



SUPPORTER OF YOUR LIFE



Solvency and Financial Condition Report 2019



The English version of this report was approved by the Board of Directors on 12/03/2020 and submitted to the supervisor in due time.

This report is originally written in English. A translation of the summary in French and Dutch is made available on the website.

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Recent evolutions since the drafting of the report

In December 2019, the Chinese city of Wuhan had an outbreak of the Covid-19 virus. On December 31, 2019 only a limited number of cases of the Covid-19 virus were reported to the World Health Organization. There was no clarity of human-to-human transmission at that moment in time. Early in 2020, the virus spread worldwide. AG Insurance's position is that the escalation of the severity of the virus early 2020 did not provide additional information about uncertainties that existed at the reporting date of December 31, 2019. Therefore, AG Insurance considers the Covid-19 virus as a non-adjusting event.

On March 11, 2020, the World Health Organization declared Covid-19 a pandemic. In order to limit the spread of the virus, governments around the world enforced social distancing measures, large-scale quarantines and travel restrictions. These measures (will) negatively impact the global economy.

In this context, AG Insurance adopted the necessary measures to limit the impact from an operational, financial and reputational perspective and to continue servicing its distribution partners and customers. The measures taken by AG Insurance to avoid operational disruption of its services include generalized teleworking and the continuous monitoring and maintaining of the required IT capacity. In addition, AG Insurance continuously monitors the service of its external critical providers and takes the necessary actions whenever needed. Because of the observed increase in the number of Covid-19-related phishing attempts, AG Insurance implemented, next to its business as usual protection, additional measures among which raising-awareness actions. With respect to the evolution and the volatility of the financial markets, a continuous monitoring and a frequent management reporting on the financial and solvency position is put in place to allow timely decision-making. On top of this, AG Insurance performs sensitivity and scenario analysis in order to anticipate possible further evolutions. On March 31, 2020 the solvency ratios remain, despite some impact from financial market movements, globally in the same range as pre-covid-19 levels.

Taking into account the statement issued by EIOPA (European Insurance and Occupational Pensions Authority) on April 2, 2020 and the circular issued by the National Bank of Belgium on April 7, 2020, in the context of COVID-19, recommending the report of dividends distribution until at least October 1, 2020, AG Insurance decided to adjust the distribution for the year 2019 by proposing no dividend payment to the General Annual Shareholders' meeting of April 24, 2020 and by organizing a second General Shareholders' Meeting in the course of October with the intention to propose for approval the payment of an intermediary dividend.

While it is not possible today to predict how the situation at hand will evolve, AG Insurance will continue performing sensitivity and scenario analysis in order to anticipate possible further evolutions, will remain alert for any further deterioration of the situation and/or changes that could jeopardize its business objectives and will, if deemed necessary, initiate further actions to mitigate as much as possible the impact on the financial, solvency and liquidity positions of the company and on the service delivery.

SUMMARY



Business and performance

Company background

AG Insurance is active on the Belgian Life and Non-Life insurance market and offers a broad range of products and services that cover the needs of individuals and companies. During 2019, AG Insurance records an inflow of 6,6 billion EUR, with a 68% / 32% split between life and non-life insurance. Technical liabilities amounted to around 62,2 billion EUR.

AG Insurance is considered as market leader in the Belgian insurance market. It serves close to 2,8 million Retail customers and 245.000 SME and Corporate clients. AG Insurance serves its clients through the implementation of an opti-channel strategy and distributes its insurance products (both Life and Non-Life) and services via more than 3.950 independent brokers and through a distribution partnership with BNP Paribas Fortis (including its brand Fintro and its affiliate 'bpost bank / bpost banque'). The distribution of Employee Benefits products (Group Life and Health Care insurance) and related services is mainly a business-to-business activity. Sustainable and profitable business and robust risk management remain essential to fulfil obligations to customers, to offer a fair reward to shareholders and to fund future growth.

Since May 2009, AG Insurance is for 75% owned by Ageas Group and for 25% by BNP Paribas Fortis. AG Insurance is either directly or indirectly shareholder of several operating and services companies. AG Insurance and its subsidiaries employ 6.377 full time equivalent.

From a strategic point of view, AG Insurance is of the opinion that agile companies that excel at being customer oriented, digitally enabled and data driven will soon be more successful.

Business environment

Looking at the financial environment, interest rates have continued to decrease in the course of 2019, reaching historically low levels and even becoming negative. And Interest rates are expected to remain low for a protracted period. AG Insurance manages the risk by matching the investments with the guarantees offered on the liabilities.

Supported by new technological possibilities and new means of communication, one can observe that insurers start to develop ecosystems and look for solutions that go beyond insurance offerings. AG Insurance has therefore commercialized the Phil at Home project, an innovative service for longer independent home living and AG Health Partner, a service platform that helps companies to support their employee's wellbeing journey. AG Insurance has also concluded together with BNPPF a partnership with Touring focusing on the development of mobility services.

In line with its CSR strategy linked to its investments, AG Insurance has launched in the course of 2019 a number of initiatives, such as the signing of the UN Principles of Responsible Investment, the exclusion of investments in controversial activities (coal, tobacco and weapons), the integration of ESG principles in investment decisions. In the same context, the "Towards sustainability" label for eleven Branch 23 funds has been obtained while attention went to the protection of the environment (waste reduction, initiatives to lower energy consumption and obtaining of the CO2-neutral label). The Beyond Insurance initiatives AG Health Partner and Phil at Home also contribute to this CSR strategy.

Business performance

Compared to last year, gross inflow in the Life business increased considerably [+9%]. The inflow in Guaranteed products grew with more than 13%. The Life Technical Liabilities show an increase of 7% compared to year-end 2018 as a result of strong growth in Unit-Linked and in Group Life. The operating result Life was again solid at 459 million EUR and higher compared to last year [438 million EUR].

Gross inflow in Non-Life business amounted 2,1 billion EUR, up 4% compared to last year, showing growth for all business lines. Nonetheless the impact of higher claims in Accident, Health and Motor, and adverse weather events in Household, the Non-Life business result kept growing at a steady pace.

System of governance

In accordance with the regulations related to the supervision of insurance companies in Belgium, AG Insurance makes a clear distinction of responsibility between the two statutory governing bodies: the Board of Directors and the Management Committee. The Board of Directors is responsible for defining the general strategy and risk management, as well as for supervising the activities of the Management Committee. The Management Committee is responsible for managing effectively the Company's activities, for implementing the general strategy and the risk management framework defined by the Board and for setting-up an organizational and operational structure. In order to support the Board to fulfil its role and responsibilities, the Board has set up three ad-hoc advisory committees: an Audit Committee, a Risk Committee and

a Nomination and Remuneration Committee. The Management Committee has decided to have in place a Business Risk Committee [BRC] and an Asset and Liability Management Committee [ALCO].

Regarding its management of risks, AG Insurance operates within a robust 'Three Lines of Defence' model. The mission of the Risk Management Function is to promptly identify, measure, manage, report and monitor risks potentially affecting the achievement of strategic, operational and/or financial objectives. The Enterprise Risk Management [ERM] approach provides an integrated approach for managing current and emerging risks, thus supporting long-term stability and growth. It ensures that the strategic planning and limit setting is conform to the risk appetite and tolerance as set by the Board. It encompasses the processes of identifying risks AG Insurance is or may be exposed to, measuring the exposure to these risks, monitoring the risk profile and corresponding capital needs on an on-going basis, taking the necessary and appropriate steps to control or mitigate the risk position, reporting to senior management and to the Board on the solvency and capital position. Sound risk governance is the foundation of an effective risk management framework. The other key components of the Company's risk management framework are a set of risk appetite statements, a risk policy framework, a risk model framework and a set of risk reports. The Chief Risk Officer [CRO], who has overall responsibility for the Risk Management Function at company level, is a member of the Management Committee and of the Board and has a standing invitation to the Risk Committee and the Audit Committee. The risk organization is characterized by a two-layered organization with a central risk department keeping risk oversight while delegating risk responsibilities to Decentralised Risk Managers at the level of the business lines and support units. Besides the Risk Management Function, the CRO Office regroups the Actuarial Function, the Compliance Function, Internal Control and Data Protection.

Risk profile

Risk identification

As an active provider of both Life and Non-Life insurance in the Belgian market, AG Insurance is exposed to a number of risks, internal or external, that may affect the achievement of its objectives.

AG Insurance has a risk taxonomy in place, which provides a consistent and comprehensive approach to risk identification, highlighting and defining the risks the Company is exposed to, i.e. insurance risk, financial risk, operational risk and strategic/business risk.

Exposure to insurance risk is managed through a combination of a number of policies such as an insurance risk policy, an underwriting policy, a product approval policy, a claims management policy, a reserving policy and a reinsurance policy. By having in place an adequate reinsurance programme, insurance risk is transferred to reinsurers through appropriate reinsurance arrangements [treaties]. Under these arrangements, reinsurers assume a portion of the losses and expenses associated with reported and unreported claims in exchange for a share of the premiums. The Company primarily uses external reinsurance to mitigate the impact of natural catastrophes (e.g. windstorms, earthquakes and floods), large single claims from policies with high limits, and multiple claims triggered by a single man-made event. Reinsurers are selected primarily on pricing and counterparty risk considerations.

Financial risk encompasses all risks relating to the value and performance of financial assets and, accordingly, represents the most significant risk that the Company is exposed to. Within financial risk a distinction is made between market risk [including sub-risks such as interest rate risk, spread risk, property risk, equity risk, currency risk, market risk concentration], default risk and liquidity risk. The financial risk framework in place combines investment policies, limits, stress tests and regular monitoring to control the nature and level of financial risks and to ensure that risks being taken are appropriate for both customers and shareholders and are appropriately rewarded. Asset mix research is used to identify the appropriate strategic asset allocation while the market situation and prospects are monitored on a regular basis to decide on the tactical asset allocation. The decision process balances risk appetite, capital requirements, long-term risk and return, policyholder expectations, profit-sharing requirements, tax and liquidity aspects to achieve an appropriate target asset mix.

Operational risk is the risk of losses arising from inadequate or failed internal processes, people or systems, or from external events. AG Insurance has a sound operational risk management in place for administering its portfolio of products, activities, processes and systems, generally covering domains such as fraud; business disruption and system failure; damage to physical assets; employment practices and workplace safety; client, product and business practices; execution, delivery and process. Operational risk procedures include business continuity management and disaster recovery plans, information security management, anti-fraud management, internal control, adequate insurance protection of the Company's assets and risk management with respect to outsourcing contracts and projects. Incidents and operational losses are tracked in an incident register.

Strategic risk generally emerges as a consequence of adverse business decisions, improper implementation of decisions, or a lack of responsiveness to industry changes. Strategic risk is addressed by examining multi-year scenarios, considering the related risks, as well as by monitoring the implementation of the chosen strategy through the multi-year business plan. The latter takes into account all the current and future risks as identified through the full annual key risk identification process. ORSA furthermore provides insights in how these risks could potentially jeopardize the realisation of the strategic and business plan and to what extent these plans have adequate capacity to withstand and mitigate these risks.

Business risk is a potential consequence of changes in external factors - political, economic, social, technological, environmental and legal - impacting the environment and conditions AG Insurance is operating in. It includes elements such as a change in customer behaviour, a change in distribution landscape or a strategic move from competitors. Business risk management requires pre-emptive risk management, anticipating possible developments in the environment. In view of this, AG Insurance uses a structured horizon-scanning process [called 'RADAR'] for detecting the threats [and opportunities] surrounding its activities. This information is exploited in the strategic and multi-year planning process and in ORSA [Own Risk and Solvency Assessment].

Note that AG Insurance acknowledges the possible risk of loss of reputation arising from the adverse perception of its image on the part of its different stakeholders: customers, distributors, counterparties, shareholders, investors, regulator, society, etc., with a possible impact on solvency, earnings, liquidity or its franchise quality. In order to mitigate a possible impact of any event [e.g. as a consequence of the realization of one or more of the risks cited above] on its reputation, AG Insurance has a tradition of long-standing commitment to sustainable business practices and good governance, as well as clear corporate values, a business code of conduct, robust internal controls and a clear dialogue with its stakeholders. A number of Key Risk Indicators are defined in order to properly monitor and react in case these risks might materialize. Communication plans appropriate for the situation that arises have been prepared.

Risk exposure

AG Insurance measures the exposure to quantifiable risks by means of a Partial Internal Model [PIM] used for determining the Solvency II capital requirements [SCR]. Apart from the use of the standard formula for most of the risks, the Partial Internal Model includes an internal model for Non-Life Underwriting risk.

Expressed in terms of SCR capital consumption, a major part of the risk exposure stems from financial risk with spread risk, property risk and equity risk being its main contributors. Note that thanks to the Company's asset and liability duration matching strategy, sensitivity to interest rate movements on the existing book of business is low which is reflected in a relative low SCR for interest rate risk. While Insurance risk is the second largest contributor, operational risk and counterparty risk are contributing to a lesser extent to the risk capital consumption. Note that through a multi-channel and a multi-product approach, diversification is fostered which makes AG Insurance benefit from non-negligible diversification benefits in the determination of its required capital. An important capital relief stems from adjusting required capital for the loss-absorbing capacity of deferred taxes as well.

An own assessment of the solvency and capital needs [ORSA] as required by the supervisor is well integrated in the strategy and business planning process and provides a forward-looking assessment on all the risks inherent in the business and the corresponding solvency and capital needs.

Valuation for solvency purposes

Assets and liabilities are valued on a 'fair value' basis in line with Solvency II requirements with the use of approximations, if needed. Due to a difference in valuation methodology, differences with IFRS exist and can be explained.

Compared to the previous reporting period, model changes relate to the modelling of the cost in Solvency II and the profit-sharing methodology.

Capital management

Capital requires a clearly defined management approach in order to ensure an efficient and effective deployment. The main goal of the Company's capital management process is to fund profitable growth and support the dividend payment capacity.

As at end of 2019 the amount of Own Funds stands at 5.925 million EUR [compared to 6.279 million EUR in 2018], while the total required capital SCR amounts to 3.043 million EUR [compared to 2.689 million EUR in 2018]. This results in a solvency ratio of 195% [compared to 234% in 2018], reflecting the strong capital position of the Company. About 82% of the Own Funds are categorized as Tier 1 capital.

A

BUSINESS AND PERFORMANCE



A.1 Business

A.1.1 General information

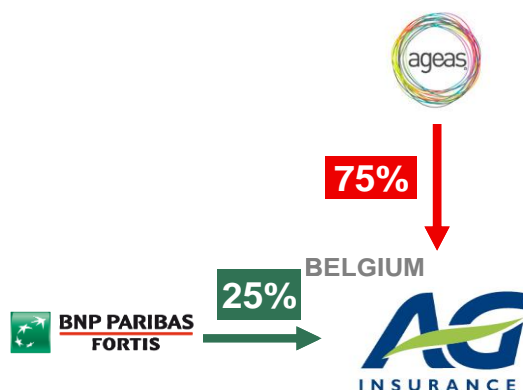
Name and legal form: AG Insurance SA/NV.

Supervisor: National Bank of Belgium, Boulevard de Berlaimont 14, 1000 Brussels, phone 02/ 221 21 11

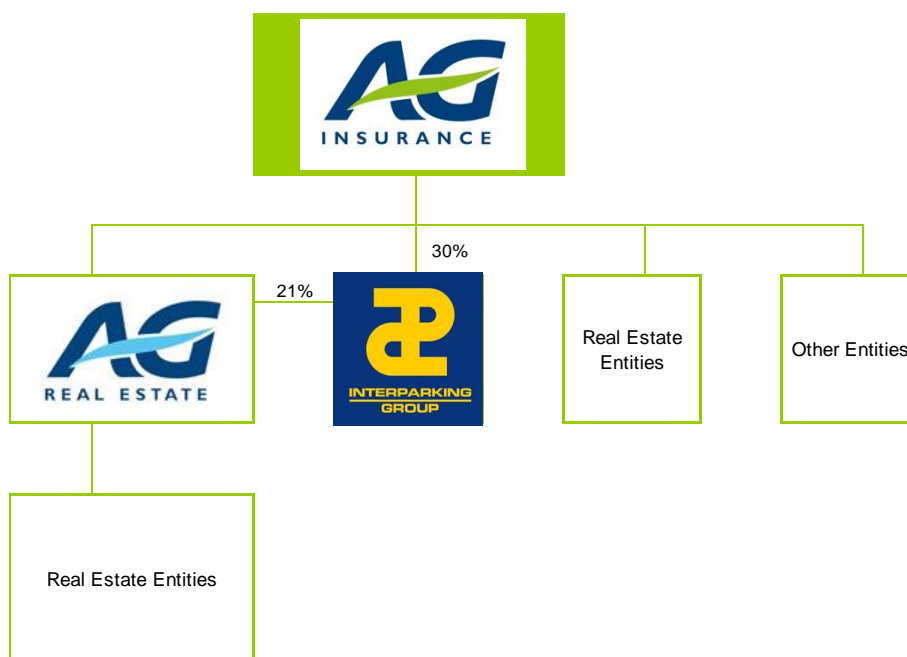
External auditor: PwC Bedrijfsrevisoren SCCRL ['PwC'], Woluwedal 18, at 1932 Sint-Stevens-Woluwe, with Yves VANDENPLAS as permanent representative.

As from May 2009, AG Insurance is owned for 75% by Ageas (currently via Ageas Insurance International NV, a holding company, with registered office at Markiesstraat 1, Brussel, Belgium), and 25% by BNP Paribas Fortis (BNPP Fortis), with registered office at Warandeborg, 1000 Brussels.

The relationship between both shareholders and AG Insurance is described in a Shareholders' Agreement dated 12 May 2009.



AG Insurance structure (simplified presentation):



AG Insurance is either directly or indirectly shareholder of several operating and services companies. The main participations of AG Insurance can be grouped into 2 categories based on the strategic role they fulfil, i.e. operational participations (a distinct operation in a legal entity) in different companies together with structuring participations related to investments in real estate or in specific asset pools. AG Insurance and its subsidiaries employ 6.377 full time equivalents.

AG Insurance's full subsidiary, AG Real Estate SA/NV, is the most important real estate group in Belgium and employs about 250 professionals specialized in real estate asset and property management, investment, financing and development, as well as participating in Public Private Partnership [e.g. 'Scholen van Morgen']. The total value of the portfolio managed by AG Real Estate amounts to around 6.5 billion EUR. Another key element in AG Insurance's real estate asset management is Interparking, a public car park operator and investor employing over 2.400 people and welcoming 121 million customers across 9 European countries.

A.1.2 Material lines of business and material geographical areas

AG Insurance is active on the Belgian Life and Non-Life insurance market and offers a broad range of products and services that cover the needs of individuals and companies. In 2019, AG Insurance recorded an inflow of 6,6 billion EUR, split 68% / 32% between life and non-life insurance. Technical liabilities amount to 62,2 billion EUR.

AG Insurance is considered as market leader in the Belgian Insurance Market. It serves close to 2,8 million Retail customers and 245.000 SME and Corporate clients. AG Insurance serves its clients through the implementation of an opti-channel strategy and distributes its insurance products [both Life and Non-Life] and services via more than 3.950 independent brokers and through a distribution partnership with BNP Paribas Fortis [including its brand Fintro and its affiliate 'bpost bank / bpost banque']. The distribution of Employee Benefits products [Group Life and Health Care insurance] and related services is mainly a business-to-business activity.

AG Insurance operates via three lines of business: Non-Life, Individual Life and Employee Benefits/Health Care – having the following specific key objectives:

- ✓ In the non-life market AG Insurance's strategic ambition is to be the reference broker and bancassurance player with top products and top servicing.
- ✓ In individual life AG Insurance continues to enhance the operational excellence business model which adds value to as well the distribution partners as the end customers.
- ✓ AG Insurance holds a market leadership position in Group Life / health care, based on a customer centricity strategy that emphasises tailor-made solutions based on expert advice, high quality services relying on experts, efficient processes and IT tools.

In recent years, AG Insurance became active in the creation of 'beyond insurance' ecosystems through participations or by new partnerships, in initiatives such as SoSimply, Drysolutions, Respo Repair Solutions, Yongo , Vivay, AG Health Partner, Phil at Home, Conac and Securitas.

A.1.3 Significant business or other events over the reporting period

Over the third quarter of 2019, interest rates have continued to decrease reaching historically low levels. Interest rates are expected to remain low for a protracted period. AG Insurance manages the risk by matching the investments with the guarantees offered on the liabilities.

Supported by new technological possibilities and new means of communication, one can observe that insurers start to develop ecosystems and look for solutions that go beyond insurance offerings. AG Insurance has therefore commercialized the Phil at Home project, an innovative service for longer independent home living and AG Health Partner, a service platform that helps companies to support their employee's wellbeing journey. AG Insurance has also concluded together with BNPPF a partnership with Touring focusing on the development of mobility services.

In line with its CSR strategy linked to its investments, AG Insurance has launched in the course of 2019, a number of initiatives, such as the signing of the UN Principles of Responsible Investment, the exclusion of investments in controversial activities [coal, tobacco and weapons], the integration of ESG principles in investment decisions. In the same context, the "Towards sustainability" label for eleven Branch 23 funds has been obtained while attention went to the protection of the environment [waste reduction, initiatives to lower energy consumption, and obtaining of the CO2-neutral label]. The Beyond Insurance initiatives AG Health Partner and Phil at Home also contribute to this CSR strategy.

A.2 Underwriting performance

The tables below show an overview of the AG Insurance (consolidated, IFRS) performance for the years 2019 and 2018 [by IFRS line of business].

in EUR million		IFRS Product lines							
2019	Life	Guaranteed	Unit Linked	Non-Life	Accident & Health	Motor	Fire	Other	Total
Gross Inflow	4.525,7	3.717,5	808,2	2.085,9	569,7	627,6	678,0	210,7	6.611,6
Net underwriting result	-19,3	-55,5	36,2	121,2	20,3	19,7	40,0	41,1	101,9
Investment result ⁽¹⁾	308,4	308,4	0,0	77,0	17,8	28,4	13,8	17,1	385,5
Total technical result	289,2	253,0	36,2	198,2	38,2	48,1	53,8	58,2	487,4
Capital gains (losses) allocated to operating result	169,9	169,9	0,0	20,0	10,1	4,7	2,3	2,9	189,9
Operating result	459,1	422,9	36,2	218,2	48,2	52,8	56,1	61,1	677,3
Other result									108,8
Profit before taxation									786,1
Technical liabilities (including Shadow Accounting)	61.254,8	51.454,4	9.800,4	4.078,3	1.958,9	1.100,8	401,2	617,4	65.333,1

(1) excluding capital gains (losses) allocated to operating result

in EUR million		IFRS Product lines							
2018	Life	Guaranteed	Unit Linked	Non-Life	Accident & Health	Motor	Fire	Other	Total
Gross Inflow	4.146,0	3.281,3	864,7	2.000,1	531,7	607,5	655,9	205,0	6.146,1
Net underwriting result	5,1	-26,8	31,9	127,5	23,7	44,3	25,2	34,3	132,6
Investment result (1)	334,1	334,1	0,0	84,0	17,7	34,1	12,9	19,2	418,1
Total technical result	339,2	307,3	31,9	211,6	41,5	78,4	38,1	53,5	550,8
Capital gains (losses) allocated to operating result	99,0	99,0	0,0	11,2	5,3	3,0	1,1	1,7	110,2
Operating result	438,2	406,3	31,9	222,8	46,8	81,4	39,3	55,2	661,0
Other result									87,1
Profit before taxation									748,0
Technical liabilities (including Shadow Accounting)	57.257,0	49.096,3	8.160,7	3.997,8	1.883,2	1.078,4	415,7	620,5	61.253,3

(1) excluding capital gains (losses) allocated to operating result

Unless stated otherwise, the comments below relate to IFRS lines of business identified in the tables above. Note that 'Life' mainly comprises the Solvency II Lines: 'Insurance with profit participation', 'Other Life Insurance' and 'Index-linked and Unit-Linked insurance'. Non-Life mainly comprises the Solvency II lines 'Non-Life insurance and reinsurance obligations', 'Health insurance', 'Income protection' and 'Annuities stemming from non-life insurance contracts'.

Some comments:

- ✓ *Life business:* Gross inflow increased considerably compared to last year [+9%]. The inflow in Guaranteed products grew with more than 13%. The Life Technical Liabilities show an increase of 7% compared to year-end 2018 as a result of strong growth in Unit-Linked and in Group Life. The operating result Life was again solid at 459 million EUR high compared to last year [438 million EUR].
- ✓ *Non-Life business:* Gross inflow amounted to 2,1 billion EUR, up 4% compared to last year, showing growth for all business lines. Nonetheless the impact of higher claims in Accident, Health and Motor, and adverse weather events in Household, the Non-Life business result kept growing at a steady pace.

A.3 Investment performance

A.3.1 Income and expenses by asset class & Gains and losses recognized directly in equity

Financial income and allocated capital gains (net of impairments), before investment costs, included in the IFRS consolidated profit before taxation stands at 2.478 million EUR for 2019 and can be split as below:

	Year	Year
in EUR million	2019	2018
Interest, dividend income and other investment income	2.351,5	2.406,5
Realised and unrealised gains and losses on investments (recognized in profit and loss)	269,5	240,1
Finance costs (relate mainly to subordinated debt, borrowings & other liabilities)	-96,7	-97,4
Additions to (or reversals from) impairment allowances	-46,7	-129,9
Total	2.477,6	2.419,3

The "Interest, dividend income and other investment income is further detailed as follows for the year ended 31 December 2019.

Interest and other investment income

	Year	Year
in EUR million	2019	2018
Interest income:		
Investments	1.303,5	1384,4
Loans	250,9	225,4
Cash and cash equivalents	1,5	1,5
Other interest income	1,1	3,9
Total interest income	1.557,0	1.615,2
Car park revenues	441,7	430,7
Rental income	207,5	216,6
Dividend income	117,9	119,6
Other investment income	27,5	24,4
Total Interest and other investment income	2351,5	2.406,51

In addition to the amounts recognised in the income statement, changes in revaluation of investments available-for-sale are recognized directly in equity (and these might subsequently be reclassified to profit and losses). The (pre-tax) increase (decrease) in revaluation of investments available-for-sale amounted to 2.264 million EUR in 2019 and (1.555) million EUR in 2018.

A.3.2 Investments in securitization

The structured products portfolio comprises mortgage backed securities, student loans and asset backed securities. As at year end 2019 its value was 31,9 million EUR of which 9 million EUR were guaranteed by the European Investment Fund. This part of the portfolio is in run-off.

A.4 Performance of other activities

AG Insurance has no other material activities.

A.5 Any other information

No other information.

B

SYSTEM OF GOVERNANCE

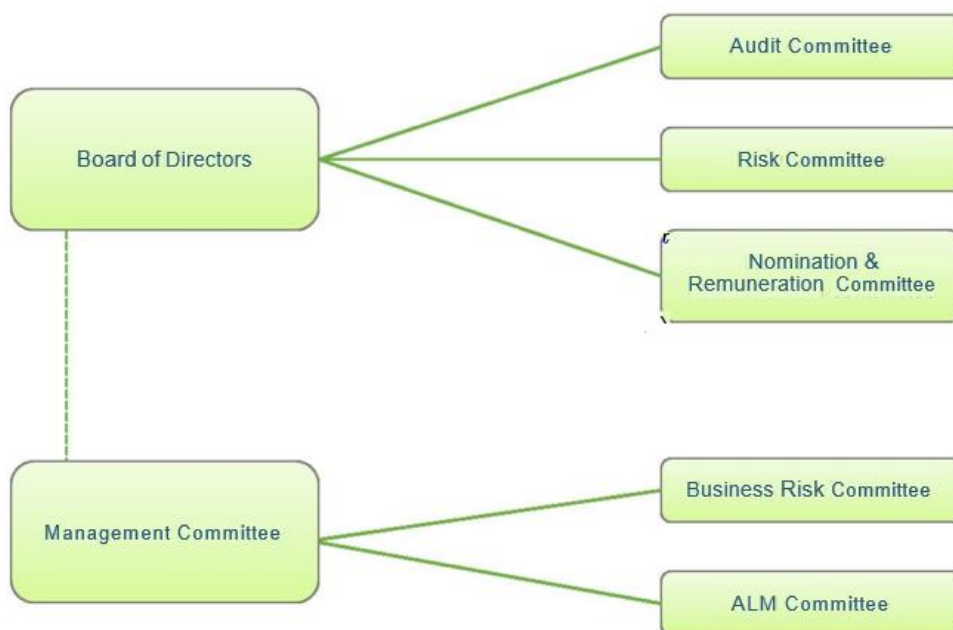


B.1 General information on the system of governance

B.1.1 Company structure

B.1.1.1 Scope

In accordance with the regulations related to the supervision of insurance companies in Belgium, AG Insurance makes a clear distinction in responsibility between the **Board of Directors** and the **Management Committee**, of which the role, responsibilities and authority are described hereafter:



B.1.1.2 Board of Directors

The Board determines the general strategy of AG Insurance and provides it with strategic directions. In this respect, the Board is the ultimate decision-making body of AG Insurance, with the exception of matters reserved for the General Meeting of Shareholders or the Management Committee by the company law or by the Articles of Association. The Board also decides on the governance structure, monitors the risk management framework, defines and supervises the Integrity Policy and the Data Protection framework and supervises the Management Committee. The basic aim underlying decision-making by the Board is to perpetuate a sustainable and successful insurance business. The Board believes that this involves primarily focussing on profitable growth, while remaining sensitive to the interests of the stakeholders who are essential to a successful business: the Company's distribution partners, its customers, its employees, its shareholders and the communities in which AG Insurance operates.

In order to support the Board to fulfil its role and responsibilities, the Board has set up in accordance to Circular NBB_2016_31 three ad-hoc advisory committees the Audit Committee, the Risk Committee and the Nomination and Remuneration Committee. These committees assist the Board in specific areas which they cover in appropriate detail and upon which they make recommendations to the Board. However, only the Board has the power to take decisions within the scope of its competences and responsibilities. The role of the Audit Committee is to assist the Board in fulfilling its supervision and monitoring responsibilities with respect to internal control (including internal control over financial reporting) and audit within AG Insurance and its main subsidiaries. The Risk Committee provides advice to the Board on all aspects related to the current and future risk strategy and risk tolerance and supports the Board in exercising supervision of the implementation of that strategy by the Management Committee. The role of the Nomination and Remuneration Committee is to assist the Board in all matters relating to the appointment, removal, target setting, performance evaluation and remuneration of "Identified Staff". It takes care that the Remuneration policy does not incentivize excessive risks taking or behaviours not being in line with the long-term interests of AG Insurance or its stakeholders.

B.1.1.3 Management Committee

The role of the Management Committee is to manage AG Insurance in line with the values, strategies, policies, plans and budgets endorsed by the Board of Directors. In exercising this role, the Management Committee is responsible for complying with all relevant legislations and regulations, and specifically with the legal and regulatory framework applicable to the Company and its subsidiaries. The Management Committee has the collective responsibility for conducting its activities and for reporting on these to the Board and its advisory bodies. Within this context, the Management Committee has decided to have in place two committees: the Business Risk Committee (BRC) and the Asset and Liability Management Committee (ALCO). The Business Risk Committee is the committee through which the Management Committee monitors the overall risk profile of AG Insurance and its subsidiaries, and ensures that the risk management system is suitable, effective and proportionate to the risks that AG Insurance is taking. Therefore, the Business Risk Committee endorses all key elements of this system (governance, policies, processes, models and reporting). Based on the risk reporting and recommendations, the BRC decides on appropriate risk response and risk mitigation. The Asset and Liability Management Committee is the committee through which the Management Committee defines and monitors the ALM strategy and strategic asset allocation (with respect to equities, bonds, real estate and other admissible asset classes) in line with the policies as defined by the Board. Within this context, the Asset and Liability Management Committee focuses on the ALM position and the market risk positions and decides on hedging strategies as well as on financial aspects of the pricing of life products.

With regard to the participations held by AG Insurance, each member of the Management Committee is responsible for the subsidiaries and associates allocated to him, being included in the reporting scope of the Management Committee member. This reporting relates mainly to the long-term and strategic vision, the development of the business and the internal control in its broadest sense. The list of the allocation of the participations is yearly reviewed by the Management Committee.

B.1.1.4 Key [control]functions

The main roles and responsibilities of the four independent control functions, i.e. the Risk Function, the Actuarial Function, the Compliance Function and the Internal Audit are described further in this chapter.

B.1.2 Remuneration policy and practices

B.1.2.1 Scope - Categories

The remuneration principles set out in the AG Insurance Remuneration policy apply to AG Insurance and in particular to the Non-Executive Directors, the Management Committee members (Executive Board members), the holders of the independent Control Functions and the Risk Takers.

B.1.2.2 Remuneration of the Non-Executive Directors

The remuneration of Non-Executive Directors is determined by the shareholders of AG Insurance at the General Meeting of Shareholders. Detailed proposals for the remuneration of Non-Executive Directors are formulated based upon recommendations provided by the Nomination and Remuneration Committee and outside experts.

For Non-Executive Directors, the levels and structure of the remuneration reflects their general and specific responsibilities as well as general market practice. The remuneration of Non-Executive Directors includes both a regular fixed fee as compensation for Board membership and an attendance fee for Board meetings. Membership in Board Committees is also remunerated with an additional base remuneration and a Board Committee meeting attendance fee.

Non-Executive Board members do not receive any performance-related remuneration such as an annual incentive awards or stock options. The Company does not provide any contribution to their pension arrangements. Non-Executive Board members may also receive remuneration from AG subsidiaries where they hold a Director position. Non-Executive Directors may transfer their remuneration to other beneficiaries upon request. Non-Executive Directors will not be entitled to any severance pay.

B.1.2.3 Remuneration of the Management Committee members

The remuneration of the Management Committee members is determined by the Board of Directors upon recommendation by the Nomination and Remuneration Committee, in compliance with the prerogatives of the General Meetings of Shareholders. Both the levels and structure of remuneration of Management Committee members are analysed on an annual basis.

The remuneration of the Management Committee members is designed to ensure the organization's continued ability to attract, motivate and retain executive talent; to promote achievement of demanding performance targets and long-term sustainable growth in order to align the interests of executives and shareholders in the short, medium and long term while however avoiding excessive risk-taking behaviour and to stimulate, recognize and reward both strong individual contribution and solid team performance.

The reward package for the Management Committee members reflects a concept of integrated total compensation combining the following four major components of pay: base salary, annual incentive (short-term performance related bonus), long-term incentive and pension. In calibrating the various remuneration components, the objective is to position the overall remuneration levels in line with compensation practices of other insurance companies.

The variable components are subject to a maximum. A large portion of the total compensation package of Management Committee members consists of variable remuneration and is therefore 'pay at risk'. The total reward package is part of the contract with the Management Committee member providing also the main characteristics such as and amongst others the expiration date, the termination clauses and various other clauses such as confidentiality and exclusivity.

B.1.2.4 Remuneration of the Independent Control Functions and the data protection officer

For the members of the Independent Control Functions and the Data Protection Officer the variable component of the remuneration is independent of the results of the Company.

B.1.2.5 Remuneration of the Risk Takers

There are no other 'Risk takers' at AG Insurance than the members of the Management Committee.

B.1.2.6 Review Process of the Remuneration policy

The remuneration policy is reviewed and updated on an annual basis, as needed. The Board of AG Insurance defines the Remuneration policy based on information and recommendations provided by the Nomination and Remuneration Committee. This information is discussed at AG Insurance Board meetings, and the Board takes decisions that are appropriate to the specific context of AG Insurance.

B.1.3 Material transactions with shareholders and persons having a significant influence

No material transactions during the reporting period have taken place with shareholders, with persons who exercise a significant influence on the undertaking, and with members of the administrative, management or supervisory body.

B.1.4 Information on material transactions

When exceeding on a cumulative basis the threshold of 100.000 EUR, the loans, credits or warranties granted by AG Insurance towards Board members, members of the Management Committee and their direct relatives must be immediately disclosed to the Board leaving the time to oppose.

Material transactions (insurance contracts) by the Board members, members of the Management Committee and their direct relatives are concluded on commercial terms in conformity with prevailing market conditions [in accordance to the NBB Circular 2017_21 dated 7 July 2017].

The Company will take all appropriate actions with regard to services that are required to be disclosed under the current legislation and/or regulations.

B.2 Fit and Proper requirements

B.2.1 Fit and Proper requirements

AG Insurance applies the rules set forth in the amended NBB Circular 2016_31 and the "Fit & Proper Handbook" [NBB Circular 2018_25] to the members of the Board of Directors, the members of its Advisory Committee, the members of the Management Committee and the Key Functions.

B.2.2 Fit and Proper process

Principles and guidelines as to the selection, development and appraisal of Members of the Board of Directors and of the Management Committee as well as the different process steps for the selection, training and evaluation of Board members, Members of the Management Committee, the key functions and the independent control functions within AG Insurance are in place.

AG Insurance makes every effort to check a person's suitability, e.g. by carrying out an assessment, not only before taking a position but also during the performance of a position, on a periodic basis. If the result of the assessment of suitability is positive, AG Insurance will in turn send the NBB full and reliable information about the person's suitability. Based upon this information, supplemented by details collected by the NBB on its own initiative, the NBB will carry out its own assessment of the suitability of the person in question.

Each board member is requested to sign a statement (written declaration) of *fitness & properness* in which he/she confirms that he/she will unreservedly conform to the AG Insurance 'fit and proper' standards and that he/she will give immediate notice of any events which might turn out to be important in this respect. This statement has to be delivered each year.

As the financial sector is constantly evolving, AG Insurance takes all necessary steps to implement judicious continuous training for all persons concerned, including the Board members.

B.3 Risk management system (including the own risk and solvency assessment)

B.3.1 General description, strategy and objectives

As an active provider of both Life and Non-Life insurance in the Belgian market, AG Insurance is exposed to a number of risks, internal or external, that may affect the achievement of its objectives. Risk Management is an integral part of the business and a key concern throughout the Company. The mission of the Risk Management Function is to promptly identify, measure, manage, report and monitor risks potentially affecting the achievement of strategic, operational and/or financial objectives. The *Enterprise Risk Management* (ERM) approach provides an integrated approach for managing current and emerging risks, thus supporting long-term stability and growth. It ensures that the strategic planning and limit setting conform to the risk appetite and tolerance as set by the Board. It encompasses the processes of identifying risks AG Insurance is or may be exposed to, measuring the exposure to these risks, monitoring the risk profile and corresponding capital needs on an on-going basis, taking the necessary and appropriate steps to control or mitigate the risk position, reporting to senior management and to the Board on the solvency and capital position. Sound risk governance is the foundation of an effective risk management framework. The other key components of the Company's risk management framework are a set of risk appetite statements, a risk policy framework, a risk model framework and a set of risk reports.

AG Insurance's *strategy* as to risk management consists in adopting a holistic approach to managing risks that is coordinated at the highest level within the organization, through an open environment conducive to effective communications about risks and risk management throughout the Company, eliminating functional and departmental barriers to achieve an integrated, proactive and forward-looking approach to manage all key risks, integrating risk management into the strategy and decision making and understanding and effectively managing the relationship between risk, capital and reward within the boundaries of AG Insurance's strategy.

Risk management focuses on achieving the *objectives* of understanding the key risks taken and maintain a solvency and liquidity position such that no plausible scenario would cause the Company to default on its obligations to policyholders and debt holders; defining the risk appetite and ensuring that the risk profile is kept within set limits; supporting the Company's decision-making process by ensuring that consistent, reliable and timely risk information is available to the decision makers and by using that information to provide a risk opinion; encouraging a strong risk awareness culture where managers are aware of the risks to their business, manage them effectively and report them transparently.

B.3.2 The Risk Management framework

The risk management framework has been designed to support the mission and objectives of the Risk Management Function. It incorporates a number of core components that form a consistent and effective risk management framework, in accordance with the principles of 'Enterprise Risk Management', underlying the process of systematically and

comprehensively identifying material risks, assessing their impact and implementing integrated strategies to achieve the Company's objectives.

B.3.2.1 Risk Appetite framework

In a set of Risk Appetite statements, AG Insurance expressed the amount, type and tenor of risk it is willing to take and is able to afford in pursuit of its objectives taking into account the expectations of its different stakeholders. Through a formal Risk Appetite policy approved by the Board, the Company has defined a clear Risk Appetite framework, setting formal boundaries for risk-taking. This framework is articulated around a number of quantitative criteria which are primarily based on the stand-alone ability and willingness to accept volatility in the key areas of Solvency, Earnings and Liquidity. These quantitative statements are complemented with qualitative risk appetite statements aiming at protecting the 'Franchise quality'¹ of the Company paying attention to the internal functioning and efficiency and to the relationship with the major stakeholders (staff, customers, partners, shareholders, investors, regulator and society).

Regarding Solvency, a key component in the quantitative criteria, AG Insurance strives to maintain a capital position such that no plausible scenario would cause the Company to default on its obligations to policyholders. To accomplish this, the solvency and capital position are monitored within a framework based on the Solvency II framework as entered into force on January, 1st 2016. For management purposes the Pillar I capital requirements are completed with an own best view as to the risk-based assessment of the capital needs.

Appropriate management actions are triggered depending on the current position in the different monitoring frameworks as defined. The risk appetite is further cascaded down into workable risk limits at the level of the different risk takers and which are monitored on a frequent basis.

B.3.2.2 Risk Policy framework

AG Insurance has designed a Risk policy framework as a core element for formalising Enterprise Risk Management. This framework defines minimum requirements on how risk management activities are organized within the Company and sets the boundaries within which the business lines from a risk perspective have to act.

B.3.2.3 Risk Model framework

The Risk Model framework contains a set of [risk] models which have the objective to quantify insight in a number of risks the Company is exposed to. This information is used to support decision making at the strategic level of the Company as well as in the daily operations [use test].

Risk models (including the Non-Life internal model) are subject to a robust model governance encompassing model control and validation. Model developments and updates follow the procedures as described in the Model Management policy and in the SII Valuation policy. They allow the Model Control Board to control the full life cycle of the models. The overview of all the risk models is given by the Model Register containing standard information for each model, together with an overall model landscape that describes how the models are linked to each other, complemented with key inputs and outputs. Regarding the validation of the models, an independent model validation team is operating at the level of Ageas Group.

B.3.2.4 Risk Reporting framework

AG Insurance has a Risk Reporting framework in place which defines a set of reports with the objective to communicate the necessary information to the different stakeholders, hence contributing to the integration of the risk dimension in the business decision-making process.

B.3.3 Risk process and risk systems

Risk management is performed following the well-known risk management cycle and related processes including risk identification, risk assessment, management, monitoring and reporting. An important process to mention is 'ORSA', the 'own risk and solvency assessment' as required by the supervisor. The regular ORSA (and related ORSA report) is well integrated in the strategy and business planning process and provides a forward-looking assessment on all the risks inherent in the business and the corresponding solvency and capital needs. At the same time attention is paid to management actions (if any) to stay within the defined risk appetite and tolerance (if breached). This forward-looking view is provided in a base case as well as in stressed situations (based on relevant stress tests and scenarios).

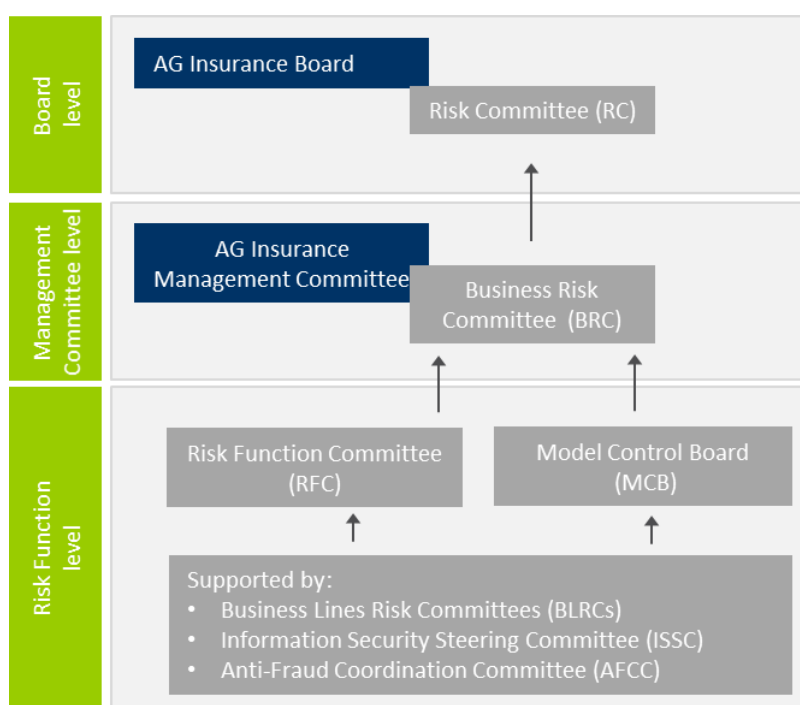
¹ Franchise quality is a qualitative metric associated with the intrinsic value as determined by the intangible assets such as its brand, its human capital, the quality of its management, its corporate culture, knowledge, etc. embedded in the Company.

Risk processes are complex and hence require appropriate systems and supporting technologies to allow the Company to manage these. AG Insurance disposes of appropriate risk modelling systems to carry out complex calculations, to quantify the risk exposures, to assess the impact of stress tests and to aggregate risks. Risk monitoring systems are present to analyse risk exposures, monitor any changes in the risk profile of the Company and to check that risk exposures remain within the risk appetite and tolerance as defined by the Board.

B.3.4 Integration of the Risk Management System in the organizational structure and in the decision-making process of the Company

Sound risk governance is the foundation of an effective risk management framework. Accordingly, AG Insurance has adopted the industry standard 'Three Lines of Defence' model which recognises responsibility for risk management within the business lines, the independent risk management function and internal audit. Furthermore a structure is in place with following features:

- ✓ A Chief Risk Officer who has overall responsibility for the Risk Management Function at the Company level and who is a member of the Management Committee and of the Board. The CRO has a standing invitation to the Risk Committee and the Audit Committee.
- ✓ A two-layered organization of the Risk Management Function with a central Risk department keeping risk oversight while delegating risk responsibilities to Decentralised Risk Managers at the level of the business, support units and subsidiaries. This operating model ensures greater proximity to the business and operations in view of better reflecting their needs, hence fostering the necessary embedding of risk management, awareness and culture throughout the Company. Note that the Chief Information Security Officer (CISO) – who is responsible for information security across all business lines and support units – functionally reports to the CRO.
- ✓ The CRO Office regroups the Risk Management Function, the Actuarial Function and the Compliance Function respecting independence and avoiding conflicts of interest. Besides these three control functions, also Internal Control and Data Protection are part of the CRO Office activities. Note that the CRO Office adopted a transversal GRC [Governance, Risk & Compliance] approach encompassing a set of processes, practices and tools, with a risk-control-action philosophy that runs across departments and functions allowing the creation of a global comprehensive and holistic risk view across the Company.
- ✓ Several risk committees operating at different levels of the organization, including a Risk Committee at the level of the Board, a Business Risk Committee at the level of the Management Committee, a Risk Function Committee [supported by different Business Line Risk Committees] as well as a Model Control Board at the level of the Risk Management Function as depicted below:



B.3.5 Own risk and solvency assessment

B.3.5.1 ORSA Process

AG Insurance performs an annual ORSA which is closely linked to the yearly Strategic Review and Multi-year business planning processes. In order to achieve a close relation between strategy – risks – solvency/capital, AG Insurance sets up an integrated process that provides the ORSA with essential bits of information with regard to the current and forward-looking view of the risks related to the strategy and business plan (over the next three years), the corresponding solvency needs and the capital position in a base case as well as in stressed situations. The ORSA process therefore requires the definition of a number of relevant stress tests that could hinder the realization of the business objectives. To this end the Strategic Review is accompanied by a 'full' bottom-up key risk identification exercise where business units and support units are invited to reflect upon the major (current and emerging) risks that could possibly impact the realization of the business objectives. This exercise provides a sound basis for determining a number of relevant stress tests and scenarios which are expected to give Management more insight how the base case of the business plan might evolve under extreme but plausible stress scenarios.

B.3.5.2 Frequency of the ORSA

Remark that besides the annual ORSA process, the risk management system allows to perform an ad-hoc or non-regular (full or partial) ORSA as well and this in case circumstances require this. A significant change in the risk profile, in the composition of own funds or in capital management/budget assumptions and forecasts, an acquisition (or divestment) that significantly changes business, risk or solvency profile, a significant change to the strategy, affecting budget assumptions in material ways, a significant change in the external business environment that has a big impact on the asset-portfolio, a significant change in the liability portfolio, a significant deviation from the Risk Appetite indicators (solvency, liquidity, earnings, franchise quality), a significant change in regulation or a significant change due to shareholder decisions could trigger such an ad hoc ORSA.

B.3.5.3 Method of calculation of own solvency and capital needs

For the calculation of the own solvency needs and capital position, AG Insurance uses a 'Pillar II methodology' which consists in using a Pillar I partial internal model for the capital assessment of the risks (i.e. standard formula for all risks except the use of an internal model for Non-Life underwriting risk) complemented with an own view on the modelling of a number of risk factors such as spread risk (with respect to spread risk on government bonds and corporate bonds), property risk (proper calibration of the shock on real estate), inflation risk (in particular for Workmen's compensation) and the treatment of Employee benefits for own employees (IAS 19), as well as on the determination of the Own funds (valuation of the Interparking concessions, the use of an Expected Loss Model and the treatment of Employee benefits for own employees (IAS 19)). Standard formula aggregation techniques are used to integrate the Non-Life internal model into the total SCR calculation.

B.4 Internal control system

B.4.1 Description of the Internal control framework

AG Insurance has an internal control framework in place of which the domains, roles and responsibilities are described in the Internal Control policy. This framework governs a number of control domains such as 'Operations' in view of an appropriate operational functioning of the institution, enabling the firm to achieve its objectives, an economically sound and efficient use of the firms resources, oversight of all the risks and adequate risk management in order to protect the firm's assets; 'Financial reporting' with the objective to have a complete and reliable financial reporting and management information; and 'Compliance' with laws and regulations as well as with internal policies and procedures.

B.4.2 Mission statement of the Compliance function

The Compliance function, established as an independent second line control function, sees to it that the Company and its employees comply with laws, regulations, internal rules and ethical standards that fall within its areas; aims at creating a dynamic of continuous improvement of the quality in compliance; aims at establishing a relationship of trust and mutual understanding with the regulatory and supervisory authorities.

In performing its monitoring activities on the operational effectiveness of compliance checks the Compliance function uses the surveillance results as provided by contact persons within the first line based on empiric tests, follow-up of appropriate risk indicators (such as complaints, incidents or exceptions) and interviews. Compliance informs the relevant

business and support units of the results of its monitoring activities and follows up upon the respect of its recommendations.

B.5 Internal Audit Function

B.5.1 Mission Statement of the Internal Audit Function and implementation

Internal Audit provides an independent, objective and relevant assurance; it is designed to enhance and protect the organisation's value, and to improve AG Insurance's operations. Internal Audit helps AG Insurance accomplish its objectives by bringing a risk based systematic approach to evaluate the effectiveness of governance, risk management and control processes, and to recommend solutions for optimizing them. Internal Audit's scope includes all AG Insurance activities and entities, including therefore the activities of major subsidiaries, as well as important and critical outsourced activities. The internal audit methodology in place and applied is in conformance with the International Professional Practices framework (IPPF). Internal Audit also operates in accordance with the principles and rules set by the Belgian regulatory authorities for the internal audit function in the financial sector.

To achieve its mission, Internal Audit provides assurance, and to a lesser extent, advice. Assurance services involve internal audit's objective assessment of evidences in order to provide an independent and relevant opinion regarding an entity, operation, function, process or system. The nature and scope of an assurance assignment are determined by Internal Audit. Internal Audit may also provide advice on the efficiency and effectiveness of governance, risk management and control processes, complementing its assurance services, or at the request of the Management Committee. This advisory role is an ancillary role, and under no circumstances does it reduce the effectiveness of Internal Audit's primary mission of delivering an independent and relevant assurance.

B.5.2 Safeguards for independence and objectivity

In terms of independence and objectivity, Internal Audit complies with the following principles:

- ✓ Independence for internal auditors is the freedom from conditions that threaten their ability to carry out internal audit responsibilities in an unbiased manner.
- ✓ Objectivity: internal auditors have to exhibit the highest level of objectivity in gathering, evaluating, and communicating information about activity or process being examined. Internal auditors make a balanced assessment of all the relevant circumstances and are not unduly influenced by their own interest or by others in forming judgements.

B.6 Actuarial function

The Actuarial function, organized as an independent second line control function, provides reasonable assurance through independent reports on the adequacy and the compliance of the technical provisions in statutory and in IFRS accounts; the adequacy and the compliance of the profit sharing policy; the appropriateness of the underwriting and pricing practice of the company through assessment of profitability of the portfolio and product pricing (including risk/return) and benchmarking these to company targets and limits; the appropriateness of the ALM and its impact on the profitability of the portfolio or products; the appropriateness of the reinsurance program of the company; the appropriateness and adequacy of the methodologies, models, assumptions and data used for the Solvency II technical provisions calculations and the back-testing of these provisions.

Furthermore, the Actuarial function contributes to the effective implementation of the Risk Management System, in particular to the risk modelling underlying the calculation of the solvency and minimum capital requirements and ORSA. The Actuarial function in particular exercises the role of coordinating the calculation of Solvency II technical provisions. The reports of the Actuarial Function are yearly, quarterly or ad-hoc and presented to the Management Committee or the Risk Committee.

B.7 Outsourcing

The Compliance Officer of AG Insurance in agreement with the Board of Directors has established an Outsourcing policy and a procedure ensuring the compliancy of the existing and future outsourcing contracts of AG Insurance with the requirements of the applicable outsourcing regulations. By means of a mandatory completion of a Business Risk

Assessment template, relevant risk bodies are informed and discuss projects relying on outsourcing. AG Insurance has integrated in its internal outsourcing process the principles as set by the NBB Governance circular 2016_31 (as amended in 2018 by the NBB) which must be applied by the insurance companies engaged in an outsourcing process. A reporting towards the Management Committee and the Board of Directors is in place.

The table below gives an overview of the critical or major operational activities, functions or tasks outsourced.

Activity	Country
Solvency II services including amongst others model validation	Belgium
Mainframe Servicing	Belgium
Imaging & archiving [scanning].	Belgium
Postal mail management: triage the mail, open and scan certain pieces of the mail and send the scans electronically to the customer.	Belgium
Printing of our documents	Belgium
Data Center: space and related facilities in a secured area.	Belgium
Non-Life Claims - Case management tool based on a cloud solution	USA

B.8 Any other information

The effectiveness of the governance system is assessed on an annual basis as part of the System of Governance Adequacy assessment (SOGA). The SOGA is a self-assessment performed at the level of the Management Committee which is facilitated by the second line. It capitalizes on the Internal Control assessment, audit assignments and separate discussions on the governance with the respective responsible. Based on the different input sources, the SOGA report is drafted including conclusions on the adequacy of the system of governance and the identified shortcomings (if any).

Overall, AG Insurance considers its system of governance to be appropriate taking into account the nature, scale and complexity of the risks inherent in its business.

C

RISK PROFILE



AG Insurance offers a wide range of insurance products and, like other insurance companies, faces a variety of risks, such as insurance risk, financial risk, operational risk, strategic and business risks. A risk taxonomy is in place which provides a consistent and comprehensive approach to risk identification, highlighting and defining the risks the Company is exposed to.

C.1 Insurance risk

The results of life, health and non-life insurance business significantly depend upon the extent to which actual claims experience remains consistent with the assumptions used in the pricing of products, as well as the extent to which technical provisions prove adequate. Besides the exposure to the risk of pricing and provisioning assumptions being inadequate, the Company is also exposed to mass lapse risk, preventing expected profit to emerge due to a massive loss of business, as well as to catastrophic risk arising from pandemics, natural catastrophic events (such as windstorms, hailstorms, floods, earthquakes) and man-made disasters (such as accidental explosions and acts of terrorism).

Each business manages insurance risk through a combination of a number of policies such as an insurance risk policy, an underwriting policy, a product approval policy, a claims management policy, a reserving policy and a reinsurance policy. In managing insurance risk, particular attention is given to the underwriting process (encompassing risk selection and pricing) in order to ensure that the customer segment purchasing the product is consistent with the underlying assumptions made about the customers when the product was designed and priced. Underwriting involves review procedures by actuarial staff examining the actual loss experience. A range of indicators and statistical analysis tools is employed to further refine underwriting standards in order to improve the loss experience and/or ensure that pricing and reserving are adjusted appropriately.

Business lines set premiums at levels that will ensure that the premiums received and the investment income earned exceed the total value of claims, plus handling and management costs. Pricing appropriateness is tested with the use of a range of techniques and key performance indicators appropriate for a particular portfolio. Next to a priori profit testing, an a posteriori monitoring is in place based on the evolution of metrics such as fair value and combined ratio.

AG Insurance closely monitors reserving risk, i.e. the risk that the technical provisions prove inadequate, through appropriate reserving policies including tests, which are performed on each reporting date and which can, if necessary, lead to recognition of additional liabilities that are charged to the income statement. Qualified actuaries (the Actuarial Function) express their independent opinion on the overall adequacy of the liabilities arising from the insurance contracts.

AG Insurance also monitors and assesses insurance risk concentration according to the Solvency II methodology that underpins the calculation of the SCR, including geographical concentration with respect to property insurance (i.e. both man-made and natural catastrophe risk) and concentration with respect to insured events for health insurance (accident concentration risk). The geographical analyses with respect to property insurance, for both natural catastrophe risk (analysis per CRESTA zone²) and man-made catastrophe risk (analysis per 200m-circle³), are showing a geographically well-diversified portfolio. Concentration risk in Health insurance is monitored on the basis of the SCR calculation for accident concentration risk, showing the low materiality of this risk.

In the normal course of business, risk exposure to certain underwriting risks in life, health and non-life insurance business is transferred to reinsurers through appropriate reinsurance arrangements (treaties). Under these arrangements, reinsurers assume a portion of the losses and expenses associated with reported and unreported claims in exchange for a share of the premiums. The Company primarily uses external reinsurance to mitigate the impact of natural catastrophes (e.g. windstorms, earthquakes and floods), large single claims from policies with high limits, and multiple claims triggered by a single man-made event. Reinsurers are selected primarily on pricing and counterparty risk considerations.

C.2 Financial risk

Financial risk encompasses all risks relating to the value and performance of financial assets and, accordingly, represents the most significant risk that the Company is exposed to. The risk framework in place combines investment policies, limits, stress tests and regular monitoring to control the nature and level of financial risks and to ensure that risks being taken are appropriate for both customers and shareholders and are appropriately rewarded.

² CRESTA is an acronym for 'Catastrophe Risk Evaluation and Standardising Target Accumulations'.

³ For each risk location an analysis is made of the totality of risks within a 200 meter radius.

Asset mix research is used to identify the appropriate strategic asset allocation while the market situation and prospects are monitored on a regular basis to decide on the tactical asset allocation. The decision process balances risk appetite, capital requirements, long-term risk and return, policyholder expectations, profit-sharing requirements, tax and liquidity aspects to achieve an appropriate target asset mix.

Within Financial risk a distinction can be made between Market risk, Default risk and Liquidity risk.

C.3 Market risk

Market risk refers to the risk of adverse changes in the financial situation resulting from fluctuations in the interest rate environment and/or in market prices of financial instruments. Market risk includes sub-risks such as interest rate risk, spread risk, property risk, equity risk, currency risk as well as market risk concentration.

C.3.1 Interest rate risk

The level of and volatility in interest rates may adversely affect AG Insurance's business. To be able to meet future liabilities, insurers invest in a variety of assets that typically include a large portfolio of fixed income securities. The evolution in interest rates may impact the return earned as well as the market value of the fixed income portfolio. Interest rates are highly sensitive to many factors, including governmental, monetary and tax policies, economic and political considerations, inflation, governmental debt, the regulatory environment, and other factors that are beyond the Company's control.

As cash flows can be [re-)invested at higher rates, the earnings of an insurer will typically be positively impacted by an increase in interest rates, though only over a protracted period of time. The largest beneficiaries will be life insurers with large traditional books of participating business. Surrenders or lapses could, however (and certainly in case of a steep rise in interest rates), temporarily increase as higher investment returns may be available elsewhere and policyholders would have an incentive to switch. This is particularly the case if surrender penalties are relatively low.

To reduce the impact of the interest rates on its net asset value, AG Insurance attempts to match its liabilities with fixed income assets that have the same, or a similar, sensitivity to interest rates, thereby offsetting the interest rate risk between assets and liabilities. Interest rate risk is closely monitored using a number of indicators including mismatch analysis and stress testing. Investment policies usually require close matching unless specifically approved otherwise. If deemed appropriate, derivative instruments such as interest rate swaps and swaptions are used to mitigate the exposure to interest rate risk.

C.3.2 Spread risk

AG Insurance owns a significant fixed income portfolio, mainly composed of sovereign and corporate bonds, where investments match the Life policyholder liabilities. The exposure to [credit] spread risk primarily relates to market price and cash flow variability associated with changes in credit spreads. Spread widening will, for example, reduce the value of fixed income securities held while increasing the investment income associated with acquisitions of fixed income securities. Conversely, spread tightening will generally increase the value of fixed income securities in the portfolio and will reduce the investment income associated with acquisitions of fixed income securities. A number of factors may cause a change in spread of an individual asset or a whole class of assets, including a perception or fear in the market of an increased likelihood of default.

AG Insurance generally aims to hold fixed income investments until maturity, which is made possible by the illiquidity of a large part of its liabilities. This strategy reduces the impact of spread risk significantly, because the Company will in general not be in a position where it has to sell at distressed prices (though it may decide to do so if it considers this to be a better course of action).

C.3.3 Property risk

The value of the property portfolio which includes investments in offices, retail, logistic centres and nursing homes as well as car parks across Europe (through a participation in Interparking) is subject to risks related to, among others, property prices, rent levels, occupancy levels, consumer spending and interest rates. Changes in these factors can cause volatility and could hence impact the value of the portfolio.

AG Insurance has the necessary tools in place to closely monitor the property risk to which it is exposed. The risk is mitigated through a significant number of long-term renting contracts with stable [institutional] counterparties and through investing in real estate and car parks which are geographically spread over Europe. For risk management purposes, the definition of real estate exposure is based on the market value of the properties and includes property held

for own use. This differs from the exposure reported under IFRS that excludes unrealised gains and separately reports property held for own use.

C.3.4 Equity risk

Stock market volatility may significantly affect equity market prices and reduce unrealised capital gains (or increase unrealised capital losses) in the investment portfolio. Volatility may also negatively affect the demand for certain insurance products such as Unit-Linked products. Stock market downturns and high volatility occur not only because of the economic cycle, but also because of international tensions, acts of terrorism, natural disasters or other events that are beyond the Company's control.

AG Insurance manages equity risk through limit setting in line with the strategic asset allocation and risk appetite, as well as through an investment policy that requires a range of controls to be in place including actions required in the event of significant decreases in value.

C.3.5 Currency risk

Currency risk arises from changes in the level or volatility of relevant currency exchange rates when there is a mismatch between assets and liabilities in the considered currency. AG Insurance carries a limited amount of foreign currency exposures, in particular to U.S. dollar.

The Company's investment policy limits this risk by requiring hedges for currency mismatches between assets and liabilities, eliminating a large part of this risk. Next to that a range of instruments and strategies are used to hedge against residual currency risks.

C.3.6 Market risk concentration

Market risk concentration refers to the risks stemming from a lack of diversification in the asset portfolio, leading to a large exposure towards a single issuer of securities or a group of related issuers.

In order to mitigate this risk, diversification is an essential objective of the investment policy which defines concentration limits and encourages the use of different asset classes with sufficient geographical diversification together with diversification on industries and issuers.

Note that as to market risk concentration AG Insurance has a significant exposure to Belgian sovereign bonds. Though in line with its investment policy, AG Insurance acknowledges that the occurrence of a Belgian state default scenario could significantly harm its solvency and capital position under all relevant hypotheses. The current exposure is nevertheless considered to be acceptable based on the belief that a default of the Belgian state is considered to be highly improbable. If this scenario should nevertheless materialise, it could be expected that such an event – having consequences for the Belgian insurance sector as a whole – would call for appropriate sector-wide measures.

Note as well that through investments in shares, corporate bonds and real estate, AG Insurance has an important exposure to BNP Paribas Fortis, but that this exposure remains firmly within the boundaries set for all corporate exposures.

C.3.7 Risk sensitivity

As part of its risk appetite monitoring AG Insurance performs stress and scenario testing on a quarterly basis. Stress and scenario testing (including reverse stress tests) is an integral part of the Own Risk and Solvency Assessment (ORSA) and stress tests are performed on an ad hoc basis as well, e.g. on request of NBB and/or EIOPA. Whereas these tests – given the importance of the Company's asset and liability matching – show a low sensitivity for interest rate movements, some vulnerability to spread widening could be observed. The latter is however not to be considered as an economic issue but rather as a consequence of the treatment of spread movements under the prevailing Solvency II framework. There is also a clear impact from a downturn in property values, linked to the relatively important exposure, but this remains clearly within the Company's risk appetite.

in EUR million	Own funds	SCR	Solvency ratio	ΔBase (pp)
Official Q4 2019	5.925	3.043	195%	
Government/corporate bonds +50bps	5.157	3.379	153%	-42
Government +50bps	4.966	3.508	142%	-53
Corporate bonds +50bps	6.041	2.887	209%	15
Ultimate forward rate 3,60%	5.860	3.076	191%	-4
Ultimate forward rate 3,90%	5.896	3.057	193%	-2
Equity -25%	5.529	2.862	193%	-2
Property -10%	5.577	3.196	175%	-20
Yield curve +50bps	6.043	2.921	207%	12
Yield curve -50bps	5.750	3.175	181%	-14

C.4 Default risk

Default risk arises directly from AG Insurance's investment activities, due to exposure to issuers of sovereign or corporate bonds, as well as from default exposure to other counterparties and debtors.

Investment default risk includes the risk of actual default of the issuer of sovereign or corporate bonds. There is a risk that the debt issuer may be unable or unwilling to repay the principal or pay due interests, and AG Insurance may have limited recourse to compel payment.

Investment default risk is actively managed through limits which take into account the type of credit exposure, the credit quality [translated into credit ratings] and the maturity. Regular monitoring and early warning systems are in place. AG Insurance recognises impairment losses for specific credit risk if there is objective evidence that it will not be possible to collect all amounts due in accordance with contractual terms. The amount of the impairment loss is the difference between the carrying amount and the recoverable amount. For market-traded securities, the recoverable amount is the market value.

Counterparty default risk reflects possible losses due to the unexpected default of third parties involved in risk-mitigating contracts, such as reinsurance arrangements, securitizations and derivatives. Assets exposed to counterparty risk further include receivables from intermediaries and clients, private loans to intermediaries, mortgage loans to clients and policy loans to policyholders.

The necessary tools are in place to closely monitor the creditworthiness of the reinsurers AG Insurance deals with based on periodic reviews of their financial statements, reputation and rating. A dedicated team manages relations with intermediaries and has a procedure in place for selecting the appropriate intermediaries. Strict acceptance criteria [including account limits] apply when granting private loans and a mortgage loan acceptance policy is in place.

C.5 Liquidity risk

Liquidity risk is the inability to meet cash obligations when payment is due. Two categories of liquidity risk are considered: *Funding liquidity risk* [the inability to meet all cash demands of policyholders or other contract holders, in both normal and stressed circumstances, without suffering unacceptable losses] and *Market liquidity risk* [the inability to realise assets due to inadequate market depth or market disruption].

Liquidity risk in the business stems from the liquidity characteristics of assets and liabilities. Some life insurance liabilities are subject to surrender while others, such as pension insurance liabilities, term insurance liabilities and annuities, are highly illiquid. Tax legislation and built-in penalties in case of surrender strengthen the illiquidity of some life insurance products. Property and casualty insurance liabilities are also considered illiquid by nature. Assets are characterised by a different degree of liquidity, ranging from highly liquid [cash] to a low degree of liquidity [real estate]. Additionally, a protracted slowdown may reduce the liquidity of markets that are under normal circumstances liquid.

Liquidity risk is not considered to be a significant risk for an insurer [even in the stressed and illiquid market conditions of 2008]. The nature of liquidity risk in insurance entities is not comparable to that in banking entities, mainly because of the different structure of the asset/liability profile. Banking activities normally have to cope with assets that have longer

durations than the corresponding liabilities, which is generally quite the contrary for insurance activities. As part of the ORSA a stress test with respect to liquidity has been performed, which confirms this conclusion.

Liquidity risk management at AG Insurance level involves determining the liquidity ratio in a normal and a stressed situation [1 in 200 scenario] and is monitored on a regular basis, with corrective actions taken if certain thresholds are reached.

Note that the expected profit included in future premiums (i.e. EPIFP which amounts to 255 millions EUR) which can be taken into account to cover solvency requirements, is – given its illiquid nature – not taken into account to cover liquidity risk. The EPIFP is calculated as the difference between on the one hand the total Own Funds and on the other hand Own Funds which have been recalculated as if no future premiums would be received. The second calculation assumes that not receiving the premiums does not lead to surrender of the contract, but that it remains in force.

C.6 Operational risk

Operational risk is the risk of losses arising from inadequate or failed internal processes, people or systems, or from external events. Although assuming operational risk is part of doing business, it is normally an undesired type of risk because higher risk does not lead to higher rewards. The ultimate goal of operational risk management is therefore protecting the value of the company (including its franchise quality) against negative impacts from risks that could materially harm the company and its different stakeholders (staff, customers, partners, shareholders, investors, regulator and society).

As operational risk is diverse in nature and permeates in all business activities, the management of operational risk is embedded in the whole organisation, as an integral part of sound business decision-making. This allows an appropriate understanding of the nature and significance of the operational risks to which the organisation is exposed, including its sensitivity and ability to mitigate them.

AG Insurance has a sound operational risk management in place for administering its portfolio of products, activities, processes and systems, generally covering the different domains of operational risk:

- ✓ Clients, Products and Business Practices
- ✓ Execution, Delivery and Process Management
- ✓ Business disruption and system failures
- ✓ Employee Practices and Workplace Safety
- ✓ Internal Fraud Risk
- ✓ External Fraud risk
- ✓ Damage to physical assets

Management of operational risk is an important element in the safeguarding of AG Insurance's franchise quality. In this context a risk appetite is defined which has been translated in a number of Key Risk Indicators, i.e. metrics used to provide an early warning of increasing risk exposures and allow to monitor compliance with the operational risk appetite and tolerances.

Operational risk procedures include:

- ✓ *Business continuity management* being the process for identifying an organization's risk of exposure to internal and external threats and the impacts to business operations those threats, if realized, might cause. It encompasses two stages, contingency planning (proactive with a focus on business continuity and disaster recovery planning) and crisis management (responsive – during the disruptive event);
- ✓ Being an insurance company, AG Insurance's services are knowledge- and information-intensive as such reliable information is crucial. *Information security management*, being the process of protecting information assets in a continuous and appropriate way from accidental or intentional breaches, is therefore an important part of its operational risk management. Given the increase over time in cyber criminality, cyber risk including data leakage and data protection (with special attention to personal data) aspects is a major point of attention. Note that AG Insurance is ISO 27001 certified for its IT processes;
- ✓ AG Insurance wants to be recognized as an insurance company of greatest integrity, with high ambitions toward prevention, detection and investigation of acts of *fraud* committed both, internally and externally. To increase awareness, AG Insurance invests in fraud prevention such that staff in all fraud sensitive departments, receives

training for fraud prevention. Regarding detection and investigation, AG Insurance has a zero tolerance for fraud meaning that in case of occurrence of the risk, mitigating and /or corrective actions are imposed;

- ✓ *Internal control* including the implementation of robust controls to prevent operational losses throughout the Company. Note that it is not a one shot assessment but it is a continuous point of attention for all employees to allow the achievement of the objectives of the company;
- ✓ *Adequate insurance protection* to prevent financial consequences of major incidents damaging the assets of the Company [professional liability, fraud, natural disasters, etc.];
- ✓ In the running of its activities, AG Insurance relies on a number of external parties providing services in the context of an *outsourcing* contract or another service agreement. As relying on external providers in no way reduces the responsibilities of AG Insurance, a number of mitigating actions are in place for both the selection of a new provider and the follow-up afterwards and;
- ✓ AG Insurance, like any insurance company is subject to changes in the legal and/or regulatory environment AG Insurance has organized itself in view of closely monitoring and anticipating ongoing legal/regulatory changes, so as to manage *compliance risk*, avoid surprises and to be ready in time for each change;
- ✓ When launching new *projects*, AG Insurance performs an assessment of operational risks related to that project using a standard questionnaire. This assessment allows to define the required mitigating actions.
- ✓ Incidents and operational losses are tracked in an *incident register*; this register serves as a basis for the definition of mitigating actions to allow continuous improvement.

C.7 Strategic and Business risk

Strategic risk generally emerges as a consequence of adverse business decisions, improper implementation of decisions, or a lack of responsiveness to industry changes. Strategic risk is addressed by examining multi-year scenarios, considering the related risks, as well as by monitoring the implementation of the chosen strategy through the multi-year business plan. The latter takes into account all the current and future risks as identified through the full annual key risk identification process. ORSA furthermore provides insights in how these risks could potentially jeopardize the realisation of the strategic and business plan and to what extent these plans have adequate capacity to withstand and mitigate these risks.

Business risk is a potential consequence of changes in external factors – political, economic, social, technological, environmental and legal – impacting the environment and conditions AG Insurance is operating in. It includes elements such as a change in customer behaviour, a change in distribution landscape or a strategic move from competitors. Business risk management requires pre-emptive risk management, anticipating possible developments in the environment. In view of this AG Insurance uses a structured horizon-scanning process [called 'RADAR'] for detecting the threats (and opportunities) surrounding its activities. This information is exploited in the strategic and multi-year planning process and ORSA (Own Risk and Solvency Assessment).

C.8 Impact on reputation

AG Insurance acknowledges the possible risk of loss of reputation arising from the adverse perception of its image on the part of its different stakeholders: customers, distributors, counterparties, shareholders, investors, regulator, society, etc., with a possible impact on solvency, earnings, liquidity or its franchise quality.

In order to mitigate a possible impact of any event (e.g. as a consequence of the realization of one or more of the risks cited above) on its reputation, AG Insurance has a tradition of long-standing commitment to sustainable business practices and good governance, as well as clear corporate values, a business code of conduct, robust internal controls and a clear dialogue with its stakeholders. A number of Key Risk Indicators are defined in order to properly monitor and react in case these risks might materialize. Communication plans appropriate for the situation that arises have been prepared.

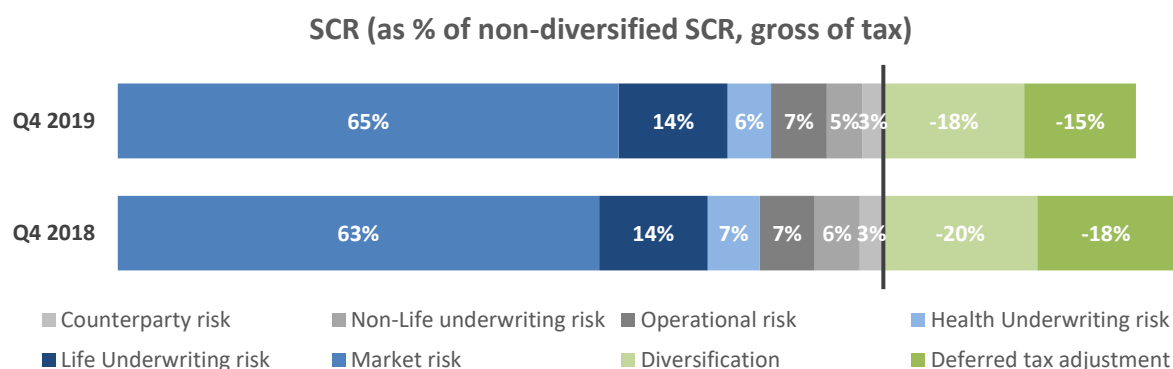
AG Insurance is designated by the NBB as a Systemically Important Financial Institution (SIFI). As a SIFI, AG Insurance falls under the specific supervision of the NBB for all its “strategic decisions”. The NBB has the right to oppose intended strategic decisions by AG Insurance if they are deemed to be in breach of the sound and prudent management of the SIFI or if they create a material risk for the stability of the financial sector. The NBB can also impose additional specific measures upon AG Insurance, including in relation to liquidity, solvency, risk concentration and risk positions, if the NBB determines that as a SIFI AG Insurance has an inadequate risk profile or if its policy can have a negative impact on the stability of the financial system.

C.9 Risk exposure

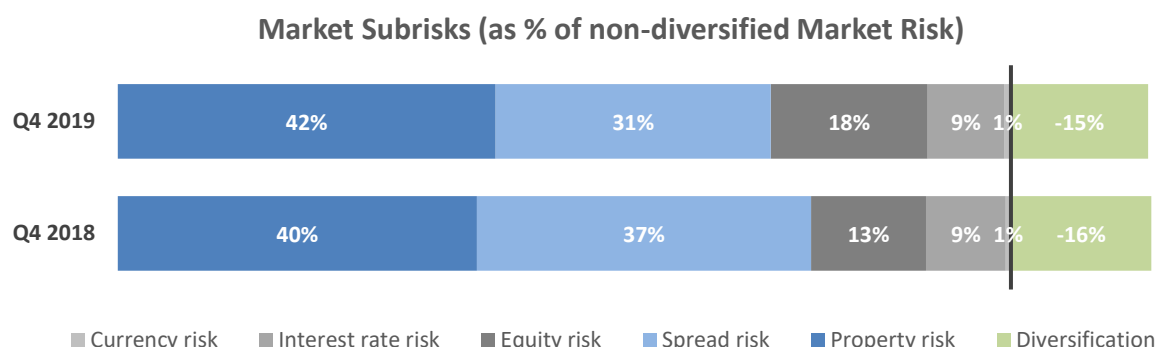
AG Insurance measures the exposure to quantifiable risks by means of a Partial Internal Model (PIM) used for determining the Solvency II capital requirements [SCR]. Apart from the use of the standard formula for most of the risks, the partial internal model includes an internal model for Non-Life Underwriting risk.

Expressed in terms of SCR capital consumption, a major part of the risk exposure stems from financial risk with spread risk, property risk and equity risk being its main contributors. Note that thanks to the importance of the Company's asset and liability duration matching strategy, one can observe a low risk sensitivity to interest rate movements on the existing book of business, hence resulting in a relatively low SCR for interest rate risk. While Insurance risk is the second largest contributor, operational risk and counterparty risk are contributing to a lesser extent to the risk capital consumption. Note that through a multi-channel and a multi-product approach, diversification is fostered which makes AG Insurance benefit from non-negligible diversification benefits in the determination of its required capital. An important capital relief stems from adjusting required capital for the loss-absorbing capacity of deferred taxes as well.

The graph below shows the contribution of the different risk factors to the total amount of SCR:



A detailed view on the market risk SCR is provided by the graph below:



Note that through a multi-channel and a multi-product approach, diversification is fostered which makes AG Insurance benefit from non-negligible diversification benefits in the determination of its required capital. An own assessment of the solvency and capital needs, which is used for management reasons and within the context of ORSA, complements the regulatory required capital view.

C.10 Any other information

No other information.

D

VALUATION FOR SOLVENCY PURPOSES



D.1 Assets

D.1.1 Description of the bases, methods and main assumptions

Solvency II starts from the Market-consistent Balance Sheet (MCBS) which requires assets and liabilities to be valued at 'Fair Value'. IFRS defines "Fair value (FV)" as the amount for which an asset could be exchanged, a liability settled or a granted equity instrument exchanged between knowledgeable, willing parties in an arm's length transaction. This definition is also applicable under Solvency II. The valuation of Assets at fair value is based either on quoted prices in active markets (Mark to Market; level 1), observable market data in active markets (Mark to model; level 2) or unobservable market data (Mark to model; level 3).

The table below summarises per material class of assets the bases, methods and main assumptions used for the valuation of assets. For the quantitative data we refer to the Quantitative Reporting Template S.02.01.02 in annex 1.

Asset class	Mark to model?	Basis, methods and main assumptions used
Goodwill - Deferred acquisition costs - Intangible assets	NA	Valued at nil.
Deferred tax assets (DTA)	No	The valuation of the DTA is based on the difference between the value of the underlying assets and liabilities in the Market-Consistent Balance Sheet and the value on the tax base balance sheet. The measurement principles of IAS 12 are applied in valuing deferred tax assets. DTA is only recognized insofar it can be recovered in future.
Property, plant and equipment (PPE) held for own use	Yes	The PPE is independently valued and verified by an external source every year.
Property (other than for own use)	Yes	The investment property is independently valued and verified by an external source every year.
Participations	Yes	Related parties on which no look-through is applied and joint ventures are presented as participations in the solo Solvency II MCBS. The adjusted equity method is applied meaning that underlying assets/ liabilities of that participation are valued at fair value according to article 75 of the Solvency II Directive.
Equities	No	Use Mark to Market based on quoted prices in active markets that are sourced independently (level 1).
Government Bonds	If Mark to Market is not possible	Use Mark to Market based on quoted prices in active markets that are sourced independently. Use Mark to model where there is no market price available and observable data in active markets (level 2) or unobservable market data (level 3) are used.
Corporate Bonds - Collateralised securities - Investment funds	If Mark to Market is not possible	Use Mark to Market based on quoted prices in active markets that are sourced independently or Mark to model where observable data in active markets (level 2) or unobservable market data (some corporate debt securities) (level 3) are used. Depending on the significance of the unobserved data used in these calculations, the valuation is classified as level 2 or 3.
Derivatives	If Mark to Market is not possible	The derivatives are held for trading or hedging purposes and relate to interest rate and equity options, interest rate swaps and foreign exchange contracts. Derivatives held for trading are based on a level 2 valuation (observable market data in active markets).

Asset class	Mark to model?	Basis, methods and main assumptions used
		<p>Quoted market prices provide the most reliable fair value for derivatives traded on a recognised exchange. Fair value of derivatives not traded on a recognised exchange is considered to be the value that could be realised through termination or assignment of the derivative.</p> <p>Common valuation methodologies for an interest rate swap incorporate a comparison of the yield of the swap with the current swap yield curve. The swap yield curve is derived from quoted swap rates. Dealer bid and offer quotes are generally available for basic interest rate swaps involving counterparties whose securities are investment grade.</p> <p>Factors that influence the valuation of an individual derivative include the counterparty's credit rating and the complexity of the derivative. If these factors differ from the basic factors underlying the quote, an adjustment to the quoted price may be considered.</p>
Deposits other than cash equivalents	Yes	Deposits are valued using discounted cash flow methodology, discounting with a spread based on the average commercial margin on the new production over the last 3 months.
Other investments - Assets held for index-linked and Unit-Linked funds	If Mark to Market is not possible	<p>Use Mark to Market based on quoted prices in active markets that are sourced independently.</p> <p>Use Mark to model where there is no market price available and observable data in active markets [level 2] or unobservable market data [level 3] are used.</p>
Loans and mortgages to individuals	If Mark to Market is not possible	<p>To the extent loans are originated or purchased from third parties, they are fair valued based on the transfer price of such loans/debt securities to third party at the year-end date of the MCBS. The valuation may involve using mark to model if there are no readily available market prices for such loans.</p> <p>Loans without optional features are valued using discounted cash flow methodology; the yield curve for discounting is the swap curve plus spread (assets) or the swap curve minus spread (liabilities); spread is based on commercial margin computed based on the average of new production during last 3 months.</p> <p>Loans with optional features are split:</p> <ul style="list-style-type: none"> - The linear (non-optional) component is valued using a discounted cash flow methodology and - The option component, including prepayment option, is valued using an option pricing model. The prepayment assumption is calibrated on historical data.
Deposits to cedants - Insurance and intermediaries receivables - Reinsurance receivables - Receivables [trade, not insurance]	No	IFRS value [amortised cost] because of immaterial differences between Amortised Cost and Fair Value [short term receivables].
Reinsurance recoverables	Yes	Difference between fair value of technical provisions (as described below) net and gross of reinsurance.
Cash and cash equivalents	No	Fair Value equals the nominal value, as these items have a term less than three months from the date on which they were acquired.
Any other assets, not elsewhere shown	No	IFRS value [amortised cost] because of immaterial differences between Amortised Cost and Fair Value [short term receivables].

D.1.2 Material differences between Solvency II and IFRS

The table below summarises per asset class the material differences between the valuation for Solvency II purposes and the IFRS valuation.

Asset class	Material differences
Goodwill, Deferred acquisition costs, Intangible assets	Under SII all intangibles within AG Insurance are valued at nil. Under IFRS AG Insurance values its intangibles at amortised cost or historical cost less any impairment.
Deferred tax assets	Under SII the valuation is based on temporary differences between the MCBS and the tax base balance sheet. Under IFRS it is based on temporary differences between the IFRS balance sheet and the tax base balance sheet.
Property, plant and equipment (PPE) held for own use	Under SII these are fair valued. For IFRS purposes AG Insurance uses the cost approach.
Property (other than for own use)	
Different types of Financial investments - mainly Bonds held to maturity (HTM)	Under SII these instruments are fair valued while under IFRS they are valued at amortised cost.
Loans and mortgages to individuals	

D.2 Technical provisions

D.2.1 Introduction

The calculation of the Best Estimate Liabilities is based on the best estimate assumptions setting (economic and non-economic assumptions). For the figures, we refer to the Quantitative Reporting Templates (S.12.01.02, S.17.01.02 and S.02.01.02 in annex).

The main objective of a cash-flow model is to determine the marked-to-model value of liabilities (also called the Best Estimate Liabilities). While most of the asset prices are quoted or can be replicated with analytical or numerical formula, regarding liabilities, the only available information is the accounting value of reserves, which does not properly reflect the market value of liabilities. In order to calculate the market value of liabilities, the marked-to-model method consists in projecting the future liability cash-flows and discounting them.

For the *Non-Life business*, the calculation of the undiscounted best estimate (claims, premiums and reinsurance recoverables) is performed by homogeneous risk group (HRG) as well as by type of loss, i.e. attritional loss, large loss and catastrophe loss. The valuation of the technical provision starts with a tree-steps classification of the Non-Life policies. In addition, one deterministic cash-flow projection is sufficient to determine best estimate value of the liabilities because cash-flows do not vary with the economic environment.

For the *Life business*, policies are grouped into homogenous risk groups (model points), and are run off following best estimate assumptions. Afterwards, the model points are aggregated in Solvency II Lines of Business. Furthermore, for life insurance contracts, stochastic economic scenarios are simulated in order to capture the impact on the liabilities cash-flows of a change on the asset side as a consequence of the optionalities in the insurance contracts and which depend on the economic situation (profit sharing distribution, etc.). Therefore, the liability cash-flows can be split into two different parts:

- ✓ **Fixed Liabilities:** part that corresponds to the guaranteed liability cash flows which are valued through the discounting of deterministic future cash flows at the zero-coupon yield curve. It mainly consists of future premiums on in-force business, projected guaranteed benefits (without any profit sharing component) and costs & other revenues (commissions, maintenance expenses). The value of these cash-flows is totally independent of the value of the assets and can be calculated with one simulation.
- ✓ **Variable Liabilities:** part that mainly corresponds to options and guarantees in the contracts, taxes and investment costs. Variable liabilities are determined marked-to-model through the application of risk-neutral valuation principles. The risk factors that are identified to be the underlying source of uncertainty in asset and liability valuation are stochastically projected in the future according to the risk-neutral principle (arbitrage free model). Risk factors are

usually financial market variables, such as equity prices, foreign exchange rates, yield curves, real estate prices. The value of these cash-flows is dependent on asset returns and/or yield curve evolution.

D.2.2 Non-economic assumptions

Non-economic assumptions are generally based on analyses of past experience combined with a view on what can be expected in the future taking into account the evolution of the environment [i.e. to which extent are past observations still representative of the future]. The approach followed in setting best estimate non-economic assumptions for each risk factor consists thus in analysing past observations and in most cases fitting a statistical model on these, where relevant, combining the management's view of the expected future experience and allowing for any underlying trend in the data [such as expected realistic future demographic, medical or economic developments].

Non-economic assumptions relate to mortality and longevity; morbidity and disability; lapse, persistency, surrender, withdrawals, paid-up rate; expenses (including the non-hedgeable part of expense inflation); claims inflation; commissions and management actions parameters [as, for instance, the ones inherent to the profit sharing rules].

The appropriateness of these assumptions are assessed thanks to different tests, which are part of a yearly assumptions calibration cycle. For instance, the non-economic assumptions underlying the calculation of the best estimate are regularly compared against experience and this based on a standardized back-testing procedure. Sensitivities are also performed on a regular basis highlighting the impact of these assumptions on the results. On top, the adequacy of the valuation of assets and liabilities is tested through the variance analysis which explains the evolution of the value between two successive periods. This analysis provides a view on the different drivers of the value change which can then be combined with back-tests in order to draw conclusions about the appropriateness of the assumptions.

For *Non-Life business*, a specific testing procedure has been developed that covers the full calculation process, including tests on data pre-processing, calculation of best estimate [including methods, assumptions and parameters] and outputs. This testing procedure involves a number of tests such as data testing [e.g. testing whether the data required by a specific method is available and is of sufficient quality], testing underlying assumptions of methods, back-testing, sensitivity testing, analysis of change, benchmarking, scenario testing.

D.2.2.1 Mortality and longevity

Mortality and longevity best estimate assumptions are set based on statistical analysis of the experience data of the Company as well as of external observable data. Best estimate assumptions include trend changes if these are significant for the long-term nature of the underwritten risks [e.g. trends on mortality improvements incorporated within the longevity or mortality projections]

D.2.2.2 Morbidity and disability

Morbidity and disability assumptions are set following a statistical analysis/study on the experience data of the Company and/or external observable data. For disability, credible market experience may be used when the Company is of the opinion that this represents a comparable experience to the Company's experience and when the Company's own data are too limited in order to calibrate solely based on these data.

D.2.2.3 Lapse, persistency, surrender, withdrawals, paid-up

Lapse, persistency, surrender, withdrawals, paid-up refer to an event where the policyholder chooses to alter the contract by ceasing to pay premiums or by withdrawing some or all of the value accumulated in the policy to date. This action may end the insurer's liability to the insured or simply reduce it.

For the *Life business*, a policy is assumed to lapse or surrender when the policyholder decides to terminate the contract before the end of the policy term. A partial withdrawal happens when part of the fund is withdrawn in advance of the maturity date. A policy is assumed to become paid-up when the policyholder decides to terminate the contractual payments ['paid-up'] before the end of the policy term. Paid-up policies, surrenders, lapses and partial withdrawals are collectively labelled 'lapses'. Lapse studies are performed on experience data. In case this data is not available or found to be inadequate to perform an experience study, then a lapse rate of a similar product is considered. Lapse rates are dependent on relevant drivers linked to the policyholder's propensity to surrender his policy, where the data to be analysed is suitably credible and where the assumption is sufficiently material. Examples include product and seniority of the policy.

For the *Non-Life business*, the valuation of premium provisions and more specifically the part linked to "Tacit renewals where a legal obligation exists" does not take into account future policyholder behaviour with respect to policy lapse during the remaining period, as experience shows that its impact is not material.

D.2.2.4 Expenses

For the *Life business*, all expenses that will be incurred in servicing insurance and reinsurance obligations are taken into account. The total expense basis allocated to life insurance activities within scope represents the forecasted level of incurred expenses over the ongoing calendar year. These include investment expenses, future expenses directly related to ongoing administration of insurance obligations together with a share of relevant overhead expenses. Since acquisition expenses relate to the sale of new business, and since future new life insurance contracts are not to be considered in the valuation of the technical provisions, acquisition expenses are not included in the valuation of technical provisions. Over 2019, the cost model has been refined and additional guidance has been issued regarding the classification of expenses between acquisition and administration. Moreover, the modelling in the liability cash-flow models has also been improved in order to link specific costs with the assumed occurrence of an activity (as, for instance, maturity payment).

For the *Non-Life business*, expenses consist of commissions to be paid between the valuation date and the term of the contract; acquisition expenses (other than commissions), administrative expenses (and operating cost) necessary to administer the contracts during the valuation period including reinsurance cost, claims expenses necessary to handle the claims until settlement. Expenses associated with reinsurance contracts and special purpose vehicles are included in the gross calculation of the best estimate. Furthermore Allocated Loss Adjustment Expenses (ALAE) are not considered separately from future claims payments and are included in claims payments projections whereas Unallocated Loss Adjustment Expenses (ULAE) are valued separately from the claims payments. The assumptions are based on experience over the last year(s). By doing this, any trends observed or unusual events such as catastrophes are analysed as to the need to include these in future projection valuations. In this aspect, the past one-off expenses may be adjusted if deemed relevant. Moreover expenses are supposed to be calculated on a going concern basis with special consideration for the portfolio being growing, declining or in run off. Forward looking information (e.g. coming from budget exercise) is included in the determination of the expense cash-flows where appropriate. Finally, future acquisition costs are valued regarding cash-flows related to premium provisions and considered differently following the fact that the premium has already been written or not. For the part of provisions constituted by premium already written, no acquisition cost is projected since all expenses can be considered as having been paid at the drawing up of the contract. Acquisition expenses are considered to be paid in the first year, except for multi-year contracts with yearly premiums.

Regarding expense inflation, assumptions are made for the different types of expenses (claims expenses, acquisition expenses, administrations). The topic "Inflation" is elaborated upon in the next section, "Claims Inflation".

D.2.2.5 Claims inflation

For the *Life business* expense assumptions include an allowance for the expected future cost inflation.

For the *Non-Life business*, inflation is considered as well when projecting the future cash-flows. The cash-flows that potentially will be impacted by inflation are premiums when the premium is dependent on salary mass or when the premiums are indexed according to pre-defined indices, expenses with the biggest part being the salaries that will evolve with time and claims costs. The inflation is considered implicitly or explicitly in the cash flows projections depending on the type of provision (premium or claims) and the method used to calculate the best estimate.

D.2.2.6 Commissions

Regarding the *Life business*, the total of allocated commissions represent the actual commissions for the past calendar year. The commission assumptions cover acquisition commissions, renewal commissions, bonus commissions and claw-back of unearned commission in case of lapse. Since future new contracts are out of scope for solvency purposes, acquisition commissions are not included in the valuation of technical provisions.

For the *Non-Life business*, the commissions to be paid between the valuation date and the term of the contract are considered. Usually commissions are considered to be paid in the first year for 'traditional' non-life contracts. Commissions arising from insurance contracts are considered based on the terms of the contracts between AG Insurance and the sales persons (brokers or agents). Commissions are accounted for renewals linked to contract boundaries or future premium for in-force contracts (instalments or multi-year contracts). Future commission assumptions are only considered for the part of the premium provisions related to premiums not already written. These commission assumptions are generally expressed as a percentage of written premiums.

D.2.2.7 Management rules

For Life Business, two types of management rules are used within the valuation of technical provisions: *asset management rules* and *profit sharing rules*.

- ✓ *Asset management rules:* govern the way investment assets are managed throughout the projection in view of maintaining over the projection horizon an asset allocation in line with the risk appetite and thus with the Strategic Asset Allocation (SAA). Like in reality, asset management is performed in the model at asset fund level following a parametrization in line with the most recent Strategic Asset Allocation. Along the projection, asset management consists in a rebalancing of assets in order to reach a long term target asset mix, the so-called Strategic Asset Allocation. The asset management rules are designed and parametrized to converge smoothly to the SAA thanks to defined leeways and to a buy-and-hold strategy.
- ✓ *Profit sharing rules:* for Life Business, profit sharing can be discretionary or non-discretionary. Modelling of the non-discretionary profit sharing follows the contractual obligation of the policy and is hence not a management rule. Profit sharing that is left at the discretion of the company is modelled through a management rule, according to the profit sharing practice in reality.

For Non-Life Business, the importance of management actions is usually very limited. Only cuts in bonuses (for products with discretionary participation schemes) can be considered in the best estimate calculation (as part of management actions). However, AG Insurance is currently not taking into account any management actions for the determination of the Non-Life best estimate, because of limited materiality.

D.2.3 Economic assumptions

Economic assumptions are set consistently with information about or provided by financial markets. As a general principle, the financial information used should be such that it allows the estimation of reliable assumptions when it is observed in deep, liquid and transparent markets. However, information observed in other types of markets may be used, to the extent possible, provided that appropriate tests or adjustments can be applied to demonstrate its reliability.

D.2.3.1 Reference and discount rate

The construction of the reference and discount rate is based on the Risk-free interest rate technical documentation released for each Solvency II exercise. It corresponds to a curve composed of:

- ✓ The market swap rate curve [Euro] at the valuation date
- ✓ A credit risk adjustment [CRA] taking into account the credit risk inherent to the swap curve
- ✓ A volatility adjustment [VA] determined by EIOPA with the aim to partially compensate the volatility of assets considering that insurance companies are investing in long-term fixed income bonds to cover their engagement towards policyholders
- ✓ An extrapolation resulting in the convergence to the ultimate forward rate (UFR) of 3.90% (since 2019) starting as from maturities after the last liquid point (LLP), 20 years for the Eurozone.

D.2.3.2 Volatilities

The asset models are calibrated on the basis of appropriate volatility measures, which are based on either implied volatilities or on historical volatilities. Implied volatilities are the volatilities implied by option prices observed in the market. The volatilities are set for each risk factor that can be largely categorized under the following asset classes: shares, real estate and fixed income. Implied volatilities are preferred when they are available and applicable. When these are not available or are not applicable, historical volatilities can be used as an alternative. In the determination of the historical volatilities, an appropriate time period should be taken into account.

D.2.3.3 Stochastic valuation

Where the value of options and guarantees is taken into account, Best Estimate Liabilities are calculated using stochastic valuation techniques (Monte Carlo simulation) based on risk-neutral scenarios. Scenarios are generated for the following asset classes:

- ✓ Fixed income bonds: a risk-free curve and relevant credit spreads for both corporate and sovereign bonds
- ✓ Shares: calibration is based on market implied volatilities (e.g. Eurostoxx for European equities, S&P 500 for American equities, etc.)
- ✓ Real Estate: calibration is based on AG Real Estate in-house calibrated volatilities

Each simulation will have impacts on the variable cash-flows, whereas fixed cash-flows will remain constant.

AG Insurance calculates the best estimate gross of reinsurance, with a separate calculation of the amounts recoverable from reinsurance.

D.2.4 Risk Margin

The methodology for the calculation of the risk margin is consistent between the Life business and the Non-Life business. This methodology is based on a proportional projected approach whereby the basic SCR, operational SCR and adjustment of loss absorption of technical provisions at start-up is run off following the selected risk drivers at Solvency II lines of business level. Risk drivers are the benefit payments or exposure to which there is an obligation from the insurer towards the policyholder. If more granularity is allowed, the risk drivers are then determined at that lower level. A cost of capital rate of 6% as defined by EIOPA is then applied on the net present value of the future non-hedgeable SCR. A bottom up calculation is performed at model point level.

D.2.5 Level of uncertainty

The level of uncertainty of the Solvency II technical provisions is described and assessed in the Actuarial Function report which is released periodically.

Sources of uncertainty can mainly stem from the modelling and assumptions aspects of the calculation of Solvency II technical provisions. The Company aims at assessing and/or limiting these thanks to different elements.

As to the model point of view, methodological choices in terms of modelling can create variations in the calculation of Solvency II technical provisions. In order to manage this, the Company relies on modelling best practices discussed in technical committees and regularly reviewed in compliance with the Model Management Policy. In addition, risk of implementation error can bring uncertainty, for example when a modelling principle is not correctly translated into the programming code.

As to the assumption point of view, the adequacy of hypotheses choices is challenged and reviewed by the Actuarial Function, and its variance is assessed by the Solvency II Analysis of Change process that aims at capturing notably the impacts of non-economic assumptions. Furthermore, operational risks concerning assumptions are limited by the constant improvement of data quality through automation and testing of the data flow along the process [in application of the Data Management policy].

D.2.6 Material differences between Solvency II and IFRS

The technical provisions mentioned in Solvency II MCBS are not the same as defined under IFRS. Difference in methodology exists between Solvency II reserving and IFRS reserving. The table below summarises the material differences per material class of liabilities, the bases, methods and main assumptions used for the valuation of the liabilities.

MCBS item	Solvency II valuation	IFRS valuation	Conclusion
Technical provisions not arising from unit linked contracts	Fair value – AG Insurance uses the valuation principles and rules set under Solvency II for valuing the insurance liabilities based on a best estimate basis including the market value embedded options and guarantees and the relevant risk margin based on the cost of capital method.	Valued based on GAAP using the estimation process explained in the GAAP [assume existing IFRS]	Given the differences in methodology between both frameworks, valuation for Solvency II purposes is done independently from accounting valuation.
Technical provisions arising from unit linked contracts		The liabilities for such contracts are measured at unit value [i.e. fair value of the fund in which the Unit-Linked contracts are invested divided by the number of units of the fund].	

D.2.7 Volatility adjustment

AG Insurance makes use of the volatility adjustment referred to in Article 77d of Directive 2009/138/EC. For the related figures we refer to QRT S.22.01.02 in annex.

D.2.8 Transitional risk-free interest rate-term structure

AG Insurance does not apply the transitional risk-free interest rate-term structure referred to in Article 308c of Directive 2009/138/EC.

D.3 Other liabilities

D.3.1 Description of the bases, methods and main assumptions

The table below summarises - per material class of other liabilities - the bases, methods and main assumptions used for the valuation of the other liabilities. For the data, we refer to the Quantitative Reporting Template [S.02.01.02].

Other liability class	Mark to model	Basis, methods and main assumptions used
Provisions other than technical provisions	Yes	Value based on a best estimate basis as currently performed under IAS 37, based on management judgement and in most cases the opinion of legal and tax advisors.
Pension benefit obligations	Yes	IFRS Value. Since Q4 2018 this line includes the IFRS value of the IAS19 pension benefits (previously included in technical provisions at fair value).
Deposits from reinsurers	No	IFRS value (amortised cost) because of immaterial differences between Amortised Cost and Fair Value (short term receivables). Long term deposits are fair value applying a discounted cash flow methodology. Changes in own credit standing of AG Insurance are excluded in the valuation.
Deferred tax liabilities (DTL)	No	The valuation of the DTL is based on the difference between the value of the underlying assets and liabilities in the Market-Consistent Balance Sheet and the value on the tax base balance sheet.
Derivatives	If Mark to Market is not possible	The derivatives are held for trading or hedging purposes and relate to interest rate and equity options and interest rate swaps and foreign exchange contracts. Quoted market prices provide the most reliable fair value for derivatives traded on a recognised exchange. Fair value of derivatives not traded on a recognised exchange is considered to be the value that could be realised through termination or assignment of the derivative. Common valuation methodologies for an interest rate swap incorporate a comparison of the yield of the swap with the current swap yield curve. The swap yield curve is derived from quoted swap rates. Dealer bid and offer quotes are generally available for basic interest rate swaps involving counterparties whose securities are investment grade. Factors that influence the valuation of an individual derivative include the counterparty's credit rating and the complexity of the derivative. If these factors differ from the basic factors underlying the quote, an adjustment to the quoted price may be considered.
Debts owed to credit institutions	No	IFRS value (amortised cost) because of immaterial differences between Amortised Cost and Fair Value (short term receivables). Long term debts are fair value applying a discounted cash flow methodology. Changes in own credit standing of AG Insurance are excluded in the valuation
Insurance and intermediaries payables - Reinsurance payables - Payables (trade, not insurance)	No	IFRS value because of immaterial differences between cost and Fair Value (short term payables).

Other liability class	Mark to model	Basis, methods and main assumptions used
Subordinated liabilities in BOF	Yes	Under Solvency II long term subordinated loans are valued applying a discounted cash flow methodology. Changes in own credit standing of AG Insurance are excluded in the valuation.
Any other liabilities, not elsewhere shown	No	IFRS value (amortised cost) because of immaterial differences between Amortised Cost and Fair Value (short term receivables).

D.3.2 Material differences between Solvency II and IFRS

The table below summarises per class of other liabilities the material differences between the valuation for Solvency II purposes and the IFRS valuation.

Other liabilities	Material differences
Deferred tax liabilities	Under SII the valuation is based on temporary differences between the MCBS and the tax base balance sheet. Under IFRS it is based on temporary differences between the IFRS balance sheet and the tax base balance sheet.
Subordinated liabilities in BOF	Under Solvency II long term subordinated loans are valued applying a discounted cash flow methodology. Changes in own credit standing of AG Insurance are excluded in the valuation. Under IFRS these deposits are valued at cost.

D.4 Alternative methods for valuation

D.4.1 Identification of assets and liabilities for which mark to model approach applies

The assets and liabilities for which the mark to model approach applies are identified in the tables above in the sections D.1 Valuation of assets and D.3 Valuation of other liabilities.

D.4.2 Justification of application mark to model approach as identified in the tables above for assets and liabilities

In line with the Solvency II guidance and philosophy, the mark to model approach is used for sufficiently material items for which no reliable market price is available. For some asset items, IFRS valuation is sufficiently close to any value that would be obtained using an elaborate mark to model approach, in which case IFRS valuation is considered an acceptable proxy.

D.4.3 Documentation of the assumptions underlying the mark to model approach per class of asset and liabilities

The assumptions for the mark to model approach are described in the tables above in the sections D.1 Valuation of assets and D.3 Valuation of other liabilities.

D.4.4 Assessment of valuation uncertainty of the assets, liabilities valued according the mark to model approach

The adequacy of the valuation of assets and liabilities is tested through the variation analysis, which explains the evolution of the value between two periods. This analysis provides a view on the different drivers of the value change, which can be compared against experience.



D.5 Any other information

No other information.

E

CAPITAL MANAGEMENT



E.1 Own funds

E.1.1 Information on the objectives, policies and processes, business planning and material changes

Capital requires a clearly defined management approach in order to ensure efficient and effective deployment. This approach must balance the needs and requirements of stakeholders including shareholders, regulators, employees and customers. The main goal of the capital management process is to fund existing business and profitable or value creating growth and to ensure this, if needed, with a capital increase. The purpose is to protect the viability of the Company in the long run and to assess the capacity for dividend payment. The capital management process is governed by the capital management policy.

E.1.2 Information about the structure, amount and quality of basic own funds and ancillary own funds

Own funds is the available capital defined by EIOPA based on a company's valuation of the market-consistent value of the assets minus the market-consistent value of the liabilities and deduction made of expected dividend.

Own Funds can consist of Basic Own Funds and Ancillary Own Funds.

- ✓ **Basic Own Funds** are defined as the sum of Excess of assets over liabilities of the Market Consistent Balance Sheet [MCBS] and the subordinated liabilities, reduced by the sum of the foreseeable dividends distributions, the deductions for participations in other financial undertakings and the non-available items
- ✓ **Ancillary Own Funds**; AG Insurance does not take into account ancillary own funds to determine the solvency ratio.

Note that:

- ✓ Subordinated liabilities can be included to the extent that the local regulator grants equity credit to this debt. Solvency II distinguishes Tier 1 and Tier 2 hybrid debt. Tier 1 hybrid debt embeds the ability to absorb losses via write off of the principle debt or conversion into equity and thus is regarded as the highest quality hybrid debt. Tier 2 hybrid debt has the ability to absorb losses via postponement of the coupon to be paid on the principle. AG Insurance reports hybrid debt as a separate component of capital, including its Solvency II qualification as Tier 1 or Tier 2 debt. The table below summarizes the structure of the hybrid debt:

Hybrid debt	Dated Fixed-to-floating Callable Subordinated Notes	Dated Fixed Rate Subordinated Notes	Dated Fixed-to-floating Callable Subordinated Notes
Issue Date	18/12/2013	31/03/2015	27/06/2019
Maturity	18/06/2044	30/06/2047	27/09/2049
First Call Date	18/06/2024	30/06/2027	27/09/2029
Nominal value (mio)	€ 450	€ 400	€ 300
Coupon	5,25%	3,50%	3,25%
Coupon payment	Annually	Annually	Annually
Coupon after First Call Date	EURIBOR 3M + 4,136%	Mid-swap 5-year spot rate + 3,875 %	EURIBOR 3M + 3,8%

Hybrid capital at AG Insurance is currently constituted by subordinated instruments qualifying as Tier 2 capital under Solvency II. The Fixed Rate Reset Perpetual Subordinated Notes which was grandfathered Tier 1 has been reimbursed in March 2019.

- ✓ Deductions for participations in other financial undertakings: AG Insurance has no correction to make in relation to these items.
- ✓ Non-available items: AG insurance does not have to correct for any non-available items.

E.1.3 Eligible amount of own funds to cover the Solvency Capital Requirement

Next to the Tier 1 Own Funds, the Company has also Tier 2 Own Funds which respect the limits as foreseen under Solvency II and are therefore available to cover the SCR. For the eligible amounts of own funds we refer to the Quantitative Reporting template S.23.01.01 in annex.

E.1.4 Eligible amount of basic own funds to cover the Minimum Capital Requirement

Regarding MCR, part of the available Own Funds are not eligible, because of stricter conditions on the use of Tier 2 Own Funds in this context. Note however that:

- ✓ The remaining eligible Own Funds still cover 361% of the MCR;
- ✓ The totality of available Own Funds is eligible to cover the SCR.

E.1.5 Material differences between Solvency II and IFRS

Differences between equity in the IFRS financial statements and the excess over liabilities as calculated for Solvency II purposes mainly stem from the following sources:

- ✓ Reclassification of subordinated liabilities.
- ✓ Valuation differences due to assets and liabilities not recorded at fair value under IFRS:
 - Property and Held to maturity (HTM) investments are recorded at amortised cost under IFRS.
 - Liabilities arising from insurance and investment contracts also need to be recognised at market-consistent values. The value of technical provisions under Solvency II is equal to the sum of the best estimate of the liabilities and the risk margin.
- ✓ De-recognition of goodwill and other intangibles under Solvency II. The economic value of other intangible assets on the Solvency II balance sheet is nil in case assets cannot be sold separately and evidence of exchange transactions for the same or similar assets is missing.
- ✓ De-recognition of non-controlled participations and exclusion of non-controlling interest of ancillary services.
- ✓ Deduction of proposed or foreseeable dividend.

IFRS Shareholders' equity reconciles to Solvency II Own funds as follows [situation as at end of 2019 compared to 2018:

Own Funds	31 December 2019	31 December 2018	Variation
Shareholders' equity	6.848	6.458	390
Plus			
Subordinated liabilities	1.141	1.326	-185
Revaluation of debt securities. gross of tax	2.696	2.045	651
Revaluation of loans and other investments. gross of tax	885	494	391
Revaluation of Real Estate. gross of tax	1.718	1.699	19
Less			
Revaluation of liabilities arising from insurance and investment contracts net of reinsurance. gross of tax	-6.745	-4.984	-1.762
DAC	-154	-169	14
Intangible assets & goodwill	-397	-352	-45
Tax on revaluation Assets & Liabilities	502	315	187
Dividends. distributions and charges	-569	-554	-15
Own funds	5.925	6.279	-354

The evolution of Solvency II Own Funds is mainly driven by a negative impact on shareholders' equity (net negative impact of redemption of Peppermint replaced by the issue of Phoenix for a lower amount and negative impact from remeasurement of IAS19) and a negative impact of the downward shift of the risk free curve. The increase of the fixed income assets as a result of the spread decrease is also turned into a negative impact on Own Funds due to the Volatility Adjustment evolution which is not representative for the own asset portfolio. The total negative impact on Own Funds is partly offset by a positive impact of the increase of equity markets and a positive contribution of new inflow from Life and Non-Life.

E.2 Solvency capital requirement and minimum capital requirement

E.2.1 Amounts of the undertaking's Solvency Capital Requirement and the Minimum Capital Requirement

See QRT S.23.01.01 in annex

E.2.2 Amount of the undertaking's Solvency Capital Requirement split by risk and by risk categories

See QRT S.25.02.21 in annex

E.2.3 Comparison with previous reporting period

SCR Pillar 1	31 December 2019	31 December 2018	Variation
Total SCR	3.043	2.689	353
Market risk	2.971	2.726	245
Interest rate risk	300	288	12
Equity risk	617	417	200
Property risk	1.485	1.301	184
Currency risk	27	19	7
Spread risk	1.081	1.210	-129
Diversification	-539	-509	-30
Counterparty risk	125	135	-10
Life Underwriting risk	647	615	32
Health Underwriting risk	257	294	-38
Non-Life underwriting risk	211	255	-44
Diversification	-837	-873	36
Operational Risk	332	311	20
Deferred tax adjustment	-662	-775	113

The increase of the total SCR is mainly driven by an increase in the capital requirement for Market risk and a lower tax adjustment. The increase for Market risk is driven by the evolutions in the financial markets during 2019, rather than by additional risk-taking. Note that the methodology to calculate the SCR has changed as a consequence of the 2019 revision of Solvency II (more favourable treatment of bonds guaranteed by a regional/local authority).

Given the amount of Own Funds of 5.925 million EUR and the total required capital SCR equal to 3.043 million EUR, the solvency ratio stands at 195%, which is the reflection of the Company's strong capital position. About 82% of the Own Funds are categorized as Tier 1 capital (similar to 2018).

E.2.4 Simplifications used within the calculation of the Solvency Capital Requirement

Simplified calculations as meant under Articles 88-112 of the Delegated Acts are only used for the calculation of the Counterparty default risk module within SCR calculations. This module represents in its totality only 3% of the total

Solvency Capital Requirement before diversification. Therefore the impact of these simplified calculations can be considered as immaterial.

In this context, only the simplifications meant under articles 107, 111 and 112 are used.

E.2.5 Statement that the undertaking's Member State has made use of the option provided for in the third subparagraph of Article 51(2) of Directive 2009/138/EC

The Belgian regulator has used the option provided for in the third subparagraph of Article 51(2) of the Solvency II directive, and as a consequence does not require companies to separately disclose a capital add-on. However there is no capital add-on for AG Insurance.

E.2.6 Information on the inputs used to calculate the Minimum Capital Requirement

The MCR is currently fixed at 45% of the level of the SCR (as a consequence of the cap which is included in the calculation methodology).

E.3 Use of the duration-based equity risk sub-module in the calculation of the Solvency Capital Requirement

AG Insurance does not use the duration-based equity risk sub-module in the calculation of the solvency capital requirement.

E.4 Differences between the standard formula and any internal model used

E.4.1 Description of the various purposes for which that undertaking is using its internal model

The Non-Life internal model is an Ageas Group-wide model approved by the regulator. It is composed of an entity model used by AG Insurance and a group aggregation model used by the Ageas Group. The Entity model stochastically simulates the full market consistent profit and loss statement (P&L) and hence generates a full distribution of the insurance results for each line of business separately and for the entity as a whole, for each sub-risk and for all risks together. As a first application, the Non-Life internal model calculates the SCR for Non-Life underwriting risk as the difference between the 99,5% percentile and the mean of the distribution of the P&L results. Within the context of 'use test' this internal model has a number of other applications as summarized in the table below:

Use	Description of use
Internal Risk Reporting	Risk Reporting is the process currently providing information to the local Risk Committees, RC and Board.
Capital allocation per business line	Assessment of the current capital position and allocation / reallocation of capital.
Comparison with standard formula	Risk assessment of the internal model by comparison with Standard Formula result, which is a requirement from ORSA and is included in the testing strategy.
Risk Appetite	The process of setting and monitoring performance against Risk appetite / Risk tolerance statements. The full distribution of the insurance profit allows to consider other percentiles than the 99,5%.
Underwriting / pricing / product development	Decisions on introduction of new products or re-pricing of existing products.
P&L attribution analysis	The P&L attribution is an exercise (part of testing strategy) which aims to ensure that all sources of risk are covered and are adequately covered by the internal model.
Reinsurance impact analysis	The process of setting and monitoring the effects of the reinsurance strategy.
Business strategy	Any activities associated with setting the strategic direction of the business as a whole. Setting of performance targets.

Use	Description of use
Risk strategy	Any activities involving the setting and monitoring of risk strategies.

E.4.2 Description of the scope of the internal model in terms of business units and risk categories

The Non-Life internal model covers all Lines of Business with respect to Non-Life insurance obligations, with the exception of the Health-related Lines of Business (Medical expense, Income protection and Worker's compensation insurance), for which only a limited part is in scope of the model.

As the *risk categories* covered, the Non-Life Underwriting Risk distinguishes the following sub-risks: 'Premium attritional' risk, 'Premium large' risk, 'Reserve' risk, Man-made Cat risk and Nat Cat risk. Premium risk is the risk that the earned premium over the forthcoming year is insufficient to cover the expenses and claims to which these premiums are related (a distinction is made between attritional claims and large claims with a cost above a predefined threshold). Reserve risk is the risk that the claims provisions are insufficient to cover outstanding claims and claims expenses. Man-made Cat risk is the risk that catastrophes with a human cause such as terrorist attacks occur and Nat Cat risk is the risk that natural catastrophes occur.

E.4.3 Description of the methods used in the internal model for the calculation of the probability distribution forecast and the Solvency Capital Requirement

The purpose of the Non-Life internal model is to produce the Market Consistent Balance Sheet at $t=0$ (part related to the non-life liabilities and the theoretical assets backing these liabilities) and to project this balance sheet over a one-year period in every of the 100.000 simulations hence generating 100.000 values of the change of net asset value which is equivalent to the market consistent P&L result.

Thanks to an appropriate level of granularity and a generation of the dependencies at the source, the P&L results can be obtained at entity level as well as for each sub-risk type and Line of Business. This allows a detailed analysis of the outcome of the model and a proper discussion with the relevant stakeholders.

Note that as the modelling of the Nat Cat risk is concerned, outputs from different external Cat models are considered in view of selecting the most appropriate model for each peril. Each entity and the group have a close collaboration with the Service CAT Providers and external CAT model vendors to maintain and deepen its knowledge of the Catastrophe modelling process, the assumptions and uncertainties inherent in the process.

E.4.4 Explanation, by risk module, of the main differences in the methodologies and underlying assumptions used in the standard formula and in the internal model

The methodology as used in the Non-Life internal model shows a number of differences with the methodology underlying the Standard Formula for Non-Life underwriting risk.

As to the 'Sub-risks', these are similar between the Standard Formula and the Internal Model though the premium risk is split into attritional and large losses in the Internal model. The lapse risk is not calculated in the Internal Model but is aggregated with the other sub-risks. 'Lines of business' are more granular in the Internal Model.

While the Standard Formula only produces one value namely the 99,5% percentile, the Internal Model produces the full distribution. Regarding 'Dependency and aggregation': in the Standard Formula a Variance-Covariance matrix is used to aggregate the different SCRs. In the internal model, the dependency is generated at the source on the gross losses, i.e. before reinsurance, before scaling down to the one-year volatility and before discounting. Dependency is considered between LoBs and between sub-risks as it is the case in the standard formula. In the Standard Formula premium and reserve risk and Cat Risk are aggregated using a correlation of 25%. In the Non-Life internal model these are assumed to be independent.

Premium and reserve risk is a factor-based model in the Standard Formula. The factors are common for the whole European market and the impact of the reinsurance is obtained by applying a reduction factor to the SCR gross. In the Internal Model, the risks are entity-specific and the model replicates almost the full functioning of the entity reinsurance treaties.

Where for Man-Made Cat Risk and Nat Cat Risk, the Standard Formula only considers a limited number of scenarios with respect to reinsurance impact, the Non-Life internal model simulates the reinsurance impact as an integrated part of the scenarios. For Nat Cat risk, external models are used to produce inputs to the internal model.

E.4.5 The risk measure and time period used in the internal model

The risk measure is the difference between the 99, 5% Value at Risk and the mean of the Market Consistent P&L result over a one-year horizon.

E.4.6 Description of the nature and appropriateness of the data used in the internal model

E.4.6.1 Structure of the internal model

While some data used in the Internal Model are provided by Ageas group (risk free curve, currency exchange rate), other data are specific to each entity such as:

- ✓ Parameters of the distribution for attritional losses, large losses, outstanding losses are based on historical data taking into consideration assumptions of the business plan for the next year.
- ✓ Correlation parameters: obtained by expert judgment where experts are the entity business managers.
- ✓ Man-Made Cat risk Motor and Property: use of European database combined with the use of external tool where the input is the portfolio of each entity.
- ✓ Cat Nat risk: use of external tool where the input is the portfolio of each entity.
- ✓ Man-Made Cat Liability: use of entity specific scenarios.
- ✓ Re-insurance: parameters of the entity re-insurance treaties.

As to the appropriateness of the data, testing on data and selected parameters is performed in order to validate the selection made. In addition, sensitivity and back-testing are done. The process documentation is an end-to-end description of the tasks, data and systems involved in the Non-Life assumption setting and Underwriting risk SCR calculation. It details which activities need to be executed (description, tools / applications used, quality controls), validation points, and clearly defines responsibilities (departments and roles). Specific data quality checklists are executed on every internal model run and when exchanging data between entities and group.

E.4.6.2 Risks not covered by the standard formula but covered by the internal model

There are no such risks.

E.5 Non-compliance with Minimum Capital Requirement and non-compliance with Solvency Capital Requirement

Not applicable for AG Insurance

E.6 Any other information

No other information

ANNEXES



Annex 1: Public QRTs

QRT BALANCE SHEET [S.02.01.02]

Assets

Intangible assets	-
Deferred tax assets	7.533.409
Pension benefit surplus	-
Property, plant & equipment held for own use	580.228.166
Investments (other than assets held for index-linked and unit-linked contracts)	61.295.572.175
Property (other than for own use)	4.439.259.386
Holdings in related undertakings, including participations	641.572.669
Equities	2.041.788.752
Equities - listed	2.030.967.347
Equities - unlisted	10.821.405
Bonds	52.090.534.525
Government Bonds	37.639.139.895
Corporate Bonds	14.310.654.661
Structured notes	136.258.097
Collateralised securities	4.481.871
Collective Investments Undertakings	1.739.845.550
Derivatives	11.044.218
Deposits other than cash equivalents	331.527.075
Other investments	-
Assets held for index-linked and unit-linked contracts	9.800.446.928
Loans and mortgages	9.885.920.220
Loans on policies	440.337.157
Loans and mortgages to individuals	1.154.532.999
Other loans and mortgages	8.291.050.065
Reinsurance recoverables from:	431.183.180
Non-life and health similar to non-life	361.421.556
Non-life excluding health	342.161.666
Health similar to non-life	19.259.890
Life and health similar to life, excluding health and index-linked and unit-linked	69.761.624
Health similar to life	71.117.800
Life excluding health and index-linked and unit-linked	-1.356.176
Life index-linked and unit-linked	-
Deposits to cedants	733.032
Insurance and intermediaries receivables	261.252.044
Reinsurance receivables	8.696.759
Receivables (trade, not insurance)	187.705.074
Own shares (held directly)	-
Amounts due in respect of own fund items or initial fund called up but not yet paid in	-
Cash and cash equivalents	726.411.121
Any other assets, not elsewhere shown	209.672.502
Total assets	83.395.354.610

Solvency II value

-
7.533.409
-
580.228.166
61.295.572.175
4.439.259.386
641.572.669
2.041.788.752
2.030.967.347
10.821.405
52.090.534.525
37.639.139.895
14.310.654.661
136.258.097
4.481.871
1.739.845.550
11.044.218
331.527.075
-
9.800.446.928
9.885.920.220
440.337.157
1.154.532.999
8.291.050.065
431.183.180
361.421.556
342.161.666
19.259.890
69.761.624
71.117.800
-1.356.176
-
733.032
261.252.044
8.696.759
187.705.074
-
-
726.411.121
209.672.502
83.395.354.610

Liabilities

	Solvency II value
Technical provisions – non-life	1.933.171.503
Technical provisions – non-life (excluding health)	1.738.813.713
TP calculated as a whole	-
Best Estimate	1.711.389.092
Risk margin	27.424.621
Technical provisions - health (similar to non-life)	194.357.790
TP calculated as a whole	-
Best Estimate	189.326.658
Risk margin	5.031.132
Technical provisions - life (excluding index-linked and unit-linked)	60.682.705.872
Technical provisions - health (similar to life)	2.139.947.044
TP calculated as a whole	-
Best Estimate	1.999.759.997
Risk margin	140.187.046
Technical provisions – life (excluding health and index-linked and unit-linked)	58.542.758.829
TP calculated as a whole	-
Best Estimate	58.064.589.902
Risk margin	478.168.926
Technical provisions – index-linked and unit-linked	9.510.347.372
TP calculated as a whole	-
Best Estimate	9.442.916.529
Risk margin	67.430.843
Contingent liabilities	-
Provisions other than technical provisions	24.854.784
Pension benefit obligations	842.396.005
Deposits from reinsurers	68.011.733
Deferred tax liabilities	445.134.509
Derivatives	26.165.702
Debts owed to credit institutions	1.999.377.865
Financial liabilities other than debts owed to credit institutions	318.570.138
Insurance & intermediaries payables	290.632.653
Reinsurance payables	1.724.356
Payables (trade, not insurance)	253.594.409
Subordinated liabilities	1.257.530.281
Subordinated liabilities not in BOF	-
Subordinated liabilities in BOF	1.257.530.281
Any other liabilities, not elsewhere shown	504.895.047
Total liabilities	78.159.112.229
Excess of assets over liabilities	5.236.242.381

QRT PREMIUMS, CLAIMS AND EXPENSES BY LINE OF BUSINESS (S.05.01.02)

	Line of Business for: non-life insurance and reinsurance obligations (direct business and accepted proportional reinsurance)								
	Medical expense insurance	Income protection insurance	Workers' compensation insurance	Motor vehicle liability insurance	Other motor insurance	Marine, aviation and transport insurance	Fire and other damage to property insurance	General liability insurance	Credit and suretyship insurance
Premiums written									
Gross - Direct Business	124.410.126	38.604.885	176.149.152	355.537.045	241.078.505	569.830	666.693.193	132.814.813	-
Gross - Proportional reinsurance accepted	85.328	-	1.697.683	-	-	-	-911	946.224	-
Gross - Non-proportional reinsurance accepted									
Reinsurers' share	2.017	11.983.571	53.495.972	111.730.752	73.478.297	170.949	224.390.588	41.900.328	-
Net	124.493.437	26.621.314	124.350.863	243.806.293	167.600.208	398.881	442.301.694	91.860.710	-
Premiums earned									
Gross - Direct Business	123.839.980	38.744.691	177.589.835	356.241.257	239.909.474	570.729	664.991.005	132.552.303	-
Gross - Proportional reinsurance accepted	85.328	-	1.699.532	-	-	-	-911	946.224	-
Gross - Non-proportional reinsurance accepted									
Reinsurers' share	2.017	11.893.298	53.502.878	111.928.168	73.125.514	175.337	223.887.770	41.958.890	-
Net	123.923.291	26.851.393	125.786.489	244.313.089	166.783.959	395.392	441.102.324	91.539.637	-
Claims incurred									
Gross - Direct Business	98.641.982	21.901.839	155.363.565	198.339.667	134.364.166	96.221	291.434.249	37.071.549	-
Gross - Proportional reinsurance accepted	-30.824	-	449.650	1.980	-	1.908	33.036	-561.398	-
Gross - Non-proportional reinsurance accepted									
Reinsurers' share	-954	9.911.214	50.087.383	80.364.427	43.259.406	12.847	113.660.113	24.093.344	-
Net	98.612.112	11.990.624	105.725.832	117.977.220	91.104.760	85.282	177.807.172	12.416.807	-
Changes in other technical provisions									
Gross - Direct Business	-6.616.842	-	-	-	-	-	-	-	-
Gross - Proportional reinsurance accepted	-	-	-	-	-	-	-	-	-
Gross - Non- proportional reinsurance accepted									
Reinsurers' share	-	-	-	-	-	-	-	-	-
Net	-6.616.842	-	-	-	-	-	-	-	-
Expenses incurred	30.772.867	1.495.645	52.762.075	103.546.095	71.508.376	127.255	224.464.929	51.065.037	-
Other expenses									
Total expenses									



Solvency and Financial Condition Report 2019

	Line of Business for: non-life insurance and reinsurance obligations (direct business and accepted proportional			Line of business for: accepted non-proportional reinsurance				Total
	Legal expenses insurance	Assistance	Miscellaneous financial loss	Health	Casualty	Marine, aviation, transport	Property	
Premiums written								
Gross - Direct Business	76.909.591	22.561.467	7.534.072					1.842.862.679
Gross - Proportional reinsurance accepted	-	-	3.147					2.731.471
Gross - Non-proportional reinsurance accepted				-	-	-	-	-
Reinsurers' share	23.091.214	9.116.138	2.279.223	-	-	-	-	551.639.050
Net	53.818.377	13.445.328	5.257.996	-	-	-	-	1.293.955.100
Premiums earned								
Gross - Direct Business	76.786.236	22.304.538	7.541.786					1.841.071.835
Gross - Proportional reinsurance accepted	-	-	3.134					2.733.308
Gross - Non-proportional reinsurance accepted				-	-	-	-	-
Reinsurers' share	23.053.686	9.039.972	2.275.126	-	-	-	-	550.842.658
Net	53.732.550	13.264.566	5.269.794	-	-	-	-	1.292.962.484
Claims incurred								
Gross - Direct Business	27.152.376	16.739.694	426.449					981.531.756
Gross - Proportional reinsurance accepted	-	-	1.157.312					1.051.665
Gross - Non-proportional reinsurance accepted				-	-	-	-	-
Reinsurers' share	13.374.976	6.267.785	989.950	-	-	-	-	342.020.492
Net	13.777.400	10.471.909	593.812	-	-	-	-	640.562.929
Changes in other technical provisions								
Gross - Direct Business	-	-	-					-6.616.842
Gross - Proportional reinsurance accepted	-	-	-					-
Gross - Non- proportional reinsurance accepted				-	-	-	-	-
Reinsurers'share	-	-	-	-	-	-	-	-
Net	-	-	-	-	-	-	-	-6.616.842
Expenses incurred	25.557.428	2.560.912	2.401.632	-	-	-	-	566.262.252
Other expenses								-892.414
Total expenses								565.369.838



Solvency and Financial Condition Report 2019

	Line of Business for: life insurance obligations						Life reinsurance obligations		Total
	Health insurance	Insurance with profit participation	Index-linked and unit-linked insurance	Other life insurance	Annuities stemming from non-life insurance contracts and relating to health insurance obligations	Annuities stemming from non-life insurance contracts and relating to insurance obligations other than health insurance obligations	Health reinsurance	Life-reinsurance	
Premiums written									
Gross	120.012.322	3.567.740.095	808.230.928	165.258.805	132.459.437	-	-	-	4.793.701.587
Reinsurers' share	34.295	5.989.106	-	1.379.283	5.838.015	-	-	-	13.240.698
Net	119.978.027	3.561.750.989	808.230.928	163.879.522	126.621.423	-	-	-	4.780.460.889
Premiums earned									
Gross	119.804.956	3.567.740.095	808.230.928	165.258.805	132.574.576	-	-	-	4.793.609.360
Reinsurers' share	34.295	5.989.106	-	1.379.283	5.838.015	-	-	-	13.240.698
Net	119.770.661	3.561.750.989	808.230.928	163.879.522	126.736.561	-	-	-	4.780.368.662
Claims incurred									
Gross	30.874.500	3.511.309.506	476.617.736	208.101.151	93.426.910	-	-	-	4.320.329.803
Reinsurers' share	-	870.586	-	143.764	1.586.930	-	-	-	2.601.280
Net	30.874.500	3.510.438.920	476.617.736	207.957.387	91.839.980	-	-	-	4.317.728.523
Changes in other technical provisions									
Gross	48.647.935	829.781.004	1.375.311.917	-130.875.377	19.573.479	-	-	-	2.142.438.958
Reinsurers' share	-	352.763	-	-98.086	37.218	-	-	-	291.895
Net	48.647.935	829.428.241	1.375.311.917	-130.777.291	19.536.261	-	-	-	2.142.147.063
Expenses incurred	33.050.528	371.901.095	82.884.471	69.320.215	16.324.167	-	-	-	573.480.475
Other expenses									-297.472
Total expenses									573.183.003

QRT PREMIUMS, CLAIMS AND EXPENSES BY COUNTRY [S.05.02.01]

	Home Country	Top 5 countries (by amount of gross premiums written) - non-life obligations					Total Top 5 and home country
Premiums written							
Gross - Direct Business	1.842.862.679						1.842.862.679
Gross - Proportional reinsurance accepted	2.731.471						2.731.471
Gross - Non-proportional reinsurance accepted	-						-
Reinsurers' share	551.639.050						551.639.050
Net	1.293.955.100						1.293.955.100
Premiums earned							
Gross - Direct Business	1.841.071.835						1.841.071.835
Gross - Proportional reinsurance accepted	2.733.308						2.733.308
Gross - Non-proportional reinsurance accepted	-						-
Reinsurers' share	550.842.658						550.842.658
Net	1.292.962.484						1.292.962.484
Claims incurred							
Gross - Direct Business	981.531.756						981.531.756
Gross - Proportional reinsurance accepted	1.051.665						1.051.665
Gross - Non-proportional reinsurance accepted	-						-
Reinsurers' share	342.020.492						342.020.492
Net	640.562.929						640.562.929
Changes in other technical provisions							
Gross - Direct Business	-6.616.842						-6.616.842
Gross - Proportional reinsurance accepted	-						-
Gross - Non- proportional reinsurance accepted	-						-
Reinsurers'share	-						-
Net	-6.616.842						-6.616.842
Expenses incurred							566.262.252
Other expenses							-892.414
Total expenses							565.369.838

	Home Country	Top 5 countries (by amount of gross premiums written) - life obligations					Total Top 5 and home country
Premiums written							
Gross	4.793.701.587						4.793.701.587
Reinsurers' share	13.240.698						13.240.698
Net	4.780.460.889						4.780.460.889
Premiums earned							
Gross	4.793.609.360						4.793.609.360
Reinsurers' share	13.240.698						13.240.698
Net	4.780.368.662						4.780.368.662
Claims incurred							
Gross	4.320.329.803						4.320.329.803
Reinsurers' share	2.601.280						2.601.280
Net	4.317.728.523						4.317.728.523
Changes in other technical provisions							
Gross	2.142.438.958						2.142.438.958
Reinsurers' share	291.895						291.895
Net	2.142.147.063						2.142.147.063
Expenses incurred	573.480.475						573.480.475
Other expenses							-297.472
Total expenses							573.183.003

QRT LIFE AND HEALTH SLT TECHNICAL PROVISIONS (\$.12.01.02)

Technical provisions calculated as a whole

Total Recoverables from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default associated to TP as a whole

Technical provisions calculated as a sum of BE and RM

Best Estimate

Gross Best Estimate

Total Recoverables from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default

Best estimate minus recoverables from reinsurance/SPV and Finite Re - total

Risk Margin

Amount of the transitional on Technical Provisions

Technical Provisions calculated as a whole

Best estimate

Risk margin

Technical provisions - total

	Insurance with profit participation	Index-linked and unit-linked insurance			Other life insurance			Annuities stemming from non-life insurance contracts and relating to insurance obligation other than health insurance obligations	Accepted reinsurance	Total (Life other than health insurance, incl. Unit-Linked)
			Contracts without options and guarantees	Contracts with options or guarantees		Contracts without options and guarantees	Contracts with options or guarantees			
	C0020	C0030	C0040	C0050	C0060	C0070	C0080	C0090	C0100	C0150
R0010	-	-			-			-	-	-
R0020	-	-			-			-	-	-
R0030	57.073.146.852		-	9.447.615.629		991.442.742	-	-	-	67.512.205.223
R0080	-1.356.176		-	-		-	-	-	-	-1.356.176
R0090	57.074.503.028		-	9.447.615.629		991.442.742	-	-	-	67.513.561.399
R0100	444.997.584	67.430.843			33.171.342			-	-	545.599.770
R0110	-	-			-			-	-	-
R0120	-	-	-	-		-	-	-	-	-
R0130	-	-						-	-	-
R0200	57.518.144.436	9.515.046.473			1.024.614.084			-	-	68.057.804.993

Technical provisions calculated as a whole

Total Recoverables from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default associated to TP as a whole

Technical provisions calculated as a sum of BE and RM

Best Estimate

Gross Best Estimate

Total Recoverables from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default

Best estimate minus recoverables from reinsurance/SPV and Finite Re - total

Risk Margin

Amount of the transitional on Technical Provisions

Technical Provisions calculated as a whole

Best estimate

Risk margin

Technical provisions - total

	Health insurance (direct business)			Annuities stemming from non-life insurance contracts and relating to health insurance obligations	Health reinsurance (reinsurance accepted)	Total (Health similar to life insurance)
		Contracts without options and guarantees	Contracts with options or guarantees			
	C0160	C0170	C0180	C0190	C0200	C0210
R0210	-			-	-	-
R0220	-			-	-	-
R0030		209.769.456	-	1.789.990.528	-	1.999.759.984
R0080		537.198	-	70.580.602	-	71.117.800
R0090		209.232.258	-	1.719.409.926	-	1.928.642.184
R0100	46.054.724			94.132.323	-	140.187.046
R0110	-			-	-	-
R0120		-	-	-	-	-
R0130	-			-	-	-
R0200	255.824.180			1.884.122.851	-	2.139.947.031



QRT NON-LIFE TECHNICAL PROVISIONS [S.17.01.02]

Technical provisions calculated as a whole

Total Recoverables from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default associated to TP as a whole

Technical provisions calculated as a sum of BE and RM

Best estimate

Premium provisions

Gross

Total recoverable from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default

Net Best Estimate of Premium Provisions

Claims provisions

Gross

Total recoverable from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default

Net Best Estimate of Claims Provisions

Total Best estimate - gross

Total Best estimate - net

Risk margin

Amount of the transitional on Technical Provisions

Technical Provisions calculated as a whole

Best estimate

Risk margin

Technical provisions - total

Technical provisions - total

Recoverable from reinsurance contract/SPV and Finite Re after the adjustment for expected losses due to counterparty default - total

Technical provisions minus recoverables from reinsurance/SPV and Finite Re - total

Direct business and accepted proportional reinsurance								
Medical expense insurance	Income protection insurance	Workers' compensation insurance	Motor vehicle liability insurance	Other motor insurance	Marine, aviation and transport insurance	Fire and other damage to property insurance	General liability insurance	Credit and suretyship insurance
C0020	C0030	C0040	C0050	C0060	C0070	C0080	C0090	C0100
R0010	-	-	-	-	-	-	-	-
R0050	-	-	-	-	-	-	-	-
R0060	-5.630.639	-2.083.884	6.279.924	44.493.203	31.014.422	-31.537	97.152.833	4.074.257
R0140	-	-984.432	1.459.565	11.637.076	10.076.326	-9.991	30.126.934	95.308
R0150	-5.630.639	-1.099.452	4.820.359	32.856.127	20.938.096	-21.547	67.025.899	3.978.949
R0160	54.225.945	34.739.325	101.795.988	840.990.971	13.691.737	31.990	158.205.003	356.281.745
R0240	-	4.153.592	14.631.165	180.055.204	-328.500	12.887	48.168.845	39.038.622
R0250	54.225.945	30.585.733	87.164.823	660.935.768	14.020.236	19.104	110.036.157	317.243.123
R0260	48.595.307	32.655.440	108.075.912	885.484.174	44.706.158	453	255.357.836	360.356.002
R0270	48.595.307	29.486.281	91.985.182	693.791.895	34.958.332	-2.443	177.062.057	321.222.072
R0280	1.362.590	457.117	3.211.425	12.384.974	1.707.428	1.409	4.869.569	6.389.877
R0290	-	-	-	-	-	-	-	-
R0300	-	-	-	-	-	-	-	-
R0310	-	-	-	-	-	-	-	-
Direct business and accepted proportional reinsurance								
Medical expense insurance	Income protection insurance	Workers' compensation insurance	Motor vehicle liability insurance	Other motor insurance	Marine, aviation and transport insurance	Fire and other damage to property insurance	General liability insurance	Credit and suretyship insurance
R0320	49.957.896	33.112.558	111.287.337	897.869.148	46.413.586	1.862	260.227.405	366.745.879
R0330	-	3.169.160	16.090.730	191.692.279	9.747.827	2.896	78.295.779	39.133.930
R0340	49.957.896	29.943.398	95.196.607	706.176.869	36.665.759	-1.034	181.931.626	327.611.949



Solvency and Financial Condition Report 2019

Technical provisions calculated as a whole

Total Recoverables from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default associated to TP as a whole

Technical provisions calculated as a sum of BE and RM

Best estimate

Premium provisions

Gross

Total recoverable from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default

Net Best Estimate of Premium Provisions

Claims provisions

Gross

Total recoverable from reinsurance/SPV and Finite Re after the adjustment for expected losses due to counterparty default

Net Best Estimate of Claims Provisions

Total Best estimate - gross

Total Best estimate - net

Risk margin

Amount of the transitional on Technical Provisions

Technical Provisions calculated as a whole

Best estimate

Risk margin

	Direct business and accepted proportional reinsurance			Accepted non-proportional reinsurance				Total Non-Life obligation
	Legal expenses insurance	Assistance	Miscellaneous financial loss	Non-proportional health reinsurance	Non-proportional casualty reinsurance	Non-proportional marine, aviation and transport reinsurance	Non-proportional property reinsurance	
R0010	-	-	-	-	-	-	-	-
R0050	-	-	-	-	-	-	-	-
R0060	4.661.357	884.323	937.238	-	-161.635	-	-	181.589.862
R0140	1.093.537	-287.152	239.451	-	-	-	-	53.446.621
R0150	3.567.820	1.171.474	697.788	-	-161.635	-	-	128.143.240
R0160	112.606.177	636.774	3.234.911	-	42.685.325	-	-	1.719.125.891
R0240	7.995.251	394.770	107.101	-	13.745.999	-	-	307.974.935
R0250	104.610.926	242.005	3.127.810	-	28.939.326	-	-	1.411.150.956
R0260	117.267.534	1.521.097	4.172.149	-	42.523.689	-	-	1.900.715.752
R0270	108.178.747	1.413.479	3.825.598	-	28.777.690	-	-	1.539.294.196
R0280	1.136.388	84.535	328.077	-	522.364	-	-	32.455.752
R0290	-	-	-	-	-	-	-	-
R0300	-	-	-	-	-	-	-	-
R0310	-	-	-	-	-	-	-	-

Technical provisions - total

Technical provisions - total

Recoverable from reinsurance contract/SPV and Finite Re after the adjustment for expected losses due to counterparty default - total

Technical provisions minus recoverables from reinsurance/SPV and Finite Re - total

	Direct business and accepted proportional reinsurance			Accepted non-proportional reinsurance				Total Non-Life obligation
	Legal expenses insurance	Assistance	Miscellaneous financial loss	Non-proportional health reinsurance	Non-proportional casualty reinsurance	Non-proportional marine, aviation and transport reinsurance	Non-proportional property reinsurance	
R0320	118.403.922	1.605.632	4.500.226	-	43.046.053	-	-	1.933.171.505
R0330	9.088.787	107.618	346.551	-	13.745.999	-	-	361.421.556
R0340	109.315.135	1.498.014	4.153.675	-	29.300.054	-	-	1.571.749.949



QRT NON-LIFE INSURANCE CLAIMS INFORMATION [S.19.01.21]

Underwriting

1-Accident year

	Development year										In Current year	Sum of years (cumulative)
	0	1	2	3	4	5	6	7	8	9		
Prior											22,287,079	22,287,079
N-9	533,530,436	245,821,390	43,057,724	23,823,579	15,570,066	12,158,419	9,146,233	8,740,640	6,599,124	7,932,853	7,932,853	906,380,464
N-8	516,945,413	218,401,834	40,866,283	19,739,113	16,063,741	9,986,931	8,536,577	5,894,516	6,098,518		6,098,518	842,532,925
N-7	506,952,205	199,467,717	37,183,908	21,138,517	15,783,394	12,365,432	13,475,610	9,190,799			9,190,799	815,557,582
N-6	502,519,005	205,987,877	41,947,682	22,391,342	14,424,960	10,862,899	10,033,539				10,033,539	808,167,304
N-5	587,276,679	238,569,228	40,730,216	22,240,183	14,172,349	15,367,010					15,367,010	918,355,664
N-4	466,015,210	215,787,082	38,902,071	21,898,949	15,156,743						15,156,743	757,760,055
N-3	497,864,969	228,758,195	36,424,482	23,325,739							23,325,739	786,373,386
N-2	439,531,242	224,325,382	42,350,826								42,350,826	706,207,451
N-1	521,729,479	255,027,891									255,027,891	776,757,369
N	541,725,006										541,725,006	541,725,006
Total											948,496,003	7,882,104,287

	Development year										Year end (discounted data)
	0	1	2	3	4	5	6	7	8	9	
Prior											290,480,866
N-9	-	-	-	-	-	83,444,764	72,433,477	67,819,377	57,817,894	48,974,135	286,001,360
N-8	-	-	-	-	82,031,637	66,034,610	65,730,999	57,493,559	46,855,594		47,541,809
N-7	-	-	-	143,296,831	130,540,470	129,356,284	100,841,944	86,783,615			45,449,650
N-6	-	-	133,670,191	107,103,969	106,560,669	83,532,352	71,234,165				83,866,501
N-5	-	133,220,266	151,520,554	146,482,224	110,700,121	91,955,331					68,839,457
N-4	422,831,578	143,881,742	147,311,326	116,614,234	97,016,754						88,680,156
N-3	428,638,118	178,229,459	137,645,301	110,363,552							93,710,539
N-2	414,345,161	176,547,053	139,430,638								106,825,739
N-1	436,927,655	154,509,554									135,160,476
N	481,919,575										151,175,535
Total											475,801,712
											1,583,052,934

QRT IMPACT OF LONG TERM GUARANTEES AND TRANSITIONAL MEASURES [S.22.01.21]

	Amount with LTG measures and transitionals	Impact of transitional on technical provisions	Impact of transitional on interest rate	Impact of volatility adjustment set to zero	Impact of matching adjustment set to zero
Technical provisions	72.130.923.528	-	-	318.280.965	-
Basic own funds	5.925.096.454	-	-	-237.167.920	-
Eligible own funds to meet SCR	5.925.096.454	-	-	-237.167.920	-
SCR	3.042.636.859	-	-	141.713.553	-
Eligible own funds to meet MCR	4.941.403.491	-	-	-224.413.700	-
Minimum Capital Requirement	1.369.186.587	-	-	63.771.099	-

QRT OWN FUNDS [S.23.01.01]

Basic own funds before deduction for participations in other financial sector as foreseen in article 68 of Delegated Regulation (EU) 2015/35

Ordinary share capital (gross of own shares)

Share premium account related to ordinary share capital

Initial funds, members' contributions or the equivalent basic own - fund item for mutual and mutual-type undertakings

Subordinated mutual member accounts

Surplus funds

Preference shares

Share premium account related to preference shares

Reconciliation reserve

Subordinated liabilities

An amount equal to the value of net deferred tax assets

Other own fund items approved by the supervisory authority as basic own funds not specified above

Own funds from the financial statements that should not be represented by the reconciliation reserve and do not meet the criteria to be classified as Solvency II own funds

Own funds from the financial statements that should not be represented by the reconciliation reserve and do not meet the criteria to be classified as Solvency II

Deductions

Deductions for participations in financial and credit institutions

Total basic own funds after deductions

Total	Tier 1 - unrestricted	Tier 1 - restricted	Tier 2	Tier 3
526.604.029	526.604.029		-	
231.497.747	231.497.747		-	
-	-		-	
-		-	-	-
759.955.550	759.955.550			
-		-	-	-
-		-	-	-
3.149.508.848	3.149.508.848			
1.257.530.281		-	1.257.530.281	-
-				-
-	-	-	-	-
-				
-	-	-	-	
5.925.096.454	4.667.566.173	-	1.257.530.281	-

Ancillary own funds

Unpaid and uncalled ordinary share capital callable on demand

Unpaid and uncalled initial funds, members' contributions or the equivalent basic own fund item for mutual and mutual - type undertakings, callable on demand

Unpaid and uncalled preference shares callable on demand

A legally binding commitment to subscribe and pay for subordinated liabilities on

Letters of credit and guarantees under Article 96(2) of the Directive 2009/138/EC

Letters of credit and guarantees other than under Article 96(2) of the Directive

Supplementary members calls under first subparagraph of Article 96(3) of the Directive 2009/138/EC

Supplementary members calls - other than under first subparagraph of Article 96(3) of the Directive 2009/138/EC

Other ancillary own funds

Total ancillary own funds

Available and eligible own funds

Total available own funds to meet the SCR

Total available own funds to meet the MCR

Total eligible own funds to meet the SCR

Total eligible own funds to meet the MCR

SCR

MCR

Ratio of Eligible own funds to SCR

Ratio of Eligible own funds to MCR

-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
-	-	-	-	-
5.925.096.454	4.667.566.173	-	1.257.530.281	-
5.925.096.454	4.667.566.173	-	1.257.530.281	-
5.925.096.454	4.667.566.173	-	1.257.530.281	-
4.941.403.491	4.667.566.173	-	273.837.317	-
3.042.636.859				
1.369.186.587				
195%				
361%				



Reconciliation reserve

Excess of assets over liabilities

Own shares (held directly and indirectly)

Foreseeable dividends, distributions and charges

Other basic own fund items

Adjustment for restricted own fund items in respect of matching adjustment

Reconciliation reserve

Expected profits

Expected profits included in future premiums (EPIFP) - Life business

Expected profits included in future premiums (EPIFP) - Non- life business

Total Expected profits included in future premiums (EPIFP)

5.236.242.381	
-	
568.676.208	
1.518.057.326	
-	
3.149.508.848	
225.383.599	
30.100.004	
255.483.603	

QRT SOLVENCY CAPITAL REQUIREMENT – STANDARD FORMULA [S.25.01.21]

Market risk
Counterparty default risk
Life underwriting risk
Health underwriting risk
Non-life underwriting risk
Diversification
Intangible asset risk

Basic Solvency Capital Requirement

Gross solvency capital requirement	USP	Simplifications
3.844.586.453		-
154.455.972		
602.504.555	-	-
280.829.844	-	-
443.464.377	-	-
-1.023.288.482		
-		
4.302.552.718		

Calculation of Solvency Capital Requirement

Operational risk
Loss-absorbing capacity of technical provisions
Loss-absorbing capacity of deferred taxes
Capital requirement for business operated in accordance with Art. 4 of Directive 2003/41/EC

Solvency capital requirement excluding capital add-on

Capital add-on already set

Solvency capital requirement

Other information on SCR

Capital requirement for duration-based equity risk sub-module
Total amount of Notional Solvency Capital Requirement for remaining part
Total amount of Notional Solvency Capital Requirements for ring fenced funds
Total amount of Notional Solvency Capital Requirement for matching adjustment portfolios
Diversification effects due to RFF nSCR aggregation for article 304

331.643.147
-848.757.115
-662.315.010
-
3.123.123.740
-
3.123.123.740
-
-
-
-

QRT SOLVENCY CAPITAL REQUIREMENT – PARTIAL INTERNAL MODEL [S.25.02.21]

Unique number of component	Components description	Calculation of the Solvency Capital Requirement	Amount modelled	USP	Simplifications
1	Market risk	2.971.448.181	-	-	-
2	Counterparty default risk	124.501.816	-	-	-
3	Life underwriting risk	646.854.771	-	-	-
7	Operational risk	331.643.147	-	-	-
9	LAC Deferred Taxes (negative amount)	-662.315.010	-	-	-
10	Non Life and Health Internal Model	467.391.563	210.651.093	-	-

Calculation of Solvency Capital Requirement

Total undiversified components

Diversification

Capital requirement for business operated in accordance with Art. 4 of Directive 2003/41/EC

Solvency capital requirement excluding capital add-on

Capital add-ons already set

Solvency capital requirement

Other information on SCR

Amount/estimate of the overall loss-absorbing capacity of technical provisions

Amount/estimate of the overall loss-absorbing capacity of deferred taxes

Capital requirement for duration-based equity risk sub-module

Total amount of Notional Solvency Capital Requirements for remaining part

Total amount of Notional Solvency Capital Requirements for ring fenced funds (other than those related to business operated in accordance with Art. 4 of Directive 2003/41/EC (transitional))

Total amount of Notional Solvency Capital Requirement for matching adjustment portfolios

Diversification effects due to RFF nSCR aggregation for article 304

3.879.524.467
-836.887.608
-
3.042.636.859
-
3.042.636.859
-851.614.615
-662.315.010
-
-
-
-
-

QRT MINIMUM CAPITAL REQUIREMENT - LIFE AND NON-LIFE INSURANCE ACTIVITY [S.28.02.01]

	Non-life activities	Life activities
	MCR(NL,NL) Result	MCR(NL,L)Result
Linear formula component for non-life insurance and reinsurance obligations	250.149.835	-

Medical expense insurance and proportional reinsurance
Income protection insurance and proportional reinsurance
Workers' compensation insurance and proportional reinsurance
Motor vehicle liability insurance and proportional reinsurance
Other motor insurance and proportional reinsurance
Marine, aviation and transport insurance and proportional reinsurance
Fire and other damage to property insurance and proportional reinsurance
General liability insurance and proportional reinsurance
Credit and suretyship insurance and proportional reinsurance
Legal expenses insurance and proportional reinsurance
Assistance and proportional reinsurance
Miscellaneous financial loss insurance and proportional reinsurance
Non-proportional health reinsurance
Non-proportional casualty reinsurance
Non-proportional marine, aviation and transport reinsurance
Non-proportional property reinsurance

Non-life activities	Life activities
Net (of reinsurance/SPV) best estimate and TP calculated as a whole	Net (of reinsurance) written premiums in the last 12 months
48.595.308	144.106.632
29.486.280	26.554.196
91.985.180	121.111.285
693.791.893	243.844.293
34.958.331	167.606.088
-	398.882
177.062.059	441.584.491
321.222.072	90.550.739
-	-
108.178.746	53.838.991
1.413.479	13.445.328
3.825.598	5.273.790
-	-
28.777.690	1.910.618
-	-
-	-



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	Non-life activities MCR(L,NL) Result	Life activities MCR(L,L) Result
Linear formula component for life insurance and reinsurance obligations	38,439,441	2,079,545,520

Obligations with profit participation - guaranteed benefits
Obligations with profit participation - future discretionary benefits
Index-linked and unit-linked insurance obligations
Other life (re)insurance and health (re)insurance obligations
Total capital at risk for all life (re)insurance obligations

Overall MCR calculation

Linear MCR	2,368,134,796
SCR	3,042,636,859
MCR cap	1,369,186,587
MCR floor	760,659,215
Combined MCR	1,369,186,587
Absolute floor of the MCR	7,400,000
Minimum Capital Requirement	1,369,186,587

Notional non-life and life MCR calculation

	Non-life activities	Life activities
Notional linear MCR	288,589,276	2,079,545,520
Notional SCR excluding add-on (annu	370,786,481	2,671,850,378
Notional MCR cap	166,853,917	1,202,332,670
Notional MCR floor	92,696,620	667,962,594
Notional Combined MCR	166,853,917	1,202,332,670
Absolute floor of the notional MCR	3,700,000	3,700,000
Notional MCR	166,853,917	1,202,332,670

Non-life activities

Life activities

Net (of reinsurance/SPV) best estimate and TP calculated as a whole	Net (of reinsurance/SPV) total capital at risk	Net (of reinsurance/SPV) best estimate and TP calculated as a whole	Net (of reinsurance/SPV) total capital at risk
-		55,152,635,508	
-		1,921,900,006	
-		9,442,916,529	
1,830,449,574		1,116,562,858	
	-		70,412,244,314