Exhibit Name: Indemnity Calculation
Exhibit Number: P22-2, Plan 50
Record Name: Inventory Value Claim

Record Code: P22

Version: Approved Release Date: 2/7/2019

Reinsurance Year: 2017

<u>Insurance Plan Code</u> 50 Dollar Amount of Insurance

Commodity Code 0073 Nursery							
Calculations Section 1: Loss Guarantee Calculation		<u>Field</u> <u>Name</u>	Record Number	<u>Field</u> <u>Number</u>	<u>Field</u> <u>Format</u>	<u>Field</u> <u>Rounding</u>	<u>Rules</u>
When Coverage Type Code EQUAL "A" and Unit Division Code equal "T":		Unadjusted Loss Amount	Internal		S999999999	None	Unadjusted Loss Amount will be by each individual record.
Unadjusted Loss Amount = Field Market Value A - Field Market Value B		Field Market Value A	P22	24	99999999	None	Field Market Value A will be by each individual record. For Liners (Type Code ('071'), Field Market Value A will have the Survival Factor applied.
		Field Market Value B	P22	25	99999999	None	Field Market Value B will be by each individual record.
= Adjusted Loss Amount =	When Over Under Reporting Factor Code EQUAL "U": Unadjusted Loss Amount * Over Under Reporting Factor	Adjusted Loss Amount	P22	44	S999999999	Round to whole number	Adjusted Loss Amount will be by each individual record.
	When Over Under Reporting Factor Code EQUAL "O": Unadjusted Loss Amount * (1 - Over Under Reporting Factor)	Over Under Reporting Factor	P22	23	9.999	None	Over Under Reporting Factor must be the same for all records within the same Practice Code, Claim Number and Inventory Inspection Number.
When Coverage Type Code is EQUAL "C", or "A' with Unit Division Code equal "S":		Unadjusted Loss Amount	Internal		S99999999	None	Unadjusted Loss Amount will be by each individual record.
Unadjusted Loss Amount = Field Market Value A - (Field Market Value B		Field Market Value A	P22	24	99999999	None	Field Market Value A will be by each individual record. For Liners (Type Code ('071'), Field Market Value A will have the Survival Factor applied.
		Field Market Value B	P22	25	99999999	None	Field Market Value B will be by each individual record.
= Adjusted Loss Amount =	When Over Under Reporting Factor Code EQUAL "U": Unadjusted Loss Amount * Over Under Reporting Factor	Unadjusted Loss Amount (summed)	Internal		S999999999	None	Summed for Unit.
	When Over Under Reporting Factor Code EQUAL "O":	Adjusted Loss Amount	P22	44	S999999999	Round to whole number	Adjusted Loss Amount will be the same for all records within the same Practice Code, Claim Number and Inventory Inspection Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".
	Unadjusted Loss Amount * (1 - Over Under Reporting Factor)	Over Under Reporting Factor	P22	23	9.999	None	Over Under Reporting Factor must be the same for all records within the same Practice Code, Claim Number and Inventory Inspection Number.

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Exhibit Name: Indemnity Calculation **Exhibit Number:** P22-2, Plan 50

Record Name: Inventory Value Claim
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<u>Insurance Plan Code</u> 50 Dollar Amount of Insurance

Insurance Plan Code 50 Dollar Amount of Insurance								
Commodity Code 0073 Nursery								
	Calculations	<u>Field</u> <u>Name</u>	Record Number	<u>Field</u> <u>Number</u>	<u>Field</u> <u>Format</u>	<u>Field</u> <u>Rounding</u>	<u>Rules</u>	
Section 2: Indemnity Calculation								
Unadjusted Indemnity Amount =	Adjusted Loss Amount - Occurrence Deductible Amount	Unadjusted Indemnity Amount	P22		S999999999	Round to whole number	Unadjusted Indemnity Amount will be the same for all records within the same Practice Code, Claim Number and Inventor Inspection Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
		Occurrence Deductible Amount	P22	28	99999999		Occurrence Deductible Amount for under reporting must equal lesser of: Field Marke Value A * (1.000 - Coverage Level Percent) Under Reporting Factor 'OR' Effective Crop Year Deductible. Occurrence Deductible Amount for over reporting must equal lesser of: Field Marke	
							Value A * (1.000 - Coverage Level Percent) Over Reporting Factor + 1.000 'OR' Effectiv Crop Year Deductible. Occurrence Deductible Amount will be the	
							same for all records within the same Practice Code, Claim Number and Inventor Inspection Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
	The lesser of:	Preliminary Indemnity Amount	P22	46	S9999999999	None	Preliminary Indemnity Amount will be the same for all records within the same Practice Code, Claim Number and Inventor Inspection Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	
Preliminary Indemnity Amount	XPS Effective Insurance Amount Or Unadjusted Indemnity Amount	XPS Effective Insurance Amount	P22	22	999999999	None	XPS Effective Insurance Amount will be the same for all records within the same Practice Code, Claim Number and Inventor Inspection Number when Coverage Type Code equals "C" or "A" with Unit Division Code equal "S".	

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Insurance Plan Code 50 Dollar Amount of Insurance 0073 Nursery **Commodity Code** Field Field Record Field Field **Calculations** Name Number Number **Format** Rounding Rules Indemnity Amount will be the same for all records within the same Practice Code, Claim Number and Inventory Inspection Indemnity Amount 41 Round to whole number P22 S999999999 Number when Coverage Type Code equals Indemnity Amount = Preliminary Indemnity Amount * Insured Share "C" or "A" with Unit Division Code equal Percent * Price Election Percent "S". Insured Share Percent P22 29 9.9999 None Price Election Percent 35 9.9999 P14 None **Rehabilitation Payment** Section 3 Rehabilitation Payment Calculation When Insurance Option Code List contains Rehabilitation Payment, "RH": Indemnity Amount P22 41 S999999999 Round to whole number The Lesser of: Actual Rehab Amount P22 39 999999999 = Actual Rehab Amount * Over Under Reporting Factor Over Under Reporting Factor P22 23 9.999 None Rehabilitation Plant Amount P22 36 999999999 None Indemnity Amount Coverage Level Percent P14 34 9.9999 None (Rehabilitation Plant Amount * .075) * Over Under = Reporting Factor * Coverage Level Percent * Insured P22 29 **Insured Share Percent** 9.9999 None

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Share Percent