AAS „BTA Baltic Insurance Company”

Public Report
for the period from 01.01.2016 until 31.12.2016

This Report is prepared in accordance with the Financial and Capital Market Commission Regulations No. 147 "Regulations on Preparation of Public Quarterly Reports of the Insurers" of 31 August 2016.

„BTA Baltic Insurance Company" has been incorporated on October 28th 2014 as a new insurance company (AAS). On June 10th 2015 the Company has received the insurance license from the Financial and Capital Market Commission for all lines of non-life insurance. On July 1st 2015 the Company's mother company Balcia Insurance Company SE has transferred its insurance portfolio in the Baltic states to the Company through reorganization process. On August 24rd 2016 VIENNA INSURANCE GROUP AG Wiener Versicherung Gruppe became the majority shareholder of the Company.

The Report includes the summarised information on the Company's activity over the period from **January 1st until December 31th 2016.**

Company information

Name of the Company	„BTA Baltic Insurance Company" AAS
Legal status	Insurance Joint Stock Company
Number, place and date of registration	40103840140, Riga, October 28th 2014
Address	Kr. Valdemara 63, Riga
Members of the Board and their positions	Janis Lucaus - Chairman of the Board Oskars Hartmanis - Board member Evija Matveja - Board member Wolfgang Kurt Wilhelm Stockmeyer – Board member since 24.10.2016.
Members of the Council and their positions	Franz Fuchs - Chairman of the Council since 24.08.2016. Elisabeth Stadler - Deputy Chairman of the Council since 24.08.2016. Gints Dandzbergs - Member of the Council since 24.08.2016. Jan Bogutyn - Member of the Council since 24.08.2016. Artur Borowinski - Member of the Council since 24.08.2016. Gints Dandzbergs - Chairman of the Council until 23.08.2016. Pauls Dandzbergs - Deputy Chairman of the Council until 23.08.2016. Marts Dandzbergs - Deputy Chairman of the Council until 23.08.2016. Andrejs Galanders - Member of the Council until 23.08.2016. Agris Dambenieks - Member of the Council until 23.08.2016.
Reporting Period	01.01.2016 – 31.12.2016
Shareholders	

Shareholder	Number of shares	% of the share capital
VIENNA INSURANCE GROUP AG Wiener Versicherung Gruppe	261 000	90%
Balcia Insurance Company SE	29 000	10%
Total:	**290 000**	**100%**

Face value of one share	EUR 100.00
Subscribed share capital	EUR 29 000 000
Paid-up share capital	EUR 29 000 000
Foreign branches	Lithuania, Estonia

Balance Sheet
31.12.2016

Item	Reporting Period	Previous Reporting Year
Tangible assets	767 896	879 298
Investments in land lots and buildings	516 460	547 623
Intangible assets	1 642 319	1 282 876
Investments in share capital of related companies	-	-
Investments in share capital of associated companies	-	-
Financial assets held for trading		
Classified as financial assets at fair value through profit and loss	80 713 408	92 748 519
Financial assets available-for-sale	-	-
Held-to-maturity investments	1 277 000	2 783 593
Loans granted and debtor debts	20 829 053	16 258 406
Accrued income and deferred expenses	6 625 564	5 876 057
Tax assets	548 962	1 010 405
Reinsurance contracts	9 015 325	9 305 061
Cash on hand and claims on demand on credit institutions	42 479 444	19 023 935
Total assets	**164 415 431**	**149 715 773**
Capital and reserves	34 053 052	33 616 233
Insurance liabilities	113 644 503	101 670 659
Subordinated liabilities	-	-
Classified as financial liabilities at fair value through profit and loss	-	-
Financial liabilities at amortised cost	13 958 615	11 984 695
Provisions	1 615 546	1 029 559
Tax liabilities	481 189	735 398
Accrued expenses and deferred income	662 526	679 229
Total liabilities	130 362 379	116 099 540
Total capital and reserves, and liabilities	**164 415 431**	**149 715 773**

Income Statement
31.12.2016

Item	For the Reporting Period	For the Respective Period of Previous Reporting Year
Earned premiums	116 885 719	-
Other technical income, net	283 819	-
Incurred claims, net	(79 693 975)	-
Changes in life insurance technical reserves	-	-
Changes in other technical reserves	(76 659)	-
Gratuities, net	-	-
Net operating expenses	(32 648 470)	-
Other technical expenses, net	(1 909 019)	-
Changes in equalization reserves	-	-
Investment management expenses/income and commission payments	(42 426)	-
Net interest income and dividend income	1 144 222	-
Net realized profit/loss from financial assets and financial liabilities, which are not recognized at amortized value	-	-
Net realized profit/loss from financial assets available for sale	-	-
Net profit/loss from financial assets and financial liabilities held for trading	-	-
Net profit/loss from the financial assets and financial liabilities classified at fair value through profit and loss	(91 171)	-
Revaluation result of foreign currencies	(266 719)	-
Profit/loss from derecognition of tangible assets, investments in buildings for ensuring own activities, investments in property and intangible assets		-
Depreciation	(1 056 357)	-
Impairment losses	3 573	-
Negative goodwill	-	-
Other income/(expenses) that are not recognized in other items, net	17 406	-
Profit/loss for the reporting period before tax	2 549 943	-
Corporate income tax	(617 897)	-
Net profit/loss for the reporting period	**1 932 046**	**-**

Gross Written Premiums, Gross Claims paid and Net operating expenses by type of insurance

31.12.2016

	Gross Premiums Written			Gross Claims Paid			Net operating expenses
	Total	for agreements signed in Latvia		Total	for agreements signed in Latvia		
			incl. agreements signed with private persons			incl. agreements signed with private persons	
Non-life insurance	**132 109 010**	**46 166 369**	**16 555 496**	**77 467 420**	**30 816 192**	**10 963 652**	**32 648 469**
Accident insurance	3 411 617	1 387 806	659 381	1 636 922	666 949	349 523	798 410
Health Insurance	12 633 031	11 033 574	35 776	9 064 748	8 006 696	28 132	2 694 716
Motor vehicle insurance (other than railway)	31 571 792	10 985 791	5 457 951	21 508 816	8 359 924	4 055 054	8 614 066
Railway transport insurance	281 114	53 632	-	14 574	9 513	-	60 148
Aircraft insurance	134 117	50 998	1 000	-	-	-	11 006
Vessel insurance	1 164 205	794 963	9 778	1 217 551	1 184 155	5 028	(45 904)
Cargo insurance	868 948	449 694	50	89 545	84 368	-	203 279
Property insurance against fire and natural disaster damages and other risks	15 899 511	7 586 830	3 595 724	6 209 714	3 267 794	1 239 506	3 670 708
Civil liability insurance of motor vehicle owners	40 822 699	14 994	170	26 439 307	-	-	10 176 014
Civil liability insurance of aircraft owners	351 194	247 762	6 820	62	-	-	23 673
Civil liability insurance of vessel owners	120 696	40 814	1 958	-	-	-	(9 503)
General civil liability insurance	6 529 138	1 634 842	320 713	1 574 721	245 617	33 898	1 546 920
Loan insurance	217 246	216 463	-	76 068	76 077	-	25 715
Guarantee insurance	4 838 945	1 359 397	1 269	128 152	54 535	-	929 090
Insurance of various financial losses	184 782	110 765	3	39 984	41 029	-	34 261
Insurance of legal expenses	31 203	31 203	13 178	225	225	220	5 808
Assistance insurance	4 468 291	1 586 362	1 166 653	1 082 547	434 257	242 248	1 855 598
Compulsory civil liability insurance of motor vehicle owners	8 580 481	8 580 481	5 285 072	8 384 482	8 384 482	5 010 042	2 054 463

Ratio by Type of Insurance

31.12.2016

Item	Total in reporting period	Type of Insurance																	
		Accident insurance	Health Insurance	Motor vehicle insurance (other than railway)	Railway transport insurance	Aircraft insurance	Vessel insurance	Cargo insurance	Property insurance against fire and natural disaster damages and other risks	Civil liability insurance of motor vehicle owners	Civil liability insurance of aircraft owners	Civil liability insurance of vessel owners	General civil liability insurance	Loan insurance	Guarantee insurance	Insurance of various financial losses	Insurance of legal expenses	Assistance insurance	Compulsory civil liability insurance of motor vehicle owners
Loss Indicator (%)	68.18	53.28	75.23	74.67	1.64	8.49	216.94	29.95	51.73	76.00	(12.64)	1.25	35.97	29.51	4.12	(20.41)	(40.77)	23.94	111.20
Expense Indicator (%)	30.47	27.34	25.65	31.85	18.57	63.60	(39.47)	34.33	30.82	31.47	27.35	(136.48)	29.32	26.66	25.52	36.79	21.31	41.46	26.88
Combined Indicator (%)	98.65	80.62	100.87	106.52	20.20	72.08	177.47	64.28	82.55	107.47	14.71	(135.22)	65.29	56.18	29.64	16.38	(19.46)	65.40	138.08

Insurer’s group structure

31.12.2016

No.	Name of company	Registration place code, registration address	Type of company*	Share of capital (%)	Voting rights (%)	Reason to be consolidated **
1	VIENNA INSURANCE GROUP AG Wiener Versicherung Gruppe	75687 f, Schottenring 30, A-1010, Wien, Austria	Insurance Company	90	90	Mother company
2	Balcia Insurance Company SE	40003159840, Kr. Valdemara iela 63, Riga, LV-1142, Latvia	Insurance Company	10	10	Minority shareholder

Insurer's Own Funds and Solvency Capital Requirement calculation

31.12.2016

No.	Item	In reporting period
1	Basic own funds before deduction	37 236 099
2	Deductions for participations in financial and credit institutions	-
3	**Total basic own funds after deductions (1.-2.)**	37 236 099
4	**Total ancillary own funds**	-
5	**Available and eligible own funds**	
5.1.	Total available own funds to meet the Solvency Capital requirements	37 236 099
5.2.	Total available own funds to meet the Minimum Capital requirements	37 072 557
5.3.	Total eligible own funds to meet the Solvency Capital requirements	37 236 099
5.4.	Total eligible own funds to meet the Minimum Capital requirements	37 072 557
6	**Solvency Capital requirements**	29 520 848
7	**Minimum Capital requirements**	13 284 382
8	**Ratio of Eligible own funds to Solvency Capital requirements**	1.26
9	**Ratio of Eligible own funds to Minimum Capital requirements**	2.79

Risks and Risk Management

The business of insurance represents the transfer of risk from the insurance policy holder to the insurer and management of this risk. The largest insurance risks are formed by the insurer accepting the insured risk, assessing it, choosing the reinsurance coverage and fulfilling obligations as regards concluded insurance contracts. The Insurer is also exposed to the investment risk, when the Company has to cover technical reserves with assets invested in various financial instruments, which includes the market risk, credit risk, liquidity risk, and operational risk.

The Management of the Company has identified the risks and developed the management of these risks. The risk management is carried out in accordance with decisions of the Company's Board.

The Management of the Company has divided all risks into the following major groups:

- Insurance risks
- Financial risks
- Operational risks

Each of these groups is divided into subgroups, which identify the risks that might affect any of the operating directions. Each risk has action plans elaborated for it to be implemented to minimize and avoid the possibility of the risk occurring.

1. Insurance Risks and Risk Management

Insurance risk is the most significant risk faced by the Company in its daily activities.

(a) ***Underwriting Strategy***

The Company's underwriting strategy seeks diversity to ensure a balanced risk portfolio and is based on a large portfolio of similar risks held over a number of years and that changes the total risk effect.

The underwriting strategy is included in the annual business plan, which describes the types of insurance, where the premiums are written, as well as branches and sectors in which the Company is prepared to undertake the risk. This strategy is adapted to individual risk underwriters using a detailed risk underwriting authority system that sets out the limits for individual risk underwriters by the type of insurance, business class and sector to develop a corresponding risk profile within the scope of the insurance portfolio. Much attention is paid to diversification of risks by underwriting the same risk in a number of Baltic countries.

Risk underwriting strategy is being analyzed by stress testing and critical scenario analysis.

The calculation of insurance product tariffs and prices reflects current market situation and includes potential income necessary for the adjustment of future results in order to significantly hedge the financial risk.

The Management monitors the compliance with the underwriting authorities on a regular basis. The Management of the Company examines transactions that require particular approval.

(b) ***Features of Key Products***

Terms and conditions of the insurance contracts that have significant effect on the amount, term and predictability of the future cash flow amounts from insurance contracts are described below. The evaluation of basic products of the Company and the way the risks are being managed are also provided below.

CASCO

Product Description

This type of insurance indemnifies for the losses incurred due to damage or loss of a vehicle. Several individual types of insurance coverage are offered that are related to the insured vehicle. The major losses occur upon theft or destruction of vehicles.

Risk Management

The most significant risks related to this product are underwriting risk, competition risk and claim experience risk.

CASCO insurance rates are determined by applying the bonus-malus system, according to which the insurance premium is reduced if there were no losses and increased if losses have been incurred. The sum insured rarely exceeds EUR 70 000. The insurance premiums are determined in accordance with the effective insurance methodology. Land motor vehicles are grouped into four risk groups and individual insurance premium rates are determined for each of them. Vehicle insurance usually includes a deductible.

Civil Liability Insurance of Motor Vehicle Owners (MTPLI)

Product Description

This is a compulsory type of insurance, the terms and conditions and indemnification of which are governed by the law On the Compulsory Insurance against Civil Liability in Respect of Motor Vehicles and the Regulations on Compulsory Civil Liability Insurance of Owners of Motor Vehicles. MTPLI insurance covers injury and property damage claims in Latvia, as well as claims incurred abroad regarding vehicles insured in the Green Card system. MTPLI indemnifies for losses caused to the property and pays indemnities to people in the event of injuries, mostly for medical treatment costs and temporary disability. However, long-term indemnities are also possible, such as pensions and permanent disability benefits, which could also be paid out over the long term as annuities.

Although experience shows that the claims are being submitted immediately and they can be settled instantly, the situation may change and the MTPLI may be classified as long-tail insurance, where determination of the final payment of the claim requires more time.

Risk Management

The most significant risks related to this product are underwriting risk, competition risk and claim experience risk. The Company monitors changes in the overall economic and business environment in which it operates, and takes actions in accordance with the changes. MTPLI insurance rates are determined by applying the bonus-malus system, according to which the insurance premium is reduced if there were no losses and increased if losses have been incurred.

Health Insurance

Product Description

The health insurance product is offered to companies that purchase health insurance for their employees. Health insurance covers such expenses as doctor visits, hospital expenses and acquisition of medicinal products.

Risk Management

The Company monitors and takes into account changes in medical service prices, monitors the amount of claims for each employer and makes respective changes in prices when renewing policies.

Property Insurance

Product Description

According to the terms and conditions of the policy the property insurance covers losses of the insured or the damage caused to the insured property, as well as losses due to termination of business activities due to such damage. Property insurance covers property-related risks, such as fire, pipe leakage, explosion, burglary and robbery, as well as storm risk. In addition, civil liability insurance can be purchased for property insurance.

Business interruption insurance covers foregone income and fixed costs, if the loss is caused by the risk covered in accordance with the property insurance policy. When selling these insurance policies, the reliability of customers and transparency of financial statements play a major role.

The most frequent risks as regards private property are pipe leakage and fire. The greatest losses are most frequently caused by fire.

In general, property insurance claims are submitted immediately and they can be settled without any delay. Property insurance is classified as short-tail rather instead of long-tail, where determination of the final payment of the claim requires more time.

Risk Management

The most significant risks related to this product are underwriting risk, competition risk and claim experience risk.

In order to calculate the premium, the type of property is estimated. Major part amount of property with a similar risk portfolio is anticipated in housing insurance. However, the situation may be different in commercial property insurance. Most of the commercial property insurance offers include both location and type of business, as well as overall security measures taken. The premium calculation based on the risk of these policies is going to be a prejudiced, therefore, risky procedure.

Property insurance is exposed to the risk that an insured person would submit fictitious or invalid claims or will indicate a larger amount of loss. This can be mainly explained by the effect of the economic situation on the profitability of the property insurance portfolio. The insurance risk management is mainly carried out by applying price determination mechanisms, independent property assessment in accordance with the international standards, product development, risk selection and reinsurance. The Company monitors changes in the overall economic and business environment in which it operates, and takes actions in accordance with the changes.

(c) Insurance Risk Concentration

In the insurance procedure, the risk concentration occurs if an event or a succession of events can significantly affect the amount of the Company's liabilities. Risk concentration may occur in regard to one insurance contract or several related contracts that may result in significant insurance liabilities.

Risk concentration may occur as a result of different coincidences and regularities. Most often, risk concentration is observed in the types in which individuals are insured, i.e., assistance or accident insurance, when a group of people suffers in an accident and all these people are insured by the Company. In property insurance, risk concentration might occur if one small, densely populated area experiences any exposures (e.g. fire) that may easily spread from one object to another and which cannot be prevented.

The Management also realizes that risk concentration is possible in one company, or an overall economic sector, for which several risks are insured. When insuring such risks, a mandatory precondition is to assess the financial situation and capacity of the customer, as well as to determine the amount of financial obligations that can arise, are already undertaken by the Company and that can be afforded in the future. Economic development trends and risks that might affect a respective sector are studied when assessing the financial risks.

To minimize the losses that could arise in the event of risk concentration, the Company uses reinsurance – reinsuring both proportionally, and non-proportionally. When administrating reinsurance the Company's share in the risk is determined both for one object, and one event, in which losses may be caused simultaneously for several objects. Such risks are reinsured in almost all types of insurance. The reinsurance policy applied by the Company is approved by the Board of the Company.

The Company applies two most significant methods in the management of these risks. First, the risk is being underwritten by applying the corresponding underwriting policy. Risk underwriters are allowed to underwrite risks only when the expected profit is proportional to the amount of assumed risk. Secondly, reinsurance is used in risk management. The Company acquires the reinsurance coverage in various types of liability and property insurance. The Company assesses costs and benefits related to the reinsurance program on a regular basis.

The Company determines the total risks it is ready to assume in regard to risk concentration. The Company monitors these risks both when underwriting risks, and monthly by verifying reports representing the main risk concentration the Company is exposed to. The Company uses several simulation instruments in order to monitor the risks and assess the efficiency of reinsurance program and net risks the Company is exposed to.

Concentration risk is tested and evaluated in various scenario tests. These tests help to identify the level of concentration risk the company can afford to be exposed to.

(d) Catastrophes

The Company's Management is aware of the probability of catastrophe risks. Under the Company's business geographical conditions, these risks are mostly related to meteorological phenomenon: storms, floods, natural disasters (hail, snow, icing, etc.). Large fires and earthquakes are unlikely, but the possibility exists. The most characteristic catastrophes are floods and storms. Reinsurance is used in order to minimize the impact of catastrophe risk on the Company. Reinsurance is both proportional, and non-proportional. Facultative insurance is additionally acquired for large risks. The Company has developed a methodology to determine its risk share. It depends on many factors and historical statistical information in each group of products. According to the Management, the measures taken to minimize the impact of catastrophe risk on the Company are sufficient.

Catastrophe risk is also tested and evaluated in scenario tests.

(e) Insurance Risk Management

In order to minimize the insurance risk, the Company has developed different control and management mechanisms. In all types of insurance, terms and conditions binding on the Company and the customers are developed. When determining the total risk and the amount of the risk assumed by the Company, the set methodology developed for each type of insurance must be complied with. The Company has established a Risk Underwriting Division, the staff of which is responsible for the development of particular types of insurance, insurance terms and conditions, as well as risk assessment methods. In addition, there are limits set up to which certain employees are entitled to take decisions regarding risk underwriting. When determining these limits, the hierarchy of employees is taken into consideration, i.e., the higher the position, the higher the risk, which may be underwritten.

Although the afore-mentioned measures are taken and risks are managed, the Company's Management realizes that there is a risk that the insurance risk assessment may not be of high quality and incorrect decisions may be taken. In addition, there is a risk that insurance indemnities will be set in a way that does not correspond to the losses caused, or the insurance claim will take a long time to administer.

In order to minimize these risks, the Company has developed and uses a quality management system that describes all processes and procedures complied with by the Company during the course of insurance administration and claim adjustment. The quality management system prescribes when and under what circumstances certain procedures are to be complied with. Quality assessment may be carried out in any process. It can also be determined whether this process is carried out in compliance with the Company's interest and the planned procedures. The Quality Management Department is responsible for evaluating the process. This Department also regularly provides the Company's Management with information on management of the processes in the Company. Based on this evaluation, the Management may take respective decisions in order to minimize the risk related to the insurance processes.

(f) Assumptions and Sensitivity Analysis in Core Business

Assumption Assessment Process

The expected result of the assumption determination process is neutral estimates of the most likely or expected outcome. The Company's data is used in the assumptions and such data is obtained from annual detailed studies. The assumptions are verified to ensure that they are consistent with inflation rates of the market or other published information. There is more emphasis on current trends, and where in early years there is insufficient information to make a reliable best estimate of claims development, prudent assumptions are used.

The reserve amount of incurred but not reported claims can be influenced by inflation, the risk that significantly large claims will be reported with delay, seasonality of the reporting of claims and other risks.

The main assumption used in the estimation of technical reserves is that the insurance claims statistics are stable. The Management expects that the development of claims in the future will have the same pattern as in the past. Reserves are not discounted.

The nature of business makes it very difficult to predict with certainty the likely outcome of any particular claim and the ultimate cost of notified claims. Each notified claim is assessed separately with regard to the claim circumstances, information available from loss adjusters and the historical evidence of the size of similar claims. Insurance case estimates are reviewed regularly and are updated as and when new information arises. The size of reserves is based on the information currently available. However, the final amount of liabilities may vary due to events or catastrophes that have occurred after the estimations. The impact of many circumstances that affect the final costs of the losses is difficult to estimate. The complexity of technical reserve estimates depends on the type of insurance due to differences in insurance contracts, complexity of insurance claims, the amount of claims and the claim severity, the claim occurrence date and the reporting lag.

For most of the risks the costs of IBNR reserves are estimated using a range of statistical methods. The key methods, which are used and have remained unchanged from previous years, are as follows:

- *chain ladder* methods that use historical data to estimate the paid and incurred to date proportions of the ultimate claim costs;
- development factor methods to evaluate the number of insurable events at any given point of time;
- expected loss ratio methods that use the expected Company's loss ratios in a respective type of insurance.

The actual method or the set of methods used depends on the year the accident occurs, the type of insurance and historical development of claims.

Since these methods use the information on historical development of claims, it is assumed that the historical claims development model will repeat in the future. There are various reasons why this may not be the case, and they are taken into consideration when modifying the methods. Such reasons include:

- changes in processes affecting the development / registration of claims paid and incurred (e.g. changes in claim reserve formation procedures);

- economic, legal, political and social trends (facilitating other than expected levels of inflation);
- changes in the field of business;
- random fluctuations, including the impact of large losses.

The Company controls reserve adequacy regularly.

2. Financial Risks and Risk Management

The Company is exposed to financial risks, as it makes transactions with financial instruments. Financial risks include the market risk, which, in turn, includes price, interest rate and currency risks, credit risk and liquidity risk. The description and summary of financial risks regarding the methods applied by the Company in the management of these risks are provided below. These risks are caused by daily business activities of the Company.

Financial assets and financial liabilities of the Company, including investments, bank deposits, insurance receivables and reinsurance assets, are exposed to the following financial risks:

- Market risk: negative changes in the market situation may affect the insurer's assets and/or liabilities, investments may depreciate and return of assets may decrease; The Market risk includes interest rate risk, capital price risk and currency risk;
- Credit risk: failure to fulfil contractual obligations may cause financial losses to the Company;
- Liquidity risk: under certain adverse conditions, the insurer may be forced to sell assets at a lower price than the fair value thereof to fulfil the obligations;

(a) Market Risk

Financial instruments and items are exposed to the market risk, which means that changes in the market situation in the future may decrease or increase the value of the financial instrument. The Company is exposed to a potential investment risk by incurring losses from financial assets, financial liabilities, reinsurance and insurance contractual obligations caused by changes in interest rates, exchange rates and prices of capital instruments.

In order to hedge the investment risk, investments are made in different financial instruments. The Company complies with requirements of the Insurance and Reinsurance Law when selecting financial instruments.

When performing investment activity, employees of the Financial Department comply with the improved investment procedures, which regulate many issues related to the control and hedging of the investment risk.

The investment risk hedging is carried out in two ways – first, by diversifying the investment portfolio and second, by analyzing the asset before the purchase thereof and regularly obtaining available information on it later.

(b) Currency Risk

Currency risk: adverse changes in currency exchange rates may cause losses to the Company.

Some of the insurance liabilities are denominated in foreign currencies. The Company's policy is to hedge the currency risk regarding known and expected transactions in foreign currencies. The currency risk is minimized by making investments in respective currencies. Local currency in the Company's operation markets in Latvia, Lithuania and Estonia is the euro, which decreases the probability of the currency risk. Profit or loss is mainly sensitive to changes in the USD exchange rate; however, the effect is minimal. The Company is not involved in any speculative transactions that could increase the currency risk.

(c) Price Risk

The price risk means that changes in market prices may result in changes in the value of the financial instrument. Such changes may be caused by both the factors that only apply to a respective instrument and the factors that have effect all financial instruments on the market. The price risk occurs when the Company assumes a long or short position of the financial instruments.

(d) Interest Rate Risk

Implementation of the interest rate risk hedging measures is carried out in the Company by assessing the impact of the interest rate risk on the Company's financial indicators. The Company has no significant liabilities, for which interest is to be paid, and the significant part of interest bearing assets are with the fixed interest rate. The Company is not exposed to a significant interest rate risk or the effect of fluctuations in interest rates, which arise from different maturities of the Company's interest bearing assets and liabilities or interest term structure profile.

(e) Liquidity Risk

In accordance with the approved investment policy, employees of the BTA Financial Department must ensure that at least 90 per cent of the assets required to cover technical reserves are placed in high-liquidity investments.

The following assets are considered high-liquidity investments:

1) claims on the demand to credit institutions;
2) other claims to solvent credit institutions (term deposits, etc.), the remaining maturity of which does not exceed 30 days and deposits with another term, if the agreement provides for an early withdrawal of money (deducting the penalty for early withdrawal of the deposit, if such is provided for);
3) investments in securities with a constant, unrestricted market, i.e., they can be sold in a short time without considerable losses or they can be used as collateral to receive a loan.

(f) Credit Risk

The Company is exposed to credit risk, which means that a transaction party will be unable to pay the amounts of the obligations in full and in due time. The Company structures the levels of the assumed credit risk by determining limits as regards the amount of the assumed risk to one issuer of securities, a debtor, a borrower or the groups of the above-mentioned. Such risks are monitored on a regular basis.

Credit risk mainly occurs as regards direct insurance debtors and reinsurance debtors, and it is the risk that the business party will fail to fulfil its payment obligations.

Insurance Receivable

The Management monitors direct insurance receivables on a regular basis and cancels the policies if the insurance policy holder is notified in due manner, but the respective amount is not paid.

Reinsurance

The Company reinsures part of the underwritten risks in order to control its loss risk and protect capital resources. The Company has acquired facultative and obligatory, pro-rata and Excess-of-Loss (XL) reinsurance in order to minimize net risks and avoid exceeding the actual solvency margin. The Company has also acquired reinsurance contracts in main types of insurance, which protect the Company from any common cumulative losses that may arise from several claims of the same event.

The ceded reinsurance includes the credit risks and such recoverable reinsurance amounts are recognized by deducting the known insolvency cases and unrecoverable amounts. The

Company monitors the financial standing of reinsurance on a regular basis and periodically verifies reinsurance contracts.

Reinsurance is carried out with world-renowned reinsurance companies with excellent reputation.

When carrying out reinsurance, the Company complies with the condition that the rating of reinsurance companies may not be lower than the Standard & Poor's BBB – (or a similar assessment from another international rating agency). Almost all reinsurance is carried out with reinsurance companies whose rating is not lower than the Standard & Poor's A –.

Reinsurance companies cover their liabilities within a period of 30 days. Reinsurance contracts also provide for the events when the reinsurance claim is to be paid immediately upon the insurance indemnity exceeding a certain amount.

3. Operational Risks and Risk Management

The Company has established that a customer should receive high quality insurance services. To attain this objective, the Company evaluates the key risks and selects measures most appropriate for limiting risks. Risk management efficiency is monitored by the Board of the Company. Quality and Operational Risks Department maintains a continuous, systematic and timely responsive risk management system.

The Company keeps building a team of qualified, skilled and experienced employees by introducing competitive remuneration system and maintaining an incentive operational environment. The Company has established a training centre, which focuses on in-house training of its staff, as well as a knowledge base, accessible by the Company staff for their daily business purposes. Information systems (IS) are essential in operational efficiency. The Management of the Company is focused on keeping these systems functional and up to date. The Company analyses the risks of information systems to establish action plans to maintain constant operation of systems or resumption of it within a definite period of time.

Key Cooperation Partners:

Reinsurers

Reinsurer	Reinsurer's Rating	Rating Agency	Place (Country) of Registration of the Insurer
SWISS RE EUROPE S.A.	AA-	Standard & Poor's	Germany
R+V VERSICHERUNG AG	AA-	Standard & Poor's	Germany
VIG RE ZAJISTOVNA, A.S.	A+	Standard & Poor's	Czech Republic
SCOR GLOBAL P&C SE	A+	Standard & Poor's	Switzerland
HANNOVER RÜCK SE	AA-	Standard & Poor's	Germany

Insurance and Reinsurance Brokerage Companies

Brokerage Company	Service	Place (Country) of Registration
AON Benfield	Reinsurance mediation	Germany
Guy Carpenter	Reinsurance mediation	Great Britain

Operational Strategy and Objectives

The BTA operational strategy and objectives aim to make the Company the leading insurance company in the Baltic market – a dynamic and professional company that satisfies the desires of its customers to receive high quality insurance products in any manner and at any place convenient to the customer.

In order for BTA to become more available to current and potential customers, we continue to open client service centres abroad as well as in Latvia. The main tool BTA uses to achieve its set objectives is an individual approach toward each customer – in each particular situation BTA employees offer the best insurance solution to each customer. The entire Company has adopted high customer service standards that are applicable to each and every employee.

Departments and Branches of the Company

Customer service locations that offer BTA insurance services.
https://www.bta.lv/en/contacts/customer-service-centres

Foreign branches:
Estonia - https://www.bta-kindlustus.ee/
Lithuania - https://www.bta.lt/