s) and other members of the foreign parent group	16
B3	Unaffiliated foreign persons	17

2) In column 1 of the appropriate schedule, enter the country of the foreign transactor.

3) In columns 3 through 6, enter the U.S. Reporter’s totals for each type of transaction with the country named in column 1.

Example:

The U.S. Reporter had a total of \$3,525,000 in receipts for auxiliary insurance services provided to a foreign parent in Germany.

Per the table above, receipts for auxiliary insurance services to the foreign parent group are reportable on **Schedule B2**, which is on page 16.

Schedule B2	Foreign parent(s) and other members of the foreign parent group	Page 16
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On **Schedule B2**, enter “Germany” in column 1. Enter “3,525” in the column marked receipts for auxiliary insurance services (column 5).

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

Example

COUNTRY	BEA USE ONLY	Transactions with Foreign parent(s) and other members of the foreign parent group					
		Primary insurance			Auxiliary insurance		
		Transaction code 5 Premiums earned from primary insurance sold	Transaction code 6 Losses incurred on primary insurance sold	Transaction code 7 Receipts for auxiliary insurance services	Transaction code 8 Payments for auxiliary insurance services	Transaction code 5 Receipts for auxiliary insurance services	Transaction code 8 Payments for auxiliary insurance services
	(1)	(2)	(3)	(4)	(5)	(6)	
42000	1	2	3	4	5	6	
1. Germany	002	1	2	3 \$	4 \$	5 \$3,525	6 \$
				000		000	000

If you need to report additional detail for any of the Schedules, please use the overflow sheets provided (pages 33–35 of the survey) or download additional overflow sheets at www.bea.gov/be140. (eFile users- select “Add overflow” from the Report Homepage.)

SCHEDULE B1 — Primary Insurance and Auxiliary Services with Foreign Affiliates

If you need to report additional detail for any of the schedules, please use the overflow sheets provided (pages 33–35 of the survey) or download additional overflow sheets at www.bea.gov/be140. (eFile users- select "Add overflow" from the Report Homepage.)

COUNTRY	BEA USE ONLY		Transactions with foreign affiliates					
			Primary insurance			Auxiliary insurance		
			Transaction code 5	Transaction code 6	Transaction code 7	Transaction code 8		
			Premiums earned from primary insurance sold	Losses incurred on primary insurance sold	Receipts for auxiliary insurance services	Payments for auxiliary insurance services		
	(1)	(2)	(3)	(4)	(5)	(6)		
41000	1	2	3	4	5	6		
1.	002	1	2	3	4	5	6	
2.	003	1	2	3	4	5	6	
3.	004	1	2	3	4	5	6	
4.	005	1	2	3	4	5	6	
5.	006	1	2	3	4	5	6	
6.	007	1	2	3	4	5	6	
7.	008	1	2	3	4	5	6	
8.	009	1	2	3	4	5	6	
9.	010	1	2	3	4	5	6	
10.	011	1	2	3	4	5	6	
11.	012	1	2	3	4	5	6	
12.	013	1	2	3	4	5	6	
13.	014	1	2	3	4	5	6	
14.	015	1	2	3	4	5	6	
15.	016	1	2	3	4	5	6	
16.	017	1	2	3	4	5	6	
17.	018	1	2	3	4	5	6	
18.	019	1	2	3	4	5	6	
19.	020	1	2	3	4	5	6	
20.	021	1	2	3	4	5	6	
21.	022	1	2	3	4	5	6	
22.	023	1	2	3	4	5	6	
23.	024	1	2	3	4	5	6	
24.	025	1	2	3	4	5	6	
25.	026	1	2	3	4	5	6	
26.	027	1	2	3	4	5	6	
27.	028	1	2	3	4	5	6	
28.	029	1	2	3	4	5	6	
29.	030	1	2	3	4	5	6	
30.	031	1	2	3	4	5	6	
31.	032	1	2	3	4	5	6	
32.	033	1	2	3	4	5	6	
33.	034	1	2	3	4	5	6	
34. Total all countries this page	001	1	2	3	4	5	6	

SCHEDULE B2 — Primary Insurance and Auxiliary Services with Foreign Parent(s) and Other Members of the Foreign Parent Group

If you need to report additional detail for any of the schedules, please use the overflow sheets provided (pages 33–35 of the survey) or download additional overflow sheets at www.bea.gov/be140. (eFile users- select "Add overflow" from the Report Homepage.)

COUNTRY	Transactions with foreign parent(s) and other members of the foreign parent group									
	BEA USE ONLY		Primary insurance				Auxiliary insurance			
			Transaction code 5		Transaction code 6		Transaction code 7		Transaction code 8	
			Premiums earned from primary insurance sold		Losses incurred on primary insurance sold		Receipts for auxiliary insurance services		Payments for auxiliary insurance services	
	(1)	(2)	(3)	(4)	(5)	(6)				
	42000	1	2	3	4	5	6			
1.	002	1	2	3 \$ 000	4 \$ 000	5 \$ 000	6 \$ 000			
2.	003	1	2	3 000	4 000	5 000	6 000			
3.	004	1	2	3 000	4 000	5 000	6 000			
4.	005	1	2	3 000	4 000	5 000	6 000			
5.	006	1	2	3 000	4 000	5 000	6 000			
6.	007	1	2	3 000	4 000	5 000	6 000			
7.	008	1	2	3 000	4 000	5 000	6 000			
8.	009	1	2	3 000	4 000	5 000	6 000			
9.	010	1	2	3 000	4 000	5 000	6 000			
10.	011	1	2	3 000	4 000	5 000	6 000			
11.	012	1	2	3 000	4 000	5 000	6 000			
12.	013	1	2	3 000	4 000	5 000	6 000			
13.	014	1	2	3 000	4 000	5 000	6 000			
14.	015	1	2	3 000	4 000	5 000	6 000			
15.	016	1	2	3 000	4 000	5 000	6 000			
16.	017	1	2	3 000	4 000	5 000	6 000			
17.	018	1	2	3 000	4 000	5 000	6 000			
18.	019	1	2	3 000	4 000	5 000	6 000			
19.	020	1	2	3 000	4 000	5 000	6 000			
20.	021	1	2	3 000	4 000	5 000	6 000			
21.	022	1	2	3 000	4 000	5 000	6 000			
22.	023	1	2	3 000	4 000	5 000	6 000			
23.	024	1	2	3 000	4 000	5 000	6 000			
24.	025	1	2	3 000	4 000	5 000	6 000			
25.	026	1	2	3 000	4 000	5 000	6 000			
26.	027	1	2	3 000	4 000	5 000	6 000			
27.	028	1	2	3 000	4 000	5 000	6 000			
28.	029	1	2	3 000	4 000	5 000	6 000			
29.	030	1	2	3 000	4 000	5 000	6 000			
30.	031	1	2	3 000	4 000	5 000	6 000			
31.	032	1	2	3 000	4 000	5 000	6 000			
32.	033	1	2	3 000	4 000	5 000	6 000			
33.	034	1	2	3 000	4 000	5 000	6 000			
34. Total all countries this page	001	1	2	3 000	4 000	5 000	6 000			

SCHEDULE B3 — Primary Insurance and Auxiliary Services with Unaffiliated Foreign Persons

If you need to report additional detail for any of the schedules, please use the overflow sheets provided (pages 33–35 of the survey) or download additional overflow sheets at www.bea.gov/be140. (eFile users- select "Add overflow" from the Report Homepage.)

COUNTRY	BEA USE ONLY		Transactions with unaffiliated foreign persons							
			Primary insurance				Auxiliary insurance			
			Transaction code 5		Transaction code 6		Transaction code 7		Transaction code 8	
			Premiums earned from primary insurance sold		Losses incurred on primary insurance sold		Receipts for auxiliary insurance services		Payments for auxiliary insurance services	
	(1)	(2)	(3)	(4)	(5)	(6)				
43000	1	2	3	4	5	6				
1.	002	1	2	3 \$ 000	4 \$ 000	5 \$ 000	6 \$ 000	000		
2.	003	1	2	3 000	4 000	5 000	6 000	000		
3.	004	1	2	3 000	4 000	5 000	6 000	000		
4.	005	1	2	3 000	4 000	5 000	6 000	000		
5.	006	1	2	3 000	4 000	5 000	6 000	000		
6.	007	1	2	3 000	4 000	5 000	6 000	000		
7.	008	1	2	3 000	4 000	5 000	6 000	000		
8.	009	1	2	3 000	4 000	5 000	6 000	000		
9.	010	1	2	3 000	4 000	5 000	6 000	000		
10.	011	1	2	3 000	4 000	5 000	6 000	000		
11.	012	1	2	3 000	4 000	5 000	6 000	000		
12.	013	1	2	3 000	4 000	5 000	6 000	000		
13.	014	1	2	3 000	4 000	5 000	6 000	000		
14.	015	1	2	3 000	4 000	5 000	6 000	000		
15.	016	1	2	3 000	4 000	5 000	6 000	000		
16.	017	1	2	3 000	4 000	5 000	6 000	000		
17.	018	1	2	3 000	4 000	5 000	6 000	000		
18.	019	1	2	3 000	4 000	5 000	6 000	000		
19.	020	1	2	3 000	4 000	5 000	6 000	000		
20.	021	1	2	3 000	4 000	5 000	6 000	000		
21.	022	1	2	3 000	4 000	5 000	6 000	000		
22.	023	1	2	3 000	4 000	5 000	6 000	000		
23.	024	1	2	3 000	4 000	5 000	6 000	000		
24.	025	1	2	3 000	4 000	5 000	6 000	000		
25.	026	1	2	3 000	4 000	5 000	6 000	000		
26.	027	1	2	3 000	4 000	5 000	6 000	000		
27.	028	1	2	3 000	4 000	5 000	6 000	000		
28.	029	1	2	3 000	4 000	5 000	6 000	000		
29.	030	1	2	3 000	4 000	5 000	6 000	000		
30.	031	1	2	3 000	4 000	5 000	6 000	000		
31.	032	1	2	3 000	4 000	5 000	6 000	000		
32.	033	1	2	3 000	4 000	5 000	6 000	000		
33.	034	1	2	3 000	4 000	5 000	6 000	000		
34. Total all countries this page	001	1	2	3 000	4 000	5 000	6 000	000		

Reporting Instructions for Schedule C

Reporting Instructions

For any large, infrequent transactions reported under question **10** on page 7, you are required to provide additional details on **Schedule C** if any of those reinsurance transactions included reserve transfers.

For any reserve transfers (and recaptures of reserves) associated with large, infrequent reinsurance transactions listed under question **10**, please provide additional detail on the following pages, including:

- The transaction ID from question **10** on page 7.
- Whether the transaction was for reinsurance assumed or ceded.
- The U.S. Reporter's affiliation with, and the country of, the foreign transactor.
- The expected average maturity of the reserves transferred.
- The total amount of the reserves transferred (report in thousands of U.S. dollars).

NOTE: Recaptures of reserves, if being reported as large and infrequent under question 10 and on **Schedule C**, should be reported as a negative amount.

Please note that any premiums earned, or losses incurred on reinsurance ceded or assumed should also be reported on **Schedule A**. Any premiums incurred, or losses recovered on primary insurance sold should also be reported on **Schedule B**.

If your company did not have any reserve transfers related to large, infrequent reinsurance transactions, please continue to page 22.

SCHEDULE C — Reinsurance Reserve Transfers

Report large, infrequent reinsurance reserve transfers and recaptures during 2018, on existing or new treaties.

NOTE: Recaptures of reserves, if being reported as large and infrequent under question **10** and on **Schedule C**, should be reported as a negative amount.

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>50001 ² 1 <input type="checkbox"/> Assumed</p> <p>² 2 <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>50001 ³ 1 <input type="checkbox"/> Foreign Affiliate</p> <p>³ 2 <input type="checkbox"/> Foreign Parent Group</p> <p>³ 3 <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <p style="text-align: center;">Years Months</p> <p>50002 ¹ <input type="text"/> ² <input type="text"/></p>
<p>Date</p> <p>50003 <input type="text"/></p>	<p>Country</p> <p>50004 ¹ <input type="text"/></p>	<p>Reserve Amount</p> <p>50002 ³ \$ <input type="text"/> 000</p>
<p>Additional Information</p> <p>50005 ⁰ <input type="text"/></p>		

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>50011 ² 1 <input type="checkbox"/> Assumed</p> <p>² 2 <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>50011 ³ 1 <input type="checkbox"/> Foreign Affiliate</p> <p>³ 2 <input type="checkbox"/> Foreign Parent Group</p> <p>³ 3 <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <p style="text-align: center;">Years Months</p> <p>50012 ¹ <input type="text"/> ² <input type="text"/></p>
<p>Date</p> <p>50013 <input type="text"/></p>	<p>Country</p> <p>50014 ¹ <input type="text"/></p>	<p>Reserve Amount</p> <p>50012 ³ \$ <input type="text"/> 000</p>
<p>Additional Information</p> <p>50015 ⁰ <input type="text"/></p>		

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>50021 ² 1 <input type="checkbox"/> Assumed</p> <p>² 2 <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>50021 ³ 1 <input type="checkbox"/> Foreign Affiliate</p> <p>³ 2 <input type="checkbox"/> Foreign Parent Group</p> <p>³ 3 <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <p style="text-align: center;">Years Months</p> <p>50022 ¹ <input type="text"/> ² <input type="text"/></p>
<p>Date</p> <p>50023 <input type="text"/></p>	<p>Country</p> <p>50024 ¹ <input type="text"/></p>	<p>Reserve Amount</p> <p>50022 ³ \$ <input type="text"/> 000</p>
<p>Additional Information</p> <p>50025 ⁰ <input type="text"/></p>		

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>50031 ² 1 <input type="checkbox"/> Assumed</p> <p>² 2 <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>50031 ³ 1 <input type="checkbox"/> Foreign Affiliate</p> <p>³ 2 <input type="checkbox"/> Foreign Parent Group</p> <p>³ 3 <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <p style="text-align: center;">Years Months</p> <p>50032 ¹ <input type="text"/> ² <input type="text"/></p>
<p>Date</p> <p>50033 <input type="text"/></p>	<p>Country</p> <p>50034 ¹ <input type="text"/></p>	<p>Reserve Amount</p> <p>50032 ³ \$ <input type="text"/> 000</p>
<p>Additional Information</p> <p>50035 ⁰ <input type="text"/></p>		

SCHEDULE C — Reinsurance Reserve Transfers – Continued

Report large, infrequent reinsurance reserve transfers and recaptures during 2018, on existing or new treaties.

NOTE: Recaptures of reserves, if being reported as large and infrequent under question **10** and on **Schedule C**, should be reported as a negative amount.

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>50041 ² 1 <input type="checkbox"/> Assumed</p> <p>² 2 <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>50041 ³ 1 <input type="checkbox"/> Foreign Affiliate</p> <p>³ 2 <input type="checkbox"/> Foreign Parent Group</p> <p>³ 3 <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <p>Years Months</p> <p>50042 ¹ <input type="text"/> ² <input type="text"/></p>
<p>Date</p> <p>50043 ¹ <input type="text"/></p>	<p>Country</p> <p>50044 ¹ <input type="text"/></p>	<p>Reserve Amount</p> <p>50042 ³ \$ <input type="text"/> 000</p>
<p>Additional Information</p> <p>50045 ⁰ <input type="text"/></p>		

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>50051 ² 1 <input type="checkbox"/> Assumed</p> <p>² 2 <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>50051 ³ 1 <input type="checkbox"/> Foreign Affiliate</p> <p>³ 2 <input type="checkbox"/> Foreign Parent Group</p> <p>³ 3 <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <p>Years Months</p> <p>50052 ¹ <input type="text"/> ² <input type="text"/></p>
<p>Date</p> <p>50053 ¹ <input type="text"/></p>	<p>Country</p> <p>50054 ¹ <input type="text"/></p>	<p>Reserve Amount</p> <p>50052 ³ \$ <input type="text"/> 000</p>
<p>Additional Information</p> <p>50055 ⁰ <input type="text"/></p>		

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>50061 ² 1 <input type="checkbox"/> Assumed</p> <p>² 2 <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>50061 ³ 1 <input type="checkbox"/> Foreign Affiliate</p> <p>³ 2 <input type="checkbox"/> Foreign Parent Group</p> <p>³ 3 <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <p>Years Months</p> <p>50062 ¹ <input type="text"/> ² <input type="text"/></p>
<p>Date</p> <p>50063 ¹ <input type="text"/></p>	<p>Country</p> <p>50064 ¹ <input type="text"/></p>	<p>Reserve Amount</p> <p>50062 ³ \$ <input type="text"/> 000</p>
<p>Additional Information</p> <p>50065 ⁰ <input type="text"/></p>		

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>50071 ² 1 <input type="checkbox"/> Assumed</p> <p>² 2 <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>50071 ³ 1 <input type="checkbox"/> Foreign Affiliate</p> <p>³ 2 <input type="checkbox"/> Foreign Parent Group</p> <p>³ 3 <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <p>Years Months</p> <p>50072 ¹ <input type="text"/> ² <input type="text"/></p>
<p>Date</p> <p>50073 ¹ <input type="text"/></p>	<p>Country</p> <p>50074 ¹ <input type="text"/></p>	<p>Reserve Amount</p> <p>50072 ³ \$ <input type="text"/> 000</p>
<p>Additional Information</p> <p>50075 ⁰ <input type="text"/></p>		

SCHEDULE C — Reinsurance Reserve Transfers – Continued

Report large, infrequent reinsurance reserve transfers and recaptures during 2018, on existing or new treaties.

NOTE: Recaptures of reserves, if being reported as large and infrequent under question **10** and on **Schedule C**, should be reported as a negative amount.

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>⁵⁰⁰⁸¹ ² <input type="checkbox"/> Assumed</p> <p>² <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>⁵⁰⁰⁸¹ ³ <input type="checkbox"/> Foreign Affiliate</p> <p>³ <input type="checkbox"/> Foreign Parent Group</p> <p>³ <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Years</th> <th style="width: 50%;">Months</th> </tr> <tr> <td>⁵⁰⁰⁸² ¹ <input type="text" value=""/></td> <td>² <input type="text" value=""/></td> </tr> </table> <p>Reserve Amount</p> <p>⁵⁰⁰⁸² ³ \$ <input type="text" value=""/> 000</p>	Years	Months	⁵⁰⁰⁸² ¹ <input type="text" value=""/>	² <input type="text" value=""/>
Years	Months					
⁵⁰⁰⁸² ¹ <input type="text" value=""/>	² <input type="text" value=""/>					
<p>Date</p> <p>⁵⁰⁰⁸³ ¹ <input type="text" value=""/></p>		<p>Country</p> <p>⁵⁰⁰⁸⁴ ¹ <input type="text" value=""/></p>				
<p>Additional Information</p> <p>⁵⁰⁰⁸⁵ ⁰ <input type="text" value=""/></p>						

Transaction ID (from Question **10** on page 7): ¹

<p>Type</p> <p>⁵⁰⁰⁹¹ ² <input type="checkbox"/> Assumed</p> <p>² <input type="checkbox"/> Ceded</p>	<p>Foreign Affiliation</p> <p>⁵⁰⁰⁹¹ ³ <input type="checkbox"/> Foreign Affiliate</p> <p>³ <input type="checkbox"/> Foreign Parent Group</p> <p>³ <input type="checkbox"/> Unaffiliated Foreign Persons</p>	<p>Expected Average Maturity of Reserves</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Years</th> <th style="width: 50%;">Months</th> </tr> <tr> <td>⁵⁰⁰⁹² ¹ <input type="text" value=""/></td> <td>² <input type="text" value=""/></td> </tr> </table> <p>Reserve Amount</p> <p>⁵⁰⁰⁹² ³ \$ <input type="text" value=""/> 000</p>	Years	Months	⁵⁰⁰⁹² ¹ <input type="text" value=""/>	² <input type="text" value=""/>
Years	Months					
⁵⁰⁰⁹² ¹ <input type="text" value=""/>	² <input type="text" value=""/>					
<p>Date</p> <p>⁵⁰⁰⁹³ ¹ <input type="text" value=""/></p>		<p>Country</p> <p>⁵⁰⁰⁹⁴ ¹ <input type="text" value=""/></p>				
<p>Additional Information</p> <p>⁵⁰⁰⁹⁵ ⁰ <input type="text" value=""/></p>						

Reporting Instructions for Schedule D

Reporting Instructions

For any large, infrequent transactions reported under question **10** on page 7, you are required to provide additional details on **Schedule D** if any of those transactions included losses arising from catastrophic events such as hurricanes (including Florence and Michael), wildfires, or earthquakes.

If your company experienced catastrophic losses, please provide additional detail on the following page(s) for up to five of the transactions you reported on question **10**, including:

- The transaction ID from question **10** on page 7.
- Whether the loss was for reinsurance assumed or ceded.
- The date the catastrophic event occurred (if the event occurred over several days, list the initial claim date).
- The U.S. Reporter's affiliation with, and the country of, the foreign transactor.
- The total amount of the loss incurred (report in thousands of U.S. dollars).
- The catastrophic event associated with the loss. *Select the catastrophic event from the drop down list provided, for each loss transaction, on **Schedule D**. For events not specifically listed in the drop down, including those arising from events outside of the United States, select "Other" and provide an additional description of the event in the field provided.*

Please note that any such losses either incurred or recovered on reinsurance ceded or assumed should also be reported on **Schedule A**. Any losses incurred on primary insurance sold should also be reported on **Schedule B**.

If your company did not have any large, infrequent transactions that included catastrophic losses, you may **STOP HERE** and return the survey according to the filing instructions on page 1.

SCHEDULE D — Catastrophic Losses

Identify any large, infrequent insurance transactions that included catastrophic losses that would also have been included in the reinsurance losses reported on **Schedule A**, or the direct losses reported on **Schedule B** during the 2018 calendar year.

Transaction ID (from Question **10** on page 7): ¹ 60001

Type <small>60001</small> ² <input type="checkbox"/> Assumed ² <input type="checkbox"/> Ceded ² <input type="checkbox"/> Primary	Foreign Affiliation <small>60001</small> ³ <input type="checkbox"/> Foreign Affiliate ³ <input type="checkbox"/> Foreign Parent Group ³ <input type="checkbox"/> Unaffiliated Foreign Persons	Total Amount of Loss <small>60002</small> ¹ \$ <input type="text"/> 000
Date of Event <small>60003</small> ¹ <input type="text"/>	Country of the Foreign Transactor <small>60004</small> ¹ <input type="text"/>	
Please select the catastrophe related to this loss: <small>60005</small> ¹ <input type="text"/>	Additional event details: <small>60006</small> ⁰ <input type="text"/>	

Transaction ID (from Question **10** on page 7): ¹ 60011

Type <small>60011</small> ² <input type="checkbox"/> Assumed ² <input type="checkbox"/> Ceded ² <input type="checkbox"/> Primary	Foreign Affiliation <small>60011</small> ³ <input type="checkbox"/> Foreign Affiliate ³ <input type="checkbox"/> Foreign Parent Group ³ <input type="checkbox"/> Unaffiliated Foreign Persons	Total Amount of Loss <small>60012</small> ¹ \$ <input type="text"/> 000
Date of Event <small>60013</small> ¹ <input type="text"/>	Country of the Foreign Transactor <small>60014</small> ¹ <input type="text"/>	
Please select the catastrophe related to this loss: <small>60015</small> ¹ <input type="text"/>	Additional event details: <small>60016</small> ⁰ <input type="text"/>	

Transaction ID (from Question **10** on page 7): ¹ 60021

Type <small>60021</small> ² <input type="checkbox"/> Assumed ² <input type="checkbox"/> Ceded ² <input type="checkbox"/> Primary	Foreign Affiliation <small>60021</small> ³ <input type="checkbox"/> Foreign Affiliate ³ <input type="checkbox"/> Foreign Parent Group ³ <input type="checkbox"/> Unaffiliated Foreign Persons	Total Amount of Loss <small>60022</small> ¹ \$ <input type="text"/> 000
Date of Event <small>60023</small> ¹ <input type="text"/>	Country of the Foreign Transactor <small>60024</small> ¹ <input type="text"/>	
Please select the catastrophe related to this loss: <small>60025</small> ¹ <input type="text"/>	Additional event details: <small>60026</small> ⁰ <input type="text"/>	

SCHEDULE D — Catastrophic Losses – Continued

Identify any large, infrequent insurance transactions that included catastrophic losses that would also have been included in the reinsurance losses reported on **Schedule A**, or the direct losses reported on **Schedule B** during the 2018 calendar year.

Transaction ID (from Question **10** on page 7): ¹ 60031

Type <small>60031</small> ² <input type="checkbox"/> Assumed ² <input type="checkbox"/> Ceded ² <input type="checkbox"/> Primary	Foreign Affiliation <small>60031</small> ³ <input type="checkbox"/> Foreign Affiliate ³ <input type="checkbox"/> Foreign Parent Group ³ <input type="checkbox"/> Unaffiliated Foreign Persons	Total Amount of Loss <small>60032</small> ¹ \$ <input type="text"/> <small>000</small>
Date of Event <small>60033</small> ¹ <input type="text"/>	Country of the Foreign Transactor <small>60034</small> ¹ <input type="text"/>	
Please select the catastrophe related to this loss: <small>60035</small> ¹ <input type="text"/>	Additional event details: <small>60036</small> ⁰ <input type="text"/>	

Transaction ID (from Question **10** on page 7): ¹ 60041

Type <small>60041</small> ² <input type="checkbox"/> Assumed ² <input type="checkbox"/> Ceded ² <input type="checkbox"/> Primary	Foreign Affiliation <small>60041</small> ³ <input type="checkbox"/> Foreign Affiliate ³ <input type="checkbox"/> Foreign Parent Group ³ <input type="checkbox"/> Unaffiliated Foreign Persons	Total Amount of Loss <small>60042</small> ¹ \$ <input type="text"/> <small>000</small>
Date of Event <small>60043</small> ¹ <input type="text"/>	Country of the Foreign Transactor <small>60044</small> ¹ <input type="text"/>	
Please select the catastrophe related to this loss: <small>60045</small> ¹ <input type="text"/>	Additional event details: <small>60046</small> ⁰ <input type="text"/>	

GENERAL INSTRUCTIONS

Public reporting burden for this BE-140 report is estimated to average 4.5 hours per response. This burden includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate to Director, Bureau of Economic Analysis (BE-1), U.S. Department of Commerce, 4600 Silver Hill Rd., Washington, DC 20233; and to the Office of Management and Budget, Paperwork Reduction Project 0608-0073, Washington, DC 20503.

Purpose — The 2018 Benchmark Survey of Insurance Transactions by U.S. Insurance Companies with Foreign Persons is conducted by the Department of Commerce to obtain data on the size and economic significance of these transactions. The data will be used in compiling the U.S. international transactions accounts and national income and product accounts. The information will also be used to formulate U.S. policy and to analyze the impact of that policy, and the policies of foreign countries, on such international transactions.

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

Penalties — Persons who fail to report may be subject to a civil penalty of not less than \$4,454, and not more than \$44,539, and to injunctive relief commanding such person to comply, or both. These civil penalties are subject to inflationary adjustments. Those adjustments are found in 15 CFR 6.4. Whoever willfully fails to report shall be fined not more than \$10,000 and, if an individual, may be imprisoned for not more than one year, or both. Any officer, director, employee, or agent of any corporation who knowingly participates in such violations, upon conviction, may be punished by a like fine, imprisonment, or both. (See 22 U.S.C. 3105.) Notwithstanding the above, a U.S. person is not subject to any penalty for failure to report if a valid OMB control number is not displayed on the form. The control number for Form BE-140 (0608-0073) is displayed at the top of the first page of this form.

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

I. WHO IS TO REPORT AND GENERAL COVERAGE

A. Who must report — The publication in the Federal Register of the final rule implementing this survey is considered legal notice to U.S. persons of their obligation to report. Therefore, a response is required from persons subject to the reporting requirements of the survey, whether or not they are contacted by BEA.

1. Mandatory and voluntary reporting

a. Mandatory reporting — A BE-140 report is required from each U.S. insurance company that had insurance transactions with foreign persons in the categories covered by the survey during the 2018 calendar year.

Each U.S. insurance company that:

- (1) had insurance transactions with foreign persons that exceeded \$2 million (positive or negative) in at least one of the insurance categories covered by the survey during its 2018 calendar year, on an accrual basis, is required to provide data on the total transactions of each of the covered types of insurance transactions and must disaggregate the totals by country and by relationship to the foreign counterparty (foreign affiliate, foreign parent group, or unaffiliated), **OR**
- (2) had insurance transactions with foreign persons that were between positive \$2 million and negative \$2 million in each of the insurance categories covered by the survey during its 2018 calendar year, on an accrual basis, is required to provide the total for each type of transaction in which they engaged.

The \$2 million threshold for mandatory reporting is based on covered transactions with foreign persons by all parts of the consolidated domestic U.S. Reporter.

The determination of whether a U.S. Reporter is subject to this reporting requirement may be based on the judgment of knowledgeable persons in a company who can identify reportable transactions on a recall basis, with a reasonable degree of certainty, without conducting a detailed manual records search.

Provide responses to all questions as they pertain to the consolidated domestic U.S. Reporter's 2018 calendar year. In the “determination of reporting status” section, in the transaction type table, enter the total insurance transactions between the U.S. Reporter and foreign persons for each transaction type listed. Report amounts in thousands of U.S. dollars (omitting 000). For example, if the amount is \$1,334,515.00, report it as \$1,335.

If the U.S. Reporter's transactions with foreign persons exceeded \$2 million (positive or negative) in any transaction types, the U.S. Reporter **MUST** provide additional country/affiliation detail on Schedule(s) A through E as indicated in questions 8 and 11, on pages 6 and 7.

Enter the total transaction amounts, applicable to a particular schedule, in the appropriate column(s) on line 34 of the Schedule A and B. Distribute amounts to the foreign country(ies) involved in the transaction(s) on the lines above the total line on each applicable schedule, by affiliation type. Use additional copies of the schedules, or the available overflow sheets, to report additional countries and transaction types as necessary. Reporters of large, infrequent transactions in question 10, on page 7, must also complete Schedule D for transactions that included a transfer or recapture of reserves, and/or Schedule E for transactions that were related to catastrophic events.

b. Voluntary reporting

If, during calendar year 2018, total transactions were between positive \$2 million and negative \$2 million in each of the insurance categories covered by the survey, on an accrual basis, the U.S. Reporter may, in addition to providing the required total for each type of transaction on page 6, voluntarily report transactions at a country and affiliation level of detail on the applicable mandatory schedule(s). The estimates may be judgmental, that is, based on recall, without conducting a detailed records search.

c. Exemption — Any U.S. person that receives the BE-140 survey form from BEA, but is not subject to the reporting

GENERAL INSTRUCTIONS — Continued

requirements, must file an exemption claim by completing the determination of reporting status section (pages 1 through 6) of the BE-140 survey and returning it to BEA by the due date of the survey. This requirement is necessary to ensure compliance with reporting requirements and efficient administration of the Act by eliminating unnecessary follow-up contact.

B. Transactions involving a broker — At times, insurance transactions between a U.S. person and a foreign person may be arranged by, billed through, or otherwise facilitated by, a broker, agent, or intermediary. In order to avoid duplication, the data should be reported by the insurance company assuming the risk or recovering or paying the loss. Brokers, agents, and intermediaries are generally not to report.

II. WHAT TO REPORT

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

III. WHAT NOT TO REPORT

- A.** Do **not** report transactions with U.S. affiliates of foreign firms for their own account. Transactions with these U.S. affiliates are considered domestic-to-domestic for purposes of this survey.
- B.** Do **not** report transactions with foreign persons made by your foreign affiliates **for their own account**.
- C.** Do **not** report premiums paid to, or losses recovered from, foreign insurance companies for primary insurance. Premiums on such insurance purchased from foreign insurance companies are to be reported on Form BE-120, Benchmark Survey of Transactions in Selected Services and Intellectual Property with Foreign Persons, and on Form BE-125, Quarterly Survey of Transactions in Selected Services and Intellectual Property with Foreign Persons. Copies of these surveys can be downloaded from BEA's web site at <http://www.bea.gov/ssb>.

IV. DEFINITIONS

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

B. United States, when used in a geographic sense, means the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, and all the territories and possessions of the United States. **NOTE:** The U.S. Virgin Islands and Guam are territories of the United States.

C. Foreign, when used in a geographic sense, means that which is situated outside the United States or which belongs to or is characteristic of a country other than the United States.

D. U.S. Reporter is the U.S. person filing a report in this survey.

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

Conditions may exist that would lead a U.S. corporation to exclude certain majority-owned (more than 50 percent owned) domestic subsidiaries from financial statements used in reports to shareholders. If such a subsidiary has covered transactions, it must file a report under its own name, and the subsidiary will be considered the U.S. Reporter for purposes of this survey.

F. Person means any individual, branch, partnership, associated group, association, estate, trust, corporation, or other organization (whether or not organized under the laws of any State), and any government (including a foreign government, the U.S. Government, a State or local government, and any agency, corporation, financial institution, or other entity or instrumentality thereof, including a government sponsored agency).

1. U.S. person means any person resident in the United States or subject to the jurisdiction of the United States.

2. Foreign person means any person resident outside the United States or subject to the jurisdiction of a country other than the United States.

G. Business enterprise means any organization, association, branch, or venture which exists for profitmaking purposes or to otherwise secure economic advantage, and any ownership of any real estate. (A business enterprise is a "person" within the definition in paragraph F above.)

H. Direct investment means the ownership or control, directly or indirectly, by one person of 10 percent or more of the voting stock of an incorporated business enterprise, or an equivalent ownership interest in an unincorporated business enterprise.

I. Parent means a person of one country who, directly or indirectly, owns or controls 10 percent or more of the voting stock of an incorporated business enterprise or an equivalent ownership interest in an unincorporated business enterprise, which is located outside that country.

1. U.S. parent means the U.S. person that has direct investment in a foreign business enterprise.

2. Foreign parent means the foreign person, or the first person outside the United States in a foreign chain of ownership, which has direct investment in a U.S. business enterprise, including a branch.

J. Foreign parent group means (i) the foreign parent, (ii) any foreign person, proceeding up the foreign parent's ownership

GENERAL INSTRUCTIONS — Continued

chain, which owns more than 50 percent of the person below it up to and including that person which is not owned more than 50 percent by another foreign person, and (iii) any foreign person, proceeding down the ownership chain(s) of each of these members that is owned more than 50 percent by the person above it.

K. Affiliate means a business enterprise located in one country that is directly or indirectly owned or controlled by a person of another country to the extent of 10 percent or more of its voting stock for an incorporated business or an equivalent interest for an unincorporated business, including a branch.

1. Foreign affiliate means an affiliate located outside the United States in which a U.S. person has direct investment.

2. U.S. affiliate means an affiliate located in the United States in which a foreign person has direct investment.

L. Foreign affiliate of a foreign parent means, with reference to a given U.S. affiliate, any member of the foreign parent group owning the U.S. affiliate that is not a foreign parent of the U.S. affiliate.

M. Unaffiliated foreign person means, with respect to a given U.S. person, any foreign person that is not an affiliated foreign person as defined in paragraph K above.

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

IV. OTHER INSTRUCTIONS

A. Distinguishing between unaffiliated and affiliated transactions — This survey covers U.S. persons' direct transactions, both sales and payments (purchases), with affiliated and unaffiliated foreign persons.

Examples of affiliated transactions are:

1. A transaction between a U.S. person (U.S. parent) and its foreign affiliate.
2. A transaction between a U.S. person (U.S. affiliate) and its foreign parent(s) or member(s) of the foreign parent group(s).

Examples of unaffiliated transactions are:

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

Examples of transactions that are not reportable are:

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

B. Understanding the U.S. Reporter's relationship with foreign persons — The relationship between the U.S. Reporter and the foreign persons fall into one of three categories:

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

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

- (i) the foreign parent, which is the first person outside the United States in a foreign chain of ownership, that owns at least

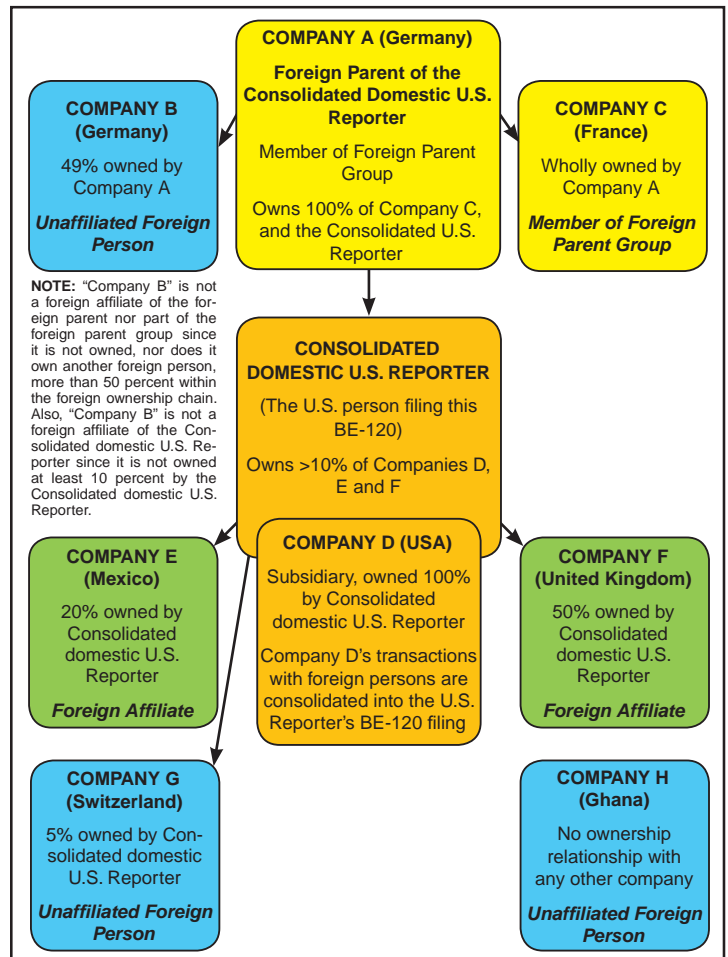
10% (based on voting interest), directly or indirectly, of the consolidated domestic U.S. business enterprise.

(ii) any foreign person proceeding up the foreign parent's ownership chain, that owns more than 50 percent of the person below it up to and including the entity that is not owned more than 50 percent by another foreign person,

(iii) any foreign person that, proceeding down the ownership chain(s) of each of these members, is owned more than 50 percent by the person above it.

Unaffiliated foreign persons — An unaffiliated foreign person is a person domiciled abroad that is owned less than ten percent, directly or indirectly, by the U.S. Reporter or the U.S. Reporter's foreign parent.

The diagram below illustrates each of these relationships with regards to the U.S. Reporter.



C. Foreign activities of a U.S. person that do not constitute a foreign affiliate — Although the definitions of direct investment and foreign affiliate in Part III. above, together with the discussion in Part IV.A above, should be sufficient to determine whether a given foreign activity is or is not a foreign affiliate, in a number of cases the determination may be difficult. Several factors to be considered are given below. If you still cannot determine if the activity or operation is an affiliate, call (301) 278-9303 or send an e-mail to be-140help@bea.gov for additional guidance.

If a U.S. person's foreign activity or operation is incorporated abroad, it is a foreign affiliate.

GENERAL INSTRUCTIONS — Continued

If a U.S. person's foreign activity or operation is not incorporated abroad, its status is based on the weight of the evidence when the factors listed below are considered.

An unincorporated foreign activity or operation generally would be considered a foreign affiliate if it: (i) is subject to foreign income taxes;

(ii) has a substantial physical presence abroad (e.g., plant and equipment or employees); (iii) maintains separate financial records that would permit the preparation of financial statements, including an income statement and balance sheet (not just a record of disbursements and receipts); (iv) takes title to the goods it sells and receives revenues therefrom; or (v) receives funds for its own account from customers for services it performs. Transactions with this type of entity should be reported under "Foreign affiliates."

An unincorporated foreign activity or operation generally would not be considered a foreign affiliate if it: (i) conducts business abroad only for the U.S. person's account and not for its own account (e.g., sales promotion or public relations type of activities); (ii) has no separate financial statements; (iii) receives funds to cover its expenses only from the U.S. person; (iv) is not subject to foreign income taxes; and (v) has limited physical assets, or employees, permanently located abroad. Transactions with this type of entity should be reported under "Unaffiliated foreign persons."

D. U.S. activities of a foreign person that do not constitute a U.S. affiliate — Criteria for determining which U.S. activities do or do not constitute a U.S. affiliate of a foreign person are parallel to those in Part IV.C. above.

E. Determining who must report a transaction when an intermediary is involved — At times, transactions between a U.S. person and a foreign person may be arranged by, billed through, or otherwise facilitated by, an intermediary. The intermediary may be U.S. or foreign, and may be affiliated or unaffiliated with the U.S. or the foreign person.

A determination of whom a sale is to, or whom a purchase is from, should be made on the basis of whom the U.S. person considers itself to have a claim on for payment, in the case of a sale, or whom it has a liability to, in the case of a purchase. For a sale, if the U.S. person looks to the foreign person for payment, then the transaction is between the U.S. person and the foreign person, and is to be reported by the U.S. person. If the U.S. person looks to the intermediary for payment, and the intermediary, in turn, looks to the foreign person for payment, then whether either transaction is reportable, and who it is to be reported by, depends on the location of the intermediary and the relationship between the U.S. person and the intermediary.

If the intermediary is a foreign person, then the U.S. person would report the transaction as a transaction with a foreign person.

If the intermediary is a U.S. person, then the initial transaction between the original U.S. person and the intermediary is domestic-to-domestic and not reportable in this survey. However, the intermediary must report the transaction with the foreign person.

The reportability of a purchase would be determined in a similar manner.

VI. SPECIFIC ITEM INSTRUCTIONS

Schedule A

How to calculate transaction codes 1–4

For property and casualty insurance companies

Calculate premiums (transaction codes 1 and 3) as follows: Premiums written (transaction code 1) or ceded (transaction code 3) during 2018, plus unearned premiums at the beginning of the year, minus unearned premiums at the end of the year. Report premiums net of cancellations. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Calculate losses (transaction codes 2 and 4) as follows: Losses paid (transaction code 2) or recovered (transaction code 4) during 2018, plus case reserves at the end of the year, plus losses incurred but not reported at the end of the year, minus case reserves at the beginning of the year, minus losses incurred but not reported at the beginning of the year. Losses paid or recovered should not include loss adjustment expenses (reportable on Schedule B).

For life insurance companies

Premiums received (transaction code 1) and paid (transaction code 3) reflect premiums accrued on reinsurance assumed from or ceded to insurance companies resident abroad. These amounts, therefore, are adjusted for changes in due, deferred, and advanced premiums for each year. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Losses paid (transaction code 2) and recovered (transaction code 4) reflect policy claims on reinsurance assumed or ceded, adjusted for changes in claims due, unpaid, and in the course of settlement.

Schedule B

How to calculate transaction codes 5 and 6

For property and casualty insurance companies

Calculate premiums (transaction code 5) as follows: Premiums written during 2018, plus unearned premiums at the beginning of the year, minus unearned premiums at the end of the year. Report premiums net of cancellations. Report premiums gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Calculate losses incurred (transaction code 6) as follows: Losses paid during 2018, plus case reserves at the end of the year, plus losses incurred but not reported at the end of the year, minus case reserves at the beginning of the year, minus losses incurred but not reported at the beginning of the year. Losses paid or recovered should not include loss adjustment expenses (reportable under transaction codes 7 and 8).

For life insurance companies

Report premiums earned (transaction code 5). These amounts should be adjusted for changes in due, deferred, and advanced premiums for 2018. Report premiums gross of commissions and profit commissions paid to foreign persons, including commissions initially paid to a U.S. intermediary (agent or broker) of a foreign person.

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

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

Include agent's commissions, insurance brokering and agency services, insurance consulting services, evaluation, allocated loss adjustment expenses, and other adjustment services, actuarial

GENERAL INSTRUCTIONS — Continued

services, salvage administration services, and regulatory and monitoring services on indemnities and recovery services.

VII. REPORTING PROCEDURES

- A. Due date — A completed BE-140 is due September 30, 2019.**
- B. Calendar year —** For the purposes of this form, you must report on a calendar year basis. For example, your fourth quarter report is your reporting quarter that ends in the fourth calendar quarter.
- C. Extensions —** Requests for an extension of the reporting deadline, if provided in writing, may be considered if it is received by the September 30 due date. You may fax the request to (301) 278-9506 or e-mail the request to be-140extension@bea.gov. BEA will provide a written response to such a request.
- D. Assistance and additional copies of the form —** Phone (301) 278-9303 for assistance. Copies of BEA survey forms are also available on BEA's web site: www.bea.gov/ssb.
- F. Rounding —** Report currency amounts in U.S. dollars rounded to thousands (omitting 000). For example, if the amount is \$1,334,515.00, report it as \$1,335.
- G. Estimates —** If actual figures are not available, report estimates and label them as such. When data items cannot be fully subdivided as required, report totals and an estimated breakdown of the totals.
- H. Original and file copies —** File a single original copy of the form. Please use the copy with the address label if such a labeled copy has been provided. In addition, retain a copy of the report in your files to facilitate resolution of problems; these copies should be retained by the U.S. Reporter for a period of not less than three years beyond the original due date.
- I. Where to send the report —** To file a report electronically, see our web site at www.bea.gov/efile for details.
- Send reports through the U.S. Postal Service to:
- Bureau of Economic Analysis
Balance of Payments Division, BE-50 (SSB)
4600 Silver Hill Road
Washington, DC 20233
- Send reports filed by direct private express delivery to:
- Bureau of Economic Analysis
Balance of Payments Division, BE-50 (SSB)
4600 Silver Hill Road
Suitland, MD 20746
- Fax reports to: (301) 278-9506

OVERFLOW SHEET FOR **Schedule A OF FORM BE-140, BENCHMARK SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS**

Company Name _____

Control Number _____

Form BE-140 **Schedule A** This schedule covers transactions with — *Check (X) one*

Overflow Page # ___ of ___

1 ¹ **Foreign affiliates**

2 ² **Foreign parents and/or other members of the FPG**

3 ³ **Unaffiliated foreign persons**

Country	BEA USE ONLY		Reinsurance assumed		Reinsurance ceded	
			Transaction code 1	Transaction code 2	Transaction code 3	Transaction code 4
			Premiums earned on reinsurance assumed	Losses incurred on reinsurance assumed	Premiums incurred on reinsurance ceded	Losses recovered on reinsurance ceded
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NOTE — You may use this Overflow Sheet if there is insufficient space on the Form BE-140, **Schedule A**, to list every individual foreign country with which you had transactions.

OVERFLOW SHEET FOR Schedule A OF FORM BE-140, BENCHMARK SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Company Name _____

Control Number _____

Form BE-140 Schedule A This schedule covers transactions with — *Check (X) one*

Overflow Page # ___ of ___

1 ¹ **Foreign affiliates**

2 ² **Foreign parents and/or other members of the FPG**

3 ³ **Unaffiliated foreign persons**

Country	BEA USE ONLY		Reinsurance assumed		Reinsurance ceded	
			Transaction code 1	Transaction code 2	Transaction code 3	Transaction code 4
			Premiums earned on reinsurance assumed	Losses incurred on reinsurance assumed	Premiums incurred on reinsurance ceded	Losses recovered on reinsurance ceded
(1)	(2)	(3)	(4)	(5)	(6)	
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NOTE — You may use this Overflow Sheet if there is insufficient space on the Form BE-140, Schedule A, to list every individual foreign country with which you had transactions.

OVERFLOW SHEET FOR Schedule A OF FORM BE-140, BENCHMARK SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Company Name _____

Control Number _____

Form BE-140 Schedule A This schedule covers transactions with — *Check (X) one*

Overflow Page # ___ of ___

1 ¹ Foreign affiliates

2 ² Foreign parents and/or other members of the FPG

3 ³ Unaffiliated foreign persons

Country	BEA USE ONLY		Reinsurance assumed		Reinsurance ceded	
			Transaction code 1	Transaction code 2	Transaction code 3	Transaction code 4
			Premiums earned on reinsurance assumed	Losses incurred on reinsurance assumed	Premiums incurred on reinsurance ceded	Losses recovered on reinsurance ceded
	(1)	(2)	(3)	(4)	(5)	(6)
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NOTE — You may use this Overflow Sheet if there is insufficient space on the Form BE-140, Schedule A, to list every individual foreign country with which you had transactions.

OVERFLOW SHEET FOR Schedule B OF FORM BE-140, BENCHMARK SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Company Name _____

Control Number _____

Form BE-140 Schedule B This schedule covers transactions with — *Check (X) one*

Overflow Page # ___ of ___

1 ¹ Foreign affiliates

2 ¹ Foreign parents and/or other members of the FPG

3 ¹ Unaffiliated foreign persons

Country	BEA USE ONLY		Primary insurance				Auxiliary insurance			
			Transaction code 5		Transaction code 6		Transaction code 7		Transaction code 8	
			Premiums earned on primary insurance sold	Losses incurred on primary insurance sold	Receipts for auxiliary insurance services	Payments for auxiliary insurance services				
	(1)	(2)	(3)	(4)	(5)	(6)				
01. Country total for this page (sum of rows 02–23)	1	2	3	4	5	6				
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NOTE — You may use this Overflow Sheet if there is insufficient space on the Form BE-140, Schedule B, to list every individual foreign country with which you had transactions.

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

OVERFLOW SHEET FOR Schedule B OF FORM BE-140, BENCHMARK SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Company Name _____

Control Number _____

Form BE-140 Schedule B This schedule covers transactions with — *Check (X) one*

Overflow Page # ___ of ___

1 ¹ Foreign affiliates

2 ¹ Foreign parents and/or other members of the FPG

3 ¹ Unaffiliated foreign persons

Country	BEA USE ONLY		Primary insurance				Auxiliary insurance			
			Transaction code 5		Transaction code 6		Transaction code 7		Transaction code 8	
			Premiums earned on primary insurance sold	Losses incurred on primary insurance sold	Receipts for auxiliary insurance services	Payments for auxiliary insurance services				
	(1)	(2)	(3)	(4)	(5)	(6)				
01. Country total for this page (sum of rows 02–23)	1	2	3	4	5	6				
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NOTE — You may use this Overflow Sheet if there is insufficient space on the Form BE-140, Schedule B, to list every individual foreign country with which you had transactions.

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

OVERFLOW SHEET FOR Schedule B OF FORM BE-140, BENCHMARK SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES WITH FOREIGN PERSONS

Company Name _____

Control Number _____

Form BE-140 Schedule B This schedule covers transactions with — *Check (X) one*

Overflow Page # ___ of ___

1 ¹ Foreign affiliates

2 ¹ Foreign parents and/or other members of the FPG

3 ¹ Unaffiliated foreign persons

Country	BEA USE ONLY		Primary insurance				Auxiliary insurance			
			Transaction code 5		Transaction code 6		Transaction code 7		Transaction code 8	
			Premiums earned on primary insurance sold	Losses incurred on primary insurance sold	Receipts for auxiliary insurance services	Payments for auxiliary insurance services				
	(1)	(2)	(3)	(4)	(5)	(6)				
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NOTE — You may use this Overflow Sheet if there is insufficient space on the Form BE-140, Schedule B, to list every individual foreign country with which you had transactions.

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