

FORM **BE-45**  
(2-2008)U.S. DEPARTMENT OF COMMERCE  
BUREAU OF ECONOMIC ANALYSIS**QUARTERLY SURVEY OF INSURANCE TRANSACTIONS BY U.S.  
INSURANCE COMPANIES WITH FOREIGN PERSONS  
(This report is mandatory and confidential)**Name and address of U.S. Reporter –  
*Enter or correct as necessary*

10001	1	
10002	2	
10003	3	
10004	4	

Complete and file this form or file electronically at [www.bea.gov/efile](http://www.bea.gov/efile).  
Assistance is available at (202) 606-5588, M-F 8:30 a.m. – 5:00 p.m., eastern time.

## How to file:

- Step 1. Verify or correct name and address of U.S. Reporter named in the mailing label and complete Part 1.
- Step 2. Complete Part 2.
- Step 3. Complete Part 3 and Schedules A and B based on the instructions given in Part 3.
- Step 4. File the completed form within 60 days after the close of each calendar quarter (or within 90 days after the close of the calendar year).

By mailing to: U.S. Department of Commerce  
Bureau of Economic Analysis  
BE-50(SSB)  
Washington, DC 20230

delivering form to: U.S. Department of Commerce  
Bureau of Economic Analysis  
BE-50(SSB)  
Shipping and Receiving Section M-100  
1441 L Street, NW  
Washington, DC 20005

or Faxing form to: (202) 606-5318

File electronically at: [www.bea.gov/efile](http://www.bea.gov/efile)

**Part 1****1 Person to consult concerning questions about this report**

10005	1	Name
10006	2	Title
10007	3	Telephone number ( )
10008	4	FAX number ( )
10009	5	E-mail address

- 2** May we use e-mail to correspond with you to discuss questions relating to this form, including questions that may contain information about your company that you may consider confidential? (Note: Electronic mail is not inherently confidential. We will treat information we receive as confidential but your e-mail is not necessarily secure against interception by a third party.)

10010 <sup>1</sup>  Yes  
<sup>2</sup>  No

- 3 Certification** — The undersigned official certifies that this report has been prepared in accordance with the applicable instructions, is complete, and is substantially accurate except that, in accordance with V.G of the General Instructions, estimates may have been prepared where the data are not available from customary accounting records or precise data could not be obtained without undue burden.

Authorized official's signature

Print or type name

Date

**Part 2**

**4 What period does this quarterly report cover?**

10011	Month	Day	Year
Beginning date . . . . .	1		
Ending date . . . . .	2		<b>2008</b>

**5 Enter the 4-digit industry code that best describes the U.S. Reporter from the Summary of Industry Classifications found on pages IV and V of the General Instructions.**

10012	1				
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- 5242 Agencies, brokerages, and other insurance related activities
- 5243 Insurance carriers, except life insurance carriers
- 5249 Life insurance carriers

**6 What is the primary Employer Identification Number used by the U.S. Reporter to file U.S. income or payroll taxes?**

10013	1			—															
-------	---	--	--	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

**7 Was the U.S. Reporter in existence during the entire reporting period?**

10014  **1** Yes

**2** No – If you were purchased by another U.S. insurance company and you are consolidated into their BE-45 for this quarter, then stop here. Otherwise, complete the report, or in the space at the bottom of this page, explain why you were not in existence for the entire period.

**8 What is your principal line of insurance?**

10016  **1** Life insurance

**2** Property and casualty insurance

**3** Other — *Specify*

--

**9 What best describes your organization?**

10017  **1** Insurance company

**2** Insurance broker

**3** Insurance Group — *Please attach a list of member companies that are consolidated in this report*

**Part 3**

**10** Follow the steps in the table below to determine whether you complete Schedule A and/or B on pages 4 and 5.

Step 1	Step 2																																																												
<p><b>For which of the following types of insurance services did transactions occur between the U.S. Reporter and FOREIGN PERSONS during the past calendar year or are such transactions expected to occur in the current year?</b></p> <p><i>Mark all that apply.</i></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Type of Transaction</th> <th style="text-align: left; border-bottom: 1px solid black;">Code</th> <th style="width: 10%;"></th> <th style="width: 10%;"></th> <th style="width: 10%;"></th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td>Reinsurance premiums earned from insurance companies resident abroad . . . .</td> <td><b>1</b></td> <td>20001</td> <td><input type="checkbox"/></td> <td><sup>2</sup><b>1</b></td> <td><input type="checkbox"/> Yes    <input type="checkbox"/> No</td> </tr> <tr> <td>Reinsurance premiums ceded to insurance companies resident abroad . . . .</td> <td><b>2</b></td> <td>20002</td> <td><input type="checkbox"/></td> <td><sup>2</sup><b>1</b></td> <td><input type="checkbox"/> Yes    <input type="checkbox"/> No</td> </tr> <tr> <td>Losses incurred on reinsurance assumed from insurance companies resident abroad</td> <td><b>3</b></td> <td>20003</td> <td><input type="checkbox"/></td> <td><sup>2</sup><b>1</b></td> <td><input type="checkbox"/> Yes    <input type="checkbox"/> No</td> </tr> <tr> <td>Losses recovered on reinsurance ceded to insurance companies resident abroad . . . .</td> <td><b>4</b></td> <td>20004</td> <td><input type="checkbox"/></td> <td><sup>2</sup><b>1</b></td> <td><input type="checkbox"/> Yes    <input type="checkbox"/> No</td> </tr> <tr> <td>Premiums earned from primary insurance sold to foreign persons . . . . .</td> <td><b>5</b></td> <td>20005</td> <td><input type="checkbox"/></td> <td><sup>2</sup><b>1</b></td> <td><input type="checkbox"/> Yes    <input type="checkbox"/> No</td> </tr> <tr> <td>Losses incurred on primary insurance sold to foreign persons . . . . .</td> <td><b>6</b></td> <td>20006</td> <td><input type="checkbox"/></td> <td><sup>2</sup><b>1</b></td> <td><input type="checkbox"/> Yes    <input type="checkbox"/> No</td> </tr> <tr> <td>Auxiliary insurance services, receipts . . . .</td> <td><b>7</b></td> <td>20007</td> <td><input type="checkbox"/></td> <td><sup>2</sup><b>1</b></td> <td><input type="checkbox"/> Yes    <input type="checkbox"/> No</td> </tr> <tr> <td>Auxiliary insurance services, payments . . .</td> <td><b>8</b></td> <td>20008</td> <td><input type="checkbox"/></td> <td><sup>2</sup><b>1</b></td> <td><input type="checkbox"/> Yes    <input type="checkbox"/> No</td> </tr> <tr> <td>None of the above . . . . .</td> <td></td> <td>20009</td> <td><input type="checkbox"/></td> <td></td> <td></td> </tr> </tbody> </table> <p><i>Go to 11 below</i></p>	Type of Transaction	Code					Reinsurance premiums earned from insurance companies resident abroad . . . .	<b>1</b>	20001	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Reinsurance premiums ceded to insurance companies resident abroad . . . .	<b>2</b>	20002	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Losses incurred on reinsurance assumed from insurance companies resident abroad	<b>3</b>	20003	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Losses recovered on reinsurance ceded to insurance companies resident abroad . . . .	<b>4</b>	20004	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Premiums earned from primary insurance sold to foreign persons . . . . .	<b>5</b>	20005	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Losses incurred on primary insurance sold to foreign persons . . . . .	<b>6</b>	20006	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Auxiliary insurance services, receipts . . . .	<b>7</b>	20007	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	Auxiliary insurance services, payments . . .	<b>8</b>	20008	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	None of the above . . . . .		20009	<input type="checkbox"/>			<p><b>Did any of the types of transactions marked in Step 1 exceed \$8 million last year, or are they expected to exceed \$8 million in the current year? Only mark "Yes" or "No" for the type(s) of transaction(s) that you checked in Step 1.</b></p> <p><i>If any type of transaction is marked Yes, then reporting is required or requested as follows:</i></p> <ul style="list-style-type: none"> <li>• <u>Quarterly</u> reporting of transaction types 1 and 2 on Schedule A is <b>mandatory</b> for all quarters.</li> <li>• <u>Quarterly</u> reporting of transaction types 3 and 4 on Schedule A is <b>voluntary</b>.</li> <li>• <u>Annual</u> reporting of transaction types 3 through 8 on Schedule B is <b>mandatory</b> the fourth quarter only.</li> </ul>
Type of Transaction	Code																																																												
Reinsurance premiums earned from insurance companies resident abroad . . . .	<b>1</b>	20001	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																								
Reinsurance premiums ceded to insurance companies resident abroad . . . .	<b>2</b>	20002	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																								
Losses incurred on reinsurance assumed from insurance companies resident abroad	<b>3</b>	20003	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																								
Losses recovered on reinsurance ceded to insurance companies resident abroad . . . .	<b>4</b>	20004	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																								
Premiums earned from primary insurance sold to foreign persons . . . . .	<b>5</b>	20005	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																								
Losses incurred on primary insurance sold to foreign persons . . . . .	<b>6</b>	20006	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																								
Auxiliary insurance services, receipts . . . .	<b>7</b>	20007	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																								
Auxiliary insurance services, payments . . .	<b>8</b>	20008	<input type="checkbox"/>	<sup>2</sup> <b>1</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																																																								
None of the above . . . . .		20009	<input type="checkbox"/>																																																										

**11** Did the U.S. Reporter have any insurance transactions covered by this survey that exceeded \$8 million last year or that are expected to exceed \$8 million this year? (Did you mark "Yes" for any type of transaction in Step 2?)

- 20010 <sup>1</sup>  **1** Yes – Report mandatory transactions on the appropriate schedule or please report voluntary transactions in Section II of Schedule A.
- 2** No – Stop here and return pages 1 through 3 according to the instruction on page 1.

**SCHEDULE A — Quarterly Insurance Transactions with Foreign Affiliates**

- If any type of transaction is marked **Yes** in Step 2 of item **10**, then reporting of Section I below is mandatory, and voluntary reporting is requested for Section II below.
- For additional instructions, see the General Instructions A.I.
- Report all currency figures in thousands of dollars. Example: If the amount is \$1,555,000.00 report as 1,555.
- Round amounts less than \$500.00 to 0.
- Use additional copied sheets as necessary.
- Separate copies of this schedule are to be filed to report transactions with (1) your foreign affiliates, (2) your foreign parent(s) and other members of the affiliated foreign group (AFG), and (3) unaffiliated foreign persons. This Schedule covers transactions with – Mark (X) one

21000 (1) <sup>1</sup>  Foreign affiliates

Country	BEA USE ONLY		Section I – Mandatory		Section II – Voluntary		
			Quarterly premiums earned on reinsurance assumed from insurance companies resident abroad	Quarterly premiums incurred on reinsurance ceded to insurance companies resident abroad	Quarterly losses incurred on reinsurance assumed from insurance companies resident abroad	Quarterly losses recovered on reinsurance ceded to insurance companies resident abroad	
			(1)	(2)	(3)	(4)	(5)
<b>1. Total, lines 2–32 this page</b>	01						
2. Australia	02	1 <b>601</b>	2	3	4	5	6
3. Barbados	03	1 <b>251</b>	2	3	4	5	6
4. Belgium	04	1 <b>302</b>	2	3	4	5	6
5. Bermuda	05	1 <b>252</b>	2	3	4	5	6
6. Brazil	06	1 <b>202</b>	2	3	4	5	6
7. Canada	07	1 <b>100</b>	2	3	4	5	6
8. Cayman Islands	08	1 <b>266</b>	2	3	4	5	6
9. Denmark	09	1 <b>305</b>	2	3	4	5	6
10. Finland	10	1 <b>306</b>	2	3	4	5	6
11. France	11	1 <b>307</b>	2	3	4	5	6
12. Germany	12	1 <b>308</b>	2	3	4	5	6
13. Ireland	13	1 <b>313</b>	2	3	4	5	6
14. Italy	14	1 <b>314</b>	2	3	4	5	6
15. Japan	15	1 <b>614</b>	2	3	4	5	6
16. Korea, South	16	1 <b>626</b>	2	3	4	5	6
17. Mexico	17	1 <b>213</b>	2	3	4	5	6
18. Netherlands	18	1 <b>319</b>	2	3	4	5	6
19. Norway	19	1 <b>320</b>	2	3	4	5	6
20. Spain	20	1 <b>323</b>	2	3	4	5	6
21. Sweden	21	1 <b>324</b>	2	3	4	5	6
22. Switzerland	22	1 <b>325</b>	2	3	4	5	6
23. United Kingdom	23	1 <b>327</b>	2	3	4	5	6
<b>Other countries with which transactions were \$50,000.00 or more — Specify country (Use supplemental copied sheets as necessary)</b>							
24.	24	1	2	3	4	5	6
25.	25	1	2	3	4	5	6
26.	26	1	2	3	4	5	6
27.	27	1	2	3	4	5	6
28.	28	1	2	3	4	5	6
29.	29	1	2	3	4	5	6
30.	30	1	2	3	4	5	6
31.	31	1	2	3	4	5	6
<b>32. Countries with which transactions were less than \$50,000.00 each, total</b>	32	1 <b>709</b>	2	3	4	5	6

**SCHEDULE A — Quarterly Insurance Transactions with Foreign Parent(s) and Other Members of the AFG**

- If any type of transaction is marked **Yes** in Step 2 of item 10, then reporting of Section I below is mandatory, and voluntary reporting is requested for Section II below.
- For additional instructions, see the General Instructions A.I.
- Report all currency figures in thousands of dollars. Example: If the amount is \$1,555,000.00 report as 1,555.
- Round amounts less than \$500.00 to 0.
- Use additional copied sheets as necessary.
- Separate copies of this schedule are to be filed to report transactions with (1) your foreign affiliates, (2) your foreign parent(s) and other members of the affiliated foreign group (AFG), and (3) unaffiliated foreign persons. This Schedule covers transactions with – Mark (X) one

22000 (2) <sup>1</sup>  Foreign parent(s) and other members of the AFG

Country	BEA USE ONLY		Section I – Mandatory		Section II – Voluntary	
			Quarterly premiums earned on reinsurance assumed from insurance companies resident abroad	Quarterly premiums incurred on reinsurance ceded to insurance companies resident abroad	Quarterly losses incurred on reinsurance assumed from insurance companies resident abroad	Quarterly losses recovered on reinsurance ceded to insurance companies resident abroad
			(1)	(2)	(3)	(4)
<b>1. Total, lines 2–32 this page</b>	01					
2. Australia	02	1 601	2	3	4	5 6
3. Barbados	03	1 251	2	3	4	5 6
4. Belgium	04	1 302	2	3	4	5 6
5. Bermuda	05	1 252	2	3	4	5 6
6. Brazil	06	1 202	2	3	4	5 6
7. Canada	07	1 100	2	3	4	5 6
8. Cayman Islands	08	1 266	2	3	4	5 6
9. Denmark	09	1 305	2	3	4	5 6
10. Finland	10	1 306	2	3	4	5 6
11. France	11	1 307	2	3	4	5 6
12. Germany	12	1 308	2	3	4	5 6
13. Ireland	13	1 313	2	3	4	5 6
14. Italy	14	1 314	2	3	4	5 6
15. Japan	15	1 614	2	3	4	5 6
16. Korea, South	16	1 626	2	3	4	5 6
17. Mexico	17	1 213	2	3	4	5 6
18. Netherlands	18	1 319	2	3	4	5 6
19. Norway	19	1 320	2	3	4	5 6
20. Spain	20	1 323	2	3	4	5 6
21. Sweden	21	1 324	2	3	4	5 6
22. Switzerland	22	1 325	2	3	4	5 6
23. United Kingdom	23	1 327	2	3	4	5 6
<b>Other countries with which transactions were \$50,000.00 or more — Specify country (Use supplemental copied sheets as necessary)</b>						
24.	24	1	2	3	4	5
25.	25	1	2	3	4	5 6
26.	26	1	2	3	4	5 6
27.	27	1	2	3	4	5 6
28.	28	1	2	3	4	5 6
29.	29	1	2	3	4	5 6
30.	30	1	2	3	4	5 6
31.	31	1	2	3	4	5 6
<b>32. Countries with which transactions were less than \$50,000.00 each, total</b>	32	1 709	2	3	4	5 6

**SCHEDULE A — Quarterly Insurance Transactions with Unaffiliated Foreign Persons**

- If any type of transaction is marked **Yes** in Step 2 of item 10, then reporting of Section I below is mandatory, and voluntary reporting is requested for Section II below.
- For additional instructions, see the General Instructions A.I.
- Report all currency figures in thousands of dollars. Example: If the amount is \$1,555,000.00 report as 1,555.
- Round amounts less than \$500.00 to 0.
- Use additional copied sheets as necessary.
- Separate copies of this schedule are to be filed to report transactions with (1) your foreign affiliates, (2) your foreign parent(s) and other members of the affiliated foreign group (AFG), and (3) unaffiliated foreign persons. This Schedule covers transactions with – Mark (X) one

23000 (3) <sup>1</sup>  Unaffiliated foreign persons

Country	BEA USE ONLY		Section I – Mandatory		Section II – Voluntary		
			Quarterly premiums earned on reinsurance assumed from insurance companies resident abroad	Quarterly premiums incurred on reinsurance ceded to insurance companies resident abroad	Quarterly losses incurred on reinsurance assumed from insurance companies resident abroad	Quarterly losses recovered on reinsurance ceded to insurance companies resident abroad	
			(1)	(2)	(3)	(4)	(5)
<b>1. Total, lines 2–32 this page</b>	01						
2. Australia	02	1 601	2 3	4	5	6	
3. Barbados	03	1 251	2 3	4	5	6	
4. Belgium	04	1 302	2 3	4	5	6	
5. Bermuda	05	1 252	2 3	4	5	6	
6. Brazil	06	1 202	2 3	4	5	6	
7. Canada	07	1 100	2 3	4	5	6	
8. Cayman Islands	08	1 266	2 3	4	5	6	
9. Denmark	09	1 305	2 3	4	5	6	
10. Finland	10	1 306	2 3	4	5	6	
11. France	11	1 307	2 3	4	5	6	
12. Germany	12	1 308	2 3	4	5	6	
13. Ireland	13	1 313	2 3	4	5	6	
14. Italy	14	1 314	2 3	4	5	6	
15. Japan	15	1 614	2 3	4	5	6	
16. Korea, South	16	1 626	2 3	4	5	6	
17. Mexico	17	1 213	2 3	4	5	6	
18. Netherlands	18	1 319	2 3	4	5	6	
19. Norway	19	1 320	2 3	4	5	6	
20. Spain	20	1 323	2 3	4	5	6	
21. Sweden	21	1 324	2 3	4	5	6	
22. Switzerland	22	1 325	2 3	4	5	6	
23. United Kingdom	23	1 327	2 3	4	5	6	
<b>Other countries with which transactions were \$50,000.00 or more — Specify country (Use supplemental copied sheets as necessary)</b>							
24.	24	1	2 3	4	5		
25.	25	1	2 3	4	5	6	
26.	26	1	2 3	4	5	6	
27.	27	1	2 3	4	5	6	
28.	28	1	2 3	4	5	6	
29.	29	1	2 3	4	5	6	
30.	30	1	2 3	4	5	6	
31.	31	1	2 3	4	5	6	
<b>32. Countries with which transactions were less than \$50,000.00 each, total</b>	32	1 709	2 3	4	5	6	

**SCHEDULE B — Annual Insurance Transactions with Foreign Affiliates (File this schedule only once each year, within 90 days after the close of the calendar year)**

- If any type of transaction is marked **Yes** in Step 2 of item **10**, then reporting of Sections III, IV, and V below is mandatory once each year.
- For additional instructions, see the General Instructions A.I.
- Report all currency figures in thousands of dollars. Example: If the amount is \$1,555,000.00 report as 1,555.
- Round amounts less than \$500.00 to 0.
- Use additional copied sheets as necessary.
- Separate copies of this schedule are to be filed to report transactions with (1) your foreign affiliates, (2) your foreign parent(s) and other members of the affiliated foreign group (AFG), and (3) unaffiliated foreign persons. This Schedule covers transactions with – Mark (X) one

31000 (1) <sup>1</sup>  Foreign affiliates

Country	BEA USE ONLY		SECTION III – Primary insurance sold to foreign persons		SECTION IV – Reinsurance losses		SECTION V – Auxiliary insurance services		
			Annual premiums earned	Annual losses incurred	Annual losses incurred on reinsurance assumed from insurance companies resident abroad	Annual losses recovered on reinsurance ceded to insurance companies resident abroad	Annual receipts	Annual payments	
			(3)	(4)	(5)	(6)	(7)	(8)	
<b>1. Total, lines 2–32 this page</b>	1	2	3	4	5	6	7	8	
01									
2. Australia	02	1 601	2 3	4	5	6	7	8	
3. Barbados	03	1 251	2 3	4	5	6	7	8	
4. Belgium	04	1 302	2 3	4	5	6	7	8	
5. Bermuda	05	1 252	2 3	4	5	6	7	8	
6. Brazil	06	1 202	2 3	4	5	6	7	8	
7. Canada	07	1 100	2 3	4	5	6	7	8	
8. Cayman Islands	08	1 266	2 3	4	5	6	7	8	
9. Denmark	09	1 305	2 3	4	5	6	7	8	
10. Finland	10	1 306	2 3	4	5	6	7	8	
11. France	11	1 307	2 3	4	5	6	7	8	
12. Germany	12	1 308	2 3	4	5	6	7	8	
13. Ireland	13	1 313	2 3	4	5	6	7	8	
14. Italy	14	1 314	2 3	4	5	6	7	8	
15. Japan	15	1 614	2 3	4	5	6	7	8	
16. Korea, South	16	1 626	2 3	4	5	6	7	8	
17. Mexico	17	1 213	2 3	4	5	6	7	8	
18. Netherlands	18	1 319	2 3	4	5	6	7	8	
19. Norway	19	1 320	2 3	4	5	6	7	8	
20. Spain	20	1 323	2 3	4	5	6	7	8	
21. Sweden	21	1 324	2 3	4	5	6	7	8	
22. Switzerland	22	1 325	2 3	4	5	6	7	8	
23. United Kingdom	23	1 327	2 3	4	5	6	7	8	
<b>Other countries with which transactions were \$50,000.00 or more — Specify country (Use supplemental copied sheets as necessary)</b>									
24.	24	1	2	3	4	5	6	7	8
25.	25	1	2	3	4	5	6	7	8
26.	26	1	2	3	4	5	6	7	8
27.	27	1	2	3	4	5	6	7	8
28.	28	1	2	3	4	5	6	7	8
29.	29	1	2	3	4	5	6	7	8
30.	30	1	2	3	4	5	6	7	8
31.	31	1	2	3	4	5	6	7	8
<b>32. Countries with which transactions were less than \$50,000.00 each, total</b>	32	1 709	2	3	4	5	6	7	8

**SCHEDULE B — Annual Insurance Transactions with Foreign Parent(s) and Other Members of the AFG (File this schedule only once each year, within 90 days after the close of the calendar year)**

- If any type of transaction is marked **Yes** in Step 2 of item **10**, then reporting of Sections III, IV, and V below is mandatory once each year.
- For additional instructions, see the General Instructions A.I.
- Report all currency figures in thousands of dollars. Example: If the amount is \$1,555,000.00 report as 1,555.
- Round amounts less than \$500.00 to 0.
- Use additional copied sheets as necessary.
- Separate copies of this schedule are to be filed to report transactions with (1) your foreign affiliates, (2) your foreign parent(s) and other members of the affiliated foreign group (AFG), and (3) unaffiliated foreign persons. This Schedule covers transactions with – Mark (X) one

32000 (2) <sup>1</sup>  Foreign parent(s) and other members of the AFG

Country	BEA USE ONLY		SECTION III – Primary insurance sold to foreign persons		SECTION IV – Reinsurance losses		SECTION V – Auxiliary insurance services		
			Annual premiums earned	Annual losses incurred	Annual losses incurred on reinsurance assumed from insurance companies resident abroad	Annual losses recovered on reinsurance ceded to insurance companies resident abroad	Annual receipts	Annual payments	
			(3)	(4)	(5)	(6)	(7)	(8)	
<b>1. Total, lines 2–32 this page</b>	1	2	3	4	5	6	7	8	
01									
2. Australia	02	1 601	2 3	4	5	6	7	8	
3. Barbados	03	1 251	2 3	4	5	6	7	8	
4. Belgium	04	1 302	2 3	4	5	6	7	8	
5. Bermuda	05	1 252	2 3	4	5	6	7	8	
6. Brazil	06	1 202	2 3	4	5	6	7	8	
7. Canada	07	1 100	2 3	4	5	6	7	8	
8. Cayman Islands	08	1 266	2 3	4	5	6	7	8	
9. Denmark	09	1 305	2 3	4	5	6	7	8	
10. Finland	10	1 306	2 3	4	5	6	7	8	
11. France	11	1 307	2 3	4	5	6	7	8	
12. Germany	12	1 308	2 3	4	5	6	7	8	
13. Ireland	13	1 313	2 3	4	5	6	7	8	
14. Italy	14	1 314	2 3	4	5	6	7	8	
15. Japan	15	1 614	2 3	4	5	6	7	8	
16. Korea, South	16	1 626	2 3	4	5	6	7	8	
17. Mexico	17	1 213	2 3	4	5	6	7	8	
18. Netherlands	18	1 319	2 3	4	5	6	7	8	
19. Norway	19	1 320	2 3	4	5	6	7	8	
20. Spain	20	1 323	2 3	4	5	6	7	8	
21. Sweden	21	1 324	2 3	4	5	6	7	8	
22. Switzerland	22	1 325	2 3	4	5	6	7	8	
23. United Kingdom	23	1 327	2 3	4	5	6	7	8	
<b>Other countries with which transactions were \$50,000.00 or more — Specify country (Use supplemental copied sheets as necessary)</b>									
24.	24	1	2	3	4	5	6	7	8
25.	25	1	2	3	4	5	6	7	8
26.	26	1	2	3	4	5	6	7	8
27.	27	1	2	3	4	5	6	7	8
28.	28	1	2	3	4	5	6	7	8
29.	29	1	2	3	4	5	6	7	8
30.	30	1	2	3	4	5	6	7	8
31.	31	1	2	3	4	5	6	7	8
<b>32. Countries with which transactions were less than \$50,000.00 each, total</b>	32	1 709	2	3	4	5	6	7	8



**SCHEDULE B — Annual Insurance Transactions with Unaffiliated Foreign Persons (File this schedule only once each year, within 90 days after the close of the calendar year)**

- If any type of transaction is marked **Yes** in Step 2 of item **10**, then reporting of Sections III, IV, and V below is mandatory once each year.
- For additional instructions, see the General Instructions A.I.
- Report all currency figures in thousands of dollars. Example: If the amount is \$1,555,000.00 report as 1,555.
- Round amounts less than \$500.00 to 0.
- Use additional copied sheets as necessary.
- Separate copies of this schedule are to be filed to report transactions with (1) your foreign affiliates, (2) your foreign parent(s) and other members of the affiliated foreign group (AFG), and (3) unaffiliated foreign persons. This Schedule covers transactions with – Mark (X) one

33000 (3) <sup>1</sup>  Unaffiliated foreign persons

Country	BEA USE ONLY		SECTION III – Primary insurance sold to foreign persons		SECTION IV – Reinsurance losses		SECTION V – Auxiliary insurance services		
			Annual premiums earned	Annual losses incurred	Annual losses incurred on reinsurance assumed from insurance companies resident abroad	Annual losses recovered on reinsurance ceded to insurance companies resident abroad	Annual receipts	Annual payments	
			(3)	(4)	(5)	(6)	(7)	(8)	
<b>1. Total, lines 2–32 this page</b>	1	2	3	4	5	6	7	8	
01									
2. Australia	02	1 601	2 3	4	5	6	7	8	
3. Barbados	03	1 251	2 3	4	5	6	7	8	
4. Belgium	04	1 302	2 3	4	5	6	7	8	
5. Bermuda	05	1 252	2 3	4	5	6	7	8	
6. Brazil	06	1 202	2 3	4	5	6	7	8	
7. Canada	07	1 100	2 3	4	5	6	7	8	
8. Cayman Islands	08	1 266	2 3	4	5	6	7	8	
9. Denmark	09	1 305	2 3	4	5	6	7	8	
10. Finland	10	1 306	2 3	4	5	6	7	8	
11. France	11	1 307	2 3	4	5	6	7	8	
12. Germany	12	1 308	2 3	4	5	6	7	8	
13. Ireland	13	1 313	2 3	4	5	6	7	8	
14. Italy	14	1 314	2 3	4	5	6	7	8	
15. Japan	15	1 614	2 3	4	5	6	7	8	
16. Korea, South	16	1 626	2 3	4	5	6	7	8	
17. Mexico	17	1 213	2 3	4	5	6	7	8	
18. Netherlands	18	1 319	2 3	4	5	6	7	8	
19. Norway	19	1 320	2 3	4	5	6	7	8	
20. Spain	20	1 323	2 3	4	5	6	7	8	
21. Sweden	21	1 324	2 3	4	5	6	7	8	
22. Switzerland	22	1 325	2 3	4	5	6	7	8	
23. United Kingdom	23	1 327	2 3	4	5	6	7	8	
<b>Other countries with which transactions were \$50,000.00 or more — Specify country (Use supplemental copied sheets as necessary)</b>									
24.	24	1	2	3	4	5	6	7	8
25.	25	1	2	3	4	5	6	7	8
26.	26	1	2	3	4	5	6	7	8
27.	27	1	2	3	4	5	6	7	8
28.	28	1	2	3	4	5	6	7	8
29.	29	1	2	3	4	5	6	7	8
30.	30	1	2	3	4	5	6	7	8
31.	31	1	2	3	4	5	6	7	8
<b>32. Countries with which transactions were less than \$50,000.00 each, total</b>	32	1 709	2	3	4	5	6	7	8

## GENERAL INSTRUCTIONS

Public reporting burden for this BE-45 report is estimated to average 8 hours per response. This burden includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate to Director, Bureau of Economic Analysis (BE-1), U.S. Department of Commerce, Washington, DC 20230; and to the Office of Management and Budget, Paperwork Reduction Project 0608-0066, Washington, DC 20503.

**Purpose** — Reports on this form are required to obtain reliable and up-to-date information on transactions between U.S. insurance companies and foreign persons. The information will be used to formulate U.S. policy, and to analyze the impact of that policy and the policies of foreign countries, on such international transactions. The data will also be used in compiling the U.S. balance of payments accounts.

**Authority** — This survey is being conducted under the authority of the International Investment and Trade in Services Survey Act (P.L. 94-472, 90 Stat. 2059, 22 U.S.C. 3101-3108, as amended – hereinafter "the Act"), and the filing of reports is mandatory under section 5(b)(2) of the Act (22 U.S.C. 3104). Regulations for the survey may be found in 15 CFR Part 801.

**Penalties** — Whoever fails to report may be subject to a civil penalty of not less than \$2,500, and not more than \$25,000, and to injunctive relief commanding such person to comply, or both. Whoever willfully fails to report shall be fined not more than \$10,000 and, if an individual, may be imprisoned for not more than one year, or both. Any officer, director, employee, or agent of any corporation who knowingly participates in such violations, upon conviction, may be punished by a like fine, imprisonment, or both. (*See 22 U.S.C. 3105.*) Notwithstanding the above, a U.S. person is not subject to any penalty for failure to report if a valid Office of Management and Budget (OMB) control number is not displayed on the form; such a number (0608-0066) is displayed at the top of the first page of this form.

**Confidentiality** — The Act provides that your report to this Bureau is CONFIDENTIAL and may be used only for analytical and statistical purposes. Without your prior written permission, the information filed in your report CANNOT be presented in a manner that allows it to be individually identified. Your report CANNOT be used for purposes of taxation, investigation, or regulation. Copies retained in your files are immune from legal process.

### I. WHO IS TO REPORT AND GENERAL COVERAGE

#### A. Who must report

1. Form BE-45 is to be filed by U.S. insurance companies that have engaged in reinsurance transactions with foreign persons, that have earned premiums from or incurred losses to, foreign persons in the capacity of primary insurers, or that have engaged in international sale or purchase transactions in services auxiliary to insurance. Filing is mandatory if, with respect to these transactions, any of the following eight items was greater than positive \$8,000,000 or less than negative \$8,000,000 for the previous calendar year or can be expected to be in the current calendar year, on an accrual basis: (1) premiums earned, and (2) losses, on reinsurance assumed; (3) premiums incurred, and (4) losses, on reinsurance ceded; (5) premiums earned, and (6) losses, on primary insurance sold; (7) sales of, and (8) purchases of, auxiliary insurance services.

Complete Schedule A, columns 3 and 4 for each of the four quarters of the calendar year for transactions that occurred during the reporting quarter. Please complete Schedule A, columns 5 and 6 on a voluntary basis for each of the four quarters of the calendar year for losses that occurred during the reporting quarter.

Complete Schedule B, Sections III, IV, and V for the fourth quarter of the calendar year for transactions that occurred during the entire calendar year (on an annual basis).

2. **Exemption** — A U.S. person receiving this form from BEA is not required to report data if it does not meet the mandatory reporting requirements. However, it must complete and return Parts 1, 2, and 3.

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

### II. WHAT TO REPORT

- A. Report transactions with affiliated foreign persons as well as with unaffiliated foreign persons (see **Definitions IV.J and K**). **File separate Forms BE-45 to report transactions with (1) your foreign affiliates, (2) your foreign parent(s), and other members of the affiliated foreign group, and (3) unaffiliated foreign persons.**
- B. Report transactions with alien insurance groups, whether or not funds remitted to and from these organizations are cleared through their American Trust Funds.
- C. Note that the criterion for reporting is whether the transaction is between a U.S. person and a foreign person. It is immaterial whether the assets insured are located in the United States or abroad.
- D. Report transactions with U.S. affiliates of foreign firms **for the account of their foreign parent firm**. (Report them on the form covering your transactions with unaffiliated foreign persons.)
- E. Report transactions with foreigners made by your foreign affiliate **for your account**. (Report them on the form covering your transactions with unaffiliated foreign persons.)

### III. WHAT NOT TO REPORT

- A. Do **not** report transactions with U.S. affiliates of foreign firms for their own account. Transactions with these U.S. affiliates are considered domestic-to-domestic for purposes of this survey.
- B. Do **not** report transactions with foreigners made by your foreign affiliates **for their own account**.
- C. Do **not** report premiums to, or losses from, foreign insurance companies on primary or direct insurance. Premiums on such insurance purchased from foreign insurance companies are to be reported on Form BE-20, Benchmark Survey of Selected Services Transactions with Unaffiliated Foreign Persons. Form BE-22, Annual Survey of Selected Services Transactions with Unaffiliated Foreign Persons, Form BE-577, Direct Transactions of U.S. Reporter with Foreign Affiliate, or Form BE-605, Transactions of U.S. Affiliate, Except a U.S. Banking Affiliate with Foreign Parent.

### IV. DEFINITIONS

- A. **Insurance Companies**, for purposes of this survey, includes insurance carriers of all types, and groups of such companies.
- B. **United States**, when used in a geographic sense, means the several states, the District of Columbia, the Commonwealth of Puerto Rico, and all the territories and possessions of the United States. **NOTE:** The U.S. Virgin Islands and Guam are territories of the United States.
- C. **Foreign**, when used in a geographic sense, means that which is situated outside the United States or which belongs to or is characteristic of a country other than the United States.

## GENERAL INSTRUCTIONS — Continued

### IV. DEFINITIONS

- D. Person** means any individual, branch, partnership, associated group, association, estate, trust, corporation, or other organization (whether or not organized under the laws of any State), and any government (including a foreign government, the U.S. Government, a State or local government, and any agency, corporation, financial institution, or other entity or instrumentality thereof, including a government sponsored agency).
- 1. United States person** means any person resident in the United States or subject to the jurisdiction of the United States.
  - 2. Foreign person** means any person resident outside the United States or subject to the jurisdiction of a country other than the United States.
- E. Business enterprise** means any organization, association, branch, or venture which exists for profitmaking purposes or to otherwise secure economic advantage, and any ownership of any real estate. (A business enterprise is a "person" within the definition in paragraph D above.)
- F. Direct investment** means the ownership or control, directly or indirectly, by one person of 10 per centum or more of the voting stock of an incorporated business enterprise, or an equivalent ownership interest in an unincorporated business enterprise.
- G. Parent** means a person of one country who, directly or indirectly, owns or controls 10 per centum or more of the voting stock of an incorporated business enterprise or an equivalent ownership interest in an unincorporated business enterprise, which is located outside that country.
- 1. U.S. parent** means the U.S. person that has direct investment in a foreign business enterprise.
  - 2. Foreign parent** means the foreign person, or the first person outside the United States in a foreign chain of ownership, which has direct investment in a U.S. business enterprise, including a branch.
- H. Affiliated foreign group** means (i) the foreign parent, (ii) any foreign person, proceeding up the foreign parent's ownership chain, which owns more than 50 per centum of the person below it up to and including that person which is not owned more than 50 per centum by another foreign person, and (iii) any foreign person, proceeding down the ownership chain(s) of each of these members, which is owned more than 50 per centum by the person above it.
- I. Affiliate** means a business enterprise located in one country which is directly or indirectly owned or controlled by a person of another country to the extent of 10 per centum or more of its voting stock for an incorporated business or an equivalent interest for an unincorporated business, including a branch.
- 1. Foreign affiliate** means an affiliate located outside the United States in which a U.S. person has direct investment.
  - 2. U.S. affiliate** means an affiliate located in the United States in which a foreign person has direct investment.
  - 3. Foreign affiliate of a foreign parent** means, with reference to a given U.S. affiliate, any member of the affiliated foreign group owning the U.S. affiliate that is not a foreign parent of the U.S. affiliate.
- J. Affiliated foreign person** means, with respect to a given U.S. person, (i) a foreign affiliate of which the U.S. person is a U.S. parent, or (ii) the foreign parent or other member of the affiliated foreign group of which the U.S. person is a U.S. affiliate.
- K. Unaffiliated foreign person** means, with respect to a given U.S. person, any foreign person that is not an affiliated foreign person as defined in paragraph J above.

- L. Country** means the country of location of the foreign person with whom a transaction has occurred.

### V. REPORTING PROCEDURES

- A. Due date** — A completed BE-45 is due within 60 days after the close of each calendar quarter, except the final quarter of the calendar year, when the reports are due within 90 days after the close of the quarter.
- B. Calendar year** — For the purposes of this form, you must report on a calendar year basis. For example, your fourth quarter report is your reporting quarter that ends in the fourth calendar quarter.
- C. Extension** — Requests for an extension of the reporting deadline will not normally be granted. However, in a hardship case, a written request for an extension will be considered if it is received at least 15 days before the due date. You may Fax the request to (202) 606-5318 or e-mail the request to [BE-45extension@bea.gov](mailto:BE-45extension@bea.gov). BEA will provide a written response to such a request.
- D. For assistance or additional copies of the forms** — Phone (202)606-5588 between 8:30 a.m. and 5:00 p.m. eastern time. Copies of our forms are also available on BEA's web page: [www.bea.gov/bea/surveys/iussurv.htm](http://www.bea.gov/bea/surveys/iussurv.htm)
- E. Response required** — If you received this form directly from BEA, a response is required, by completing Parts I, II, and III, and the appropriate schedule, if required, and returning the form to BEA.
- F. Rounding** — Report currency amounts in U.S. dollars rounded to thousands (omitting 000). For example, if the amount is \$1,334,515.00, report it as \$1,335.
- G. Estimates** — If actual figures are not available, report estimates and label them as such. When data items cannot be fully subdivided as required, report totals and an estimated breakdown of the totals.
- H. Original and file copies** — File a single original copy of the form. Please use the copy with the address label if such a labeled copy has been provided. In addition, retain a copy of the report in your files to facilitate resolution of problems; these copies should be retained by the U.S. reporter for a period of not less than three years beyond the original due date.

### VI. SPECIFIC ITEM INSTRUCTIONS

#### Schedule A

##### For property and casualty insurance companies

Calculate columns (3) and (4) as follows: Premiums written (column 3) or ceded (column 4) during the quarter, plus unearned premiums at the beginning of the quarter, minus unearned premiums at the end of the quarter. Report premiums net of cancellations. Report premium gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

Calculate columns (5) and (6) as follows: Losses paid (column 5) or recovered (column 6) during the quarter, plus case reserves at the end of the quarter, plus losses incurred but not reported at the end of the quarter, minus case reserves at the beginning of the quarter, minus losses incurred but not reported at the beginning of the quarter. Losses paid or recovered should not include loss adjustment expenses (reportable on Schedule B).

##### For life insurance companies —

Premiums received (column 3) and paid (column 4) reflect premiums accrued on reinsurance assumed from or ceded to insurance companies resident abroad. These amounts, therefore, are adjusted for changes in due, deferred, and advanced premiums for each quarter. Report premium gross of commissions and profit commissions paid to or received from foreign persons, including commissions initially paid to or received from a U.S. intermediary (agent or broker) of a foreign person.

## GENERAL INSTRUCTIONS — Continued

### VI. SPECIFIC ITEM INSTRUCTIONS — Continued

Losses paid (column 5) and recovered (column 6) reflect policy claims on reinsurance assumed or ceded, adjusted for changes in claims due, unpaid, and in the course of settlement.

#### Schedule B

##### **For property and casualty insurance companies (columns 3 and 4)**

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

Report losses paid (columns 4 and 5) or recovered (column 6) as follows: Losses during the current year, plus case reserves at the end of the current year, plus losses incurred but not reported at the end of the current year, minus case reserves at the beginning of the current year, minus losses incurred but not reported at the beginning of the current year. Losses paid or recovered should not include loss adjustment expenses (reportable under column 8).

##### **For life insurance companies (columns 3 and 4)**

Report premiums earned (column 3). These amounts should be adjusted for changes in due, deferred, and advanced premiums for the current year. Report premium gross of commissions and profit commissions paid to foreign persons, including commissions initially paid to a U.S. intermediary (agent or broker) of a foreign person.

Calculate columns (4), (5), and (6) as follows: Losses paid (columns 4 and 5) and losses recovered (column 6) reflect policy claims on reinsurance assumed or ceded, adjusted for changes in claims due, unpaid, and in the course of settlement.

**Auxiliary insurance services (columns 7 and 8)** — Include agent's commissions, insurance brokering and agency services, insurance consulting services, evaluation, allocated loss adjustment expenses, and other adjustment services, actuarial services, salvage administration services, and regulatory and monitoring services on indemnities and recovery services.

## SUMMARY OF INDUSTRY CLASSIFICATIONS

### AGRICULTURE, FORESTRY, FISHING, AND HUNTING

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

### MINING

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

### UTILITIES

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

### CONSTRUCTION

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

### MANUFACTURING

- 3111 Animal foods
- 3112 Grain and oilseed milling
- 3113 Sugar and confectionery products
- 3114 Fruit and vegetable preserving and specialty foods
- 3115 Dairy products
- 3116 Meat products
- 3117 Seafood product preparation and packaging
- 3118 Bakeries and tortillas
- 3119 Other food products
- 3121 Beverages
- 3122 Tobacco
- 3130 Textile mills
- 3140 Textile product mills
- 3150 Apparel
- 3160 Leather and allied products
- 3210 Wood products
- 3221 Pulp, paper, and paperboard mills
- 3222 Converted paper products
- 3231 Printing and related support activities
- 3242 Integrated petroleum refining and extraction
- 3243 Petroleum refining without extraction
- 3244 Asphalt and other petroleum and coal products
- 3251 Basic chemicals
- 3252 Resins, synthetic rubbers, and artificial and synthetic fibers and filaments
- 3253 Pesticides, fertilizers, and other agricultural chemicals
- 3254 Pharmaceuticals and medicines

- 3255 Paints, coatings, and adhesives
- 3256 Soap, cleaning compounds, and toilet preparations
- 3259 Other chemical products and preparations
- 3261 Plastics products
- 3262 Rubber products
- 3271 Clay products and refractories
- 3272 Glass and glass products
- 3273 Cement and concrete products
- 3274 Lime and gypsum products
- 3279 Other nonmetallic mineral products
- 3311 Iron and steel mills and ferroalloys
- 3312 Steel products from purchased steel
- 3313 Alumina and aluminum production and processing
- 3314 Nonferrous metal (except aluminum) production and processing
- 3315 Foundries
- 3321 Forging and stamping
- 3322 Cutlery and handtools
- 3323 Architectural and structural metals
- 3324 Boilers, tanks, and shipping containers
- 3325 Hardware
- 3326 Spring and wire products
- 3327 Machine shops; turned products; and screws, nuts, and bolts
- 3328 Coating, engraving, heat treating, and allied activities
- 3329 Other fabricated metal products
- 3331 Agriculture, construction, and mining machinery
- 3332 Industrial machinery
- 3333 Commercial and service industry machinery
- 3334 Ventilation, heating, air-conditioning, and commercial refrigeration equipment
- 3335 Metalworking machinery
- 3336 Engines, turbines, and power transmission equipment
- 3339 Other general purpose machinery
- 3341 Computer and peripheral equipment
- 3342 Communications equipment
- 3343 Audio and video equipment
- 3344 Semiconductors and other electronic components
- 3345 Navigational, measuring, electromedical, and control instruments
- 3346 Manufacturing and reproducing magnetic and optical media
- 3351 Electric lighting equipment
- 3352 Household appliances
- 3353 Electrical equipment
- 3359 Other electrical equipment and components
- 3361 Motor vehicles
- 3362 Motor vehicle bodies and trailers
- 3363 Motor vehicle parts
- 3364 Aerospace products and parts
- 3365 Railroad rolling stock
- 3366 Ship and boat building
- 3369 Other transportation equipment
- 3370 Furniture and related products
- 3391 Medical equipment and supplies
- 3399 Other miscellaneous manufacturing

### WHOLESALE TRADE

#### MERCHANT WHOLESALERS, DURABLE GOODS

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

#### MERCHANT WHOLESALERS NONDURABLE GOODS

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

#### ELECTRONIC MARKETS AND AGENTS AND BROKERS

- 4251 Wholesale electronic markets and agents and brokers

### RETAIL TRADE

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

## SUMMARY OF INDUSTRY CLASSIFICATIONS – Continued

### TRANSPORTATION AND WAREHOUSING

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

### INFORMATION

- 5111 Newspaper, periodical, book, and directory publishers
- 5112 Software publishers
- 5121 Motion picture and video industries
- 5122 Sound recording industries
- 5151 Radio and television broadcasting
- 5152 Cable and other subscription programming
- 5161 Internet publishing and broadcasting
- 5171 Wired telecommunications carriers
- 5172 Wireless telecommunications carriers (except satellite)
- 5173 Telecommunications resellers
- 5174 Satellite telecommunications
- 5175 Cable and other program distribution
- 5179 Other telecommunications
- 5181 Internet service providers and web search portals
- 5182 Data processing, hosting, and related services
- 5191 Other information services

### FINANCE AND INSURANCE

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

### REAL ESTATE AND RENTAL AND LEASING

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

### PROFESSIONAL, SCIENTIFIC, AND TECHNICAL SERVICES

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

### MANAGEMENT OF COMPANIES AND ENTERPRISES

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

### ADMINISTRATIVE AND SUPPORT AND WASTE MANAGEMENT AND REMEDIATION SERVICES

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

### EDUCATIONAL SERVICES

- 6110 Educational services

### HEALTH CARE AND SOCIAL ASSISTANCE

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

### ARTS, ENTERTAINMENT, AND RECREATION

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

### ACCOMMODATION AND FOOD SERVICES

- 7210 Accommodation
- 7220 Food services and drinking places

### OTHER SERVICES

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

### PUBLIC ADMINISTRATION

- 9200 Public administration

**OVERFLOW SHEET FOR SCHEDULE A OF FORM BE-45, QUARTERLY  
SURVEY OF INSURANCE TRANSACTIONS BY U.S. INSURANCE COMPANIES  
WITH FOREIGN PERSONS**

Company Name \_\_\_\_\_

Control Number \_\_\_\_\_

Form BE-45 Schedule A

Overflow Page # \_\_\_\_\_ of \_\_\_\_\_

Country	BEA USE ONLY	Quarterly premiums earned on reinsurance assumed from insurance companies resident abroad	Quarterly premiums incurred on reinsurance ceded to insurance companies resident abroad	Quarterly losses on reinsurance assumed from insurance companies resident abroad	Quarterly losses recovered on reinsurance ceded to insurance companies resident abroad
BEA USE ONLY	0001	2 3	4	5	6
Country total for this page (sum of 33-54)	0011	2 3	4	5	6
	0331	2 3	4	5	6
	0341	2 3	4	5	6
	0351	2 3	4	5	6
	0361	2 3	4	5	6
	0371	2 3	4	5	6
	0381	2 3	4	5	6
	0391	2 3	4	5	6
	0401	2 3	4	5	6
	0411	2 3	4	5	6
	0421	2 3	4	5	6
	0431	2 3	4	5	6
	0441	2 3	4	5	6
	0451	2 3	4	5	6
	0461	2 3	4	5	6
	0471	2 3	4	5	6
	0481	2 3	4	5	6
	0491	2 3	4	5	6
	0501	2 3	4	5	6
	0511	2 3	4	5	6
	0521	2 3	4	5	6
	0531	2 3	4	5	6
	0541	2 3	4	5	6

Note: You may use this Overflow Sheet if there is insufficient space on the Form BE-45, Schedule A or B, to list every individual foreign country with which you had transactions.

The Overflow sheet is also available in Microsoft Excel format. If you wish to receive a copy of the Excel file, send an e-mail message to [be-45@bea.gov](mailto:be-45@bea.gov) with your request and we will reply to you with the file attached to our message.