

**QLM LIFE & MEDICAL INSURANCE
COMPANY Q.P.S.C.**

**INTERIM CONDENSED CONSOLIDATED
FINANCIAL STATEMENTS
AND
INDEPENDENT AUDITOR'S REVIEW REPORT
FOR THE SIX MONTHS PERIOD ENDED
30 JUNE 2023**

REPORT ON REVIEW OF INTERIM CONDENSED CONSOLIDATED FINANCIAL STATEMENTS TO THE BOARD OF DIRECTORS OF QLM LIFE & MEDICAL INSURANCE COMPANY Q.P.S.C.

Introduction

We have reviewed the accompanying interim condensed consolidated financial statements of QLM Life & Medical Insurance Company Q.P.S.C. and its subsidiary (collectively “the Group”) as at 30 June 2023, which comprise the interim consolidated statement of financial position as at 30 June 2023 and the related interim consolidated statement of profit or loss and interim consolidated statement of comprehensive income for the three months and six months period ended 30 June 2023, the related interim consolidated statement of changes in equity and interim consolidated statement of cash flows for six months period then ended, and the related explanatory notes.

The Board of Directors is responsible for the preparation and presentation of these interim condensed consolidated financial statements in accordance with IAS 34 Interim Financial Reporting (“IAS 34”). Our responsibility is to express a conclusion on these interim condensed consolidated financial statements based on our review.

Scope of review

We conducted our review in accordance with International Standards on Review Engagements 2410, “Review of Interim Financial Information Performed by the Independent Auditor of the Entity”. A review of interim condensed consolidated financial statements consists of making inquiries, primarily of persons responsible for financial and accounting matters, and applying analytical and other review procedures. A review is substantially less in scope than an audit conducted in accordance with International Standards on Auditing and consequently does not enable us to obtain assurance that we would become aware of all significant matters that might be identified in an audit. Accordingly, we do not express an audit opinion.

Conclusion

Based on our review, nothing has come to our attention that causes us to believe that the accompanying interim condensed consolidated financial statements are not prepared, in all material respects, in accordance with IAS 34.


Ahmed Sayed
of Ernst & Young
Auditor's Registration No. 326

Date: 14 August 2023
Doha



QLM Life & Medical Insurance Company Q.P.S.C.

INTERIM CONSOLIDATED STATEMENT OF FINANCIAL POSITION

At 30 June 2023

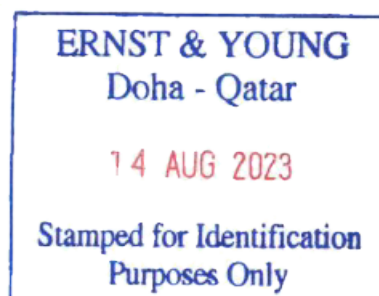
		30 June 2023 (Reviewed) QR ('000)	31 December 2022 (Restated) QR ('000)	1 January 2022 (Restated) QR ('000)
	Notes			
ASSETS				
Bank balances and short-term deposits	4	628,664	574,967	684,416
Financial investments	5	711,267	774,937	681,659
Reinsurance contract assets	6	34,507	36,061	35,182
Other receivables		82,144	90,082	51,954
Property and equipment		2,681	2,397	1,713
TOTAL ASSETS		1,459,263	1,478,444	1,454,924
LIABILITIES AND SHAREHOLDERS' EQUITY				
LIABILITIES				
Short term borrowings		312,607	392,781	315,185
Insurance contract liabilities	6	413,624	369,356	381,348
Reinsurance contract liabilities	6	8,267	-	-
Other payables		151,584	150,550	122,697
TOTAL LIABILITIES		886,082	912,687	819,230
SHAREHOLDERS' EQUITY				
Share capital	8	350,000	350,000	350,000
Legal reserve	8	36,200	36,200	28,074
Fair value reserve		(37,850)	(42,309)	16,840
Retained earnings		224,831	221,866	240,780
TOTAL SHAREHOLDERS' EQUITY		573,181	565,757	635,694
TOTAL LIABILITIES AND SHAREHOLDERS' EQUITY		1,459,263	1,478,444	1,454,924



Salem Al-Mannai
Vice Chairman



Hussain Akbar Al Baker
Board Member



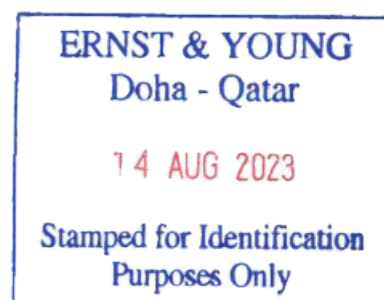
The accompanying notes 1 to 12 form an integral part of these interim condensed consolidated financial statements

QLM Life & Medical Insurance Company Q.P.S.C.

INTERIM CONSOLIDATED STATEMENT OF PROFIT OR LOSS

For the three and six months period ended 30 June 2023

	<i>For the three months period ended</i>		<i>For the six months period ended</i>	
	<i>30 June 2023 (Reviewed) QR ('000)</i>	<i>30 June 2022 (Restated) QR ('000)</i>	<i>30 June 2023 (Reviewed) QR ('000)</i>	<i>30 June 2022 (Restated) QR ('000)</i>
<i>Notes</i>				
Insurance revenue	281,895	307,500	527,109	579,784
Insurance service expense	(253,390)	(305,846)	(472,158)	(569,688)
Net (expenses)/income from reinsurance contracts held	(12,350)	(903)	(23,255)	10,321
INSURANCE SERVICE RESULT	16,155	751	31,696	20,417
Investment income	19,529	10,154	34,963	26,717
Finance costs	(4,753)	(1,083)	(9,609)	(1,945)
NET INVESTMENT INCOME	14,776	9,071	25,354	24,772
Insurance finance (expenses)/income for insurance contracts issued	(1,778)	1,384	(12,526)	3,650
Insurance finance income/(expenses) for reinsurance contracts held	1,371	(1,998)	11,034	(5,593)
NET INSURANCE FINANCIAL RESULT	(407)	(614)	(1,492)	(1,943)
NET INSURANCE AND INVESTMENT RESULT	30,524	9,208	55,558	43,246
Operating and administrative expenses	(3,733)	(2,774)	(8,418)	(7,387)
Depreciation and amortization	(232)	(175)	(432)	(386)
PROFIT BEFORE TAX	26,559	6,259	46,708	35,473
Income tax expense	(374)	(51)	(494)	(139)
Prior period tax adjustment	501	1,943	501	1,943
PROFIT FOR THE PERIOD	26,686	8,151	46,715	37,277
Earnings per share				
Basic and diluted earnings per share in Qatari Riyals	0.08	0.02	0.13	0.11



The accompanying notes 1 to 12 form an integral part of these interim condensed consolidated financial statements

QLM Life & Medical Insurance Company Q.P.S.C.

INTERIM CONSOLIDATED STATEMENT OF COMPREHENSIVE INCOME

For the three and six months period ended 30 June 2023

	<i>For the three months period ended</i>		<i>For the six months period ended</i>	
	<i>30 June 2023 (Reviewed) QR ('000)</i>	<i>30 June 2022 (Restated) QR ('000)</i>	<i>30 June 2023 (Reviewed) QR ('000)</i>	<i>30 June 2022 (Restated) QR ('000)</i>
PROFIT FOR THE PERIOD	26,686	8,151	46,715	37,277
OTHER COMPREHENSIVE INCOME				
Other comprehensive income that may be reclassified to profit or loss in subsequent periods				
<i>Debt instruments at fair value through other comprehensive income</i>				
Net changes in fair value during the period	<u>1,313</u>	<u>(25,533)</u>	<u>4,459</u>	<u>(52,884)</u>
TOTAL COMPREHENSIVE INCOME/(LOSS) FOR THE PERIOD	<u>27,999</u>	<u>(17,382)</u>	<u>51,174</u>	<u>(15,607)</u>

ERNST & YOUNG
Doha - Qatar

14 AUG 2023

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Purposes Only

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QLM Life & Medical Insurance Company Q.P.S.C.

INTERIM CONSOLIDATED STATEMENT OF CHANGES IN EQUITY

For the six months period ended 30 June 2023

	<i>Share capital QR ('000)</i>	<i>Legal reserve (QR '000)</i>	<i>Fair value reserve QR ('000)</i>	<i>Retained earnings QR ('000)</i>	<i>Total equity QR ('000)</i>
Balance at 31 December 2021 as previously reported (Audited)	350,000	28,074	16,840	223,254	618,168
Impact of initial application (Note 2)	-	-	-	17,526	17,526
Restated balance as at 1 January 2022	350,000	28,074	16,840	240,780	635,694
Profit for the period	-	-	-	37,277	37,277
Net change in investments at fair value through other comprehensive income (FVOCI)	-	-	(52,884)	-	(52,884)
Total comprehensive (loss) / income for the period	-	-	(52,884)	37,277	(15,607)
Dividends (Note 8)	-	-	-	(77,000)	(77,000)
Restated balance at 30 June 2022	<u>350,000</u>	<u>28,074</u>	<u>(36,044)</u>	<u>201,057</u>	<u>543,087</u>
Balance at 31 December 2022 as previously reported (Audited)	350,000	36,200	(42,309)	219,386	563,277
Impact of initial application (Note 2)	-	-	-	2,480	2,480
Restated balance as at 1 January 2023	350,000	36,200	(42,309)	221,866	565,757
Profit for the period	-	-	-	46,715	46,715
Net change in investments at fair value through other comprehensive income (FVOCI)	-	-	4,459	-	4,459
Total comprehensive income for the period	-	-	4,459	46,715	51,174
Dividends (Note 8)	-	-	-	(43,750)	(43,750)
Balance at 30 June 2023 (Reviewed)	<u>350,000</u>	<u>36,200</u>	<u>(37,850)</u>	<u>224,831</u>	<u>573,181</u>

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QLM Life & Medical Insurance Company Q.P.S.C.

INTERIM CONSOLIDATED STATEMENT OF CASH FLOWS

For the six months period ended 30 June 2023

	<i>For the six months period ended 30 June 2023 (Reviewed) (QR'000)</i>	<i>For the six months period ended 30 June 2022 (Restated) (QR'000)</i>
<i>Note</i>		
OPERATING ACTIVITIES		
Profit before tax	46,708	35,473
<i>Adjustments for</i>		
Depreciation and amortization	432	386
Interest income	(32,708)	(21,259)
Interest expense	9,609	1,945
Gain on disposal of financial investments	(183)	(3,070)
Provision for employees' end of service benefits	520	480
	24,378	13,955
<i>Movements in working capital</i>		
Other receivables	7,938	(14,278)
Changes in reinsurance contracts assets and liabilities	9,821	(6,093)
Changes in insurance contracts assets and liabilities	44,268	118,157
Other payables	2,509	15,217
	88,914	126,958
Cash generated from operations	88,914	126,958
Payments to social and sports fund	(2,032)	(2,622)
Income tax paid	(360)	(168)
Employees' end of service benefits paid	(55)	(105)
	86,467	124,063
Net cash generated from operating activities	86,467	124,063
INVESTING ACTIVITIES		
Net cash movement in investments	68,312	(132,135)
Purchase of property and equipment	(716)	(509)
Interest income received	32,708	21,259
	100,304	(111,385)
Net cash generated from / (used in) investing activities	100,304	(111,385)
FINANCING ACTIVITIES		
Net movement in short-term borrowings	(80,174)	81,058
Interest paid	(9,609)	(1,945)
Dividend paid	(43,291)	(71,507)
	(133,074)	7,606
Net cash (used in) / generated from financing activities	(133,074)	7,606
Net increase in cash and cash equivalents	53,697	20,284
Cash and cash equivalents at the beginning of the period	574,967	684,416
Cash and cash equivalents at the end of the period	628,664	704,700

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The accompanying notes 1 to 12 form an integral part of these interim condensed consolidated financial statements

QLM Life & Medical Insurance Company Q.P.S.C.

NOTES TO THE INTERIM CONDENSED CONSOLIDATED FINANCIAL STATEMENTS

For the six months period ended 30 June 2023

1 STATUS AND OPERATIONS

QLM Life & Medical Insurance Company Q.P.S.C. (formerly known as QLM Life & Medical Insurance Company W.L.L.) (the "Company") is a life and medical insurance company incorporated on 30 April 2018 under Commercial Registration No. 116849 and governed by the provisions of the Qatar Commercial Companies' Law and Qatar Central Bank's insurance regulations. The Company was incorporated as a limited liability company (W.L.L.) and was a subsidiary of Qatar Insurance Company Q.S.P.C. ("QIC"), which owned 85% of its issued and paid-up share capital at the time of incorporation. The Company commenced operations with effect from 1 January 2019.

Effective from 1 January 2019, Q Life & Medical Insurance Company L.L.C., subsidiary of QIC, transferred the business operation of the company (except Labuan Branch business which wound up during prior year) to the Company.

By virtue of an extraordinary general assembly resolution dated 22 November 2020, the Founders, being the shareholders of the Company prior to its conversion, resolved to convert the Company from a limited liability company to a public shareholding company and subsequently list on the Qatar Stock Exchange. It was further resolved that the conversion to a public shareholding company (Q.P.S.C.) shall be carried out by offering 60% of the shares held by the Qatar Insurance Company Q.S.P.C. to the public through an Initial Public Offering ("IPO"). Post, the successful completion of the IPO, the conversion from a limited liability company (W.L.L.) to a Qatari public shareholding company (Q.P.S.C.) was formally announced in the Constitutive General Assembly meeting held on 30 December 2020. Consequently, the interest held by Qatar Insurance Company Q.S.P.C. in the Group has been reduced to 25% of its issued and paid-up share capital and lost control. The shares of the Company were listed for trading at the Qatar Stock Exchange on 13 January 2021.

The address of the Company's registered office is PO Box 12713, 5th Floor, QLM Building, West Bay, Doha – Qatar. The Company and its subsidiary (the "Group") is primarily engaged in medical, credit life, group life and individual life insurance.

The subsidiary of the Group included in the consolidated financial statements is as follows:

	<i>Country of Incorporation and Place of Business</i>	<i>Group Effective Ownership and Voting Rights (%)</i>	
		<i>30 June 2023</i>	<i>31 December 2022</i>
Q Life & Medical Insurance Company L.L.C.	State of Qatar	100%	100%

The Q Life & Medical Insurance Company L.L.C (the "Subsidiary") operates in the State of Qatar.

These interim condensed consolidated financial statements were approved by the Board of Directors and signed on its behalf on 14 August 2023.

2 BASIS OF PREPARATION

2.1 Basis of preparation

Statement of compliance

The interim condensed consolidated financial statements for the six months period ended 30 June 2023 have been prepared in accordance with IAS 34 - "Interim Financial Reporting" as issued by the International Accounting Standards Board (IASB). The accompanying interim condensed consolidated financial statements have been prepared under the historical cost convention, except for certain financial instruments that are measured at fair value.

The interim condensed consolidated financial statements comply with the requirements of Qatar Commercial Companies Law No.11 of 2015, whose certain provisions were subsequently amended by Law No.8 of 2021.

2 BASIS OF PREPARATION (CONTINUED)

2.1 Basis of preparation (continued)

The interim condensed consolidated financial statements are presented in Qatari Riyals ("QR"), which is the Group's functional and presentation currency. Except as otherwise indicated, financial information presented in QR has been rounded to the nearest thousand.

The interim condensed consolidated financial statements do not include all the information and disclosures required in the annual financial statements and should be read in conjunction with the Group's annual financial statements as at 31 December 2022. In addition, results for the six months period ended 30 June 2023 are not necessarily indicative of the results that may be expected for the financial year ending 31 December 2023.

The accounting policies adopted in the preparation of the interim condensed consolidated financial statements are the same as those applied by the Group in the preparation of the consolidated financial statements as at and for the year ended 31 December 2022, except for the adoption of the new standards and amendments (IFRS 17 and IFRS 9 on insurance receivables) effective as of 1 January 2023. The Group has not early adopted any other standard, interpretation or amendment that has been issued but is not yet effective.

2.2 Use of estimates and judgments

The preparation of the interim condensed consolidated financial statements in conformity with International Financial Reporting Standards ("IFRS") requires management to make judgements, estimates and assumptions that affects the application of accounting policies and the reported amounts of assets, liabilities, income and expenses. Actual results may differ from these estimates.

Estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised and in any future periods affected.

In preparing these interim condensed consolidated financial statements, the significant judgments made by the management in applying the Group's accounting policies were the same as those applied to the consolidated financial statements as at and for the year ended 31 December 2022, except as described in Note 3 to the interim condensed consolidated financial statements.

2.3 New standards, interpretations and amendments adopted by the Group

IFRS 17 Insurance Contracts

IFRS 17 replaces IFRS 4 Insurance Contracts for annual periods on or after 1 January 2023. The Group has restated the comparative information for 2022 applying the transitional provisions to IFRS 17.

Changes to classification and measurement

The adoption of IFRS 17 did not change the classification of the Group's insurance contracts. However, IFRS 17 establishes specific principles for the recognition and measurement of insurance contracts issued and reinsurance contracts held by the Group.

Under IFRS 17, the Group's insurance contracts issued and reinsurance contracts held (with the exception of groups of insurance contracts issued and groups of reinsurance contracts held under the Credit Life Long Term portfolio which are covered under General Measurement Model (GMM) and group of insurance contracts issued held under Unit Linked Insurance Plans (ULIP) which are covered under Variable Fee Approach) are eligible to be measured by applying the Premium Allocation Approach (PAA). The PAA simplifies the measurement of insurance contracts in comparison with the general model in IFRS 17. The measurement principles of the PAA differ from the 'earned premium approach' used by the Group under IFRS 4 in the following key areas:

- The liability for remaining coverage reflects premiums received less deferred insurance acquisition cash flows and less amounts recognised in revenue for insurance services provided.

2 BASIS OF PREPARATION (CONTINUED)

2.3 New standards, interpretations and amendments adopted by the Group (continued)

IFRS 17 Insurance Contracts (continued)

Changes to classification and measurement (continued)

- The time between providing each part of the services and the related premium due date is no more than a year. Accordingly, as permitted under IFRS 17, the Group has not adjusted the liability for remaining coverage to reflect the time value of money and the effect of financial risk. Where the premium due date and the related period of services are more than 12 months the Group has assessed the amount as immaterial, as such no discounting is required.
- Measurement of the liability for remaining coverage involves an explicit evaluation of risk adjustment for non-financial risk when a group of contracts is onerous in order to calculate a loss component (previously these may have formed part of the unexpired risk reserve provision). If at any time before and during the coverage period, facts and circumstances indicate that a group of contracts is onerous, then the Group will recognise a loss in profit or loss and increase the liability for remaining coverage to the extent that the current estimates of the fulfilment cash flow that relate to remaining coverage exceed the carrying amount of the liability for remaining coverage.
- Measurement of the liability for incurred claims (previously claims outstanding and incurred but not reported (IBNR) claims) are determined on a discounted probability-weighted expected value basis and includes an explicit risk adjustment for non-financial risk. The liability includes the Group's obligation to pay other incurred insurance expenses. The Group recognised the liability for incurred claims of a group of contracts at the amount of the fulfilment cash flows relating to incurred claims. The future cash flows are discounted (at current rates whether they are expected to be paid in one year or less from the date the claims are incurred).
- The Group allocate the acquisition cash flows to groups of insurance contracts issued or expected to be issued using a systematic and rational basis. Insurance acquisition cash flows include those that are directly attributable to a group. Where such insurance acquisition cash flows are paid (or where a liability has been recognised applying another IFRS standard) before the related group of insurance contracts is recognised, an asset for insurance acquisition cash flows is recognised. When insurance contracts are recognised, the related portion of the asset for insurance acquisition cash flows is recognised and subsumed into the measurement at initial recognition of the insurance liability for remaining coverage of the related group.
- Measurement of the asset for remaining coverage (reflecting reinsurance premiums paid for reinsurance held) is adjusted to include a loss-recovery component to reflect the expected recovery of onerous contract losses where such contracts reinsure onerous direct contracts. The Group apply the same accounting policies to measure a group of reinsurance contracts, adapted where necessary to reflect features that differ from those of insurance contracts.

Presentation and disclosure

For presentation in the interim consolidated statement of financial position, the Group aggregate insurance and reinsurance contracts issued and reinsurance contracts held, respectively and present separately:

- Portfolios of insurance and reinsurance contracts issued that are assets.
- Portfolios of insurance and reinsurance contracts issued that are liabilities.
- Portfolios of reinsurance contracts held that are assets.
- Portfolios of reinsurance contracts held that are liabilities.

The portfolios referred to above are those established at initial recognition in accordance with the IFRS 17 requirements.

Portfolios of insurance contracts issued include any assets for insurance acquisition cash flows. The line-item descriptions in the interim consolidated statement of profit or loss will change significantly compared with last year. Earlier, the Group reported the following line items:

- Gross premiums.
- Premium ceded to reinsurers
- Net premiums
- Movement in unexpired risk reserve
- Gross claims paid

2 BASIS OF PREPARATION (CONTINUED)

2.3 New standards, interpretations and amendments adopted by the Group (continued)

IFRS 17 Insurance Contracts (continued)

Presentation and disclosure (continued)

- Reinsurance recoveries
- Movement in outstanding claims
- Net commissions
- Net underwriting result

Instead, IFRS 17 requires separate presentation of:

- Insurance revenue
- Insurance service expenses
- Insurance finance expense or income from insurance contracts
- Insurance finance income or expense from reinsurance contracts
- Net income or expenses from reinsurance contracts held.

Transition

On transition date, 1 January 2022, the Group:

- Has identified, recognised and measured each group of insurance contracts using the modified retrospective approach.
- Has identified, recognised and measured assets for insurance acquisition cash flows as if IFRS 17 had always applied.
- However, no recoverability assessment was performed before the transition date. At transition date, a recoverability assessment was performed, and no impairment loss was identified.
- Derecognised any existing balances that would not exist had IFRS 17 always applied.
- Recognised any resulting net difference in equity.

The Group assessed historical information available and determined that all reasonable and supportable information necessary for applying the full retrospective approach was not available for groups of contracts issued prior to the transition date. The Group elected to apply the modified retrospective approach, which was intended to achieve the closest possible outcome to the full retrospective application maximising the use of available information.

The Group has aggregated contracts issued more than one year apart for groups of contracts applying the modified retrospective approach at transition, as it did not have supportable information to aggregate contracts into groups including only contracts issued within one year.

The Group has elected to use the simplification in the modified retrospective approach for determining the contractual service margin ("CSM") or loss component of the liability for remaining coverage at the transition date. The Group has used the following procedure to determine the CSM at initial recognition for these contracts:

- Estimated future cash flows at the date of initial recognition as the amount of the future cash flows at transition date, adjusted by the cash flows that have occurred between the date of initial recognition and the transition date. The cash flows that are known to have occurred include cash flows resulting from contracts that ceased to exist before the transition date.
- Estimated historical discount rates applied to some cash flows in the period prior to 2014 using an observable market interest curve based on discount rate applicable for 2014.
- Estimated the risk adjustment for non-financial risk at the date of initial recognition by adjusting the risk adjustment at transition date by the expected release of risk in the periods before transition. The expected release of risk was determined with reference to the release of risk for similar contracts that the Group has issued subsequent to the transition date.

The Group has elected not to disaggregate insurance finance income or expenses between amounts included in profit or loss and amounts included in other comprehensive income.

The adoption of IFRS 17 has led to the restatement of the opening retained earnings at 1 January 2022 by QR 18,797 thousand (excluding the impact of adoption of IFRS 9 on insurance receivables).

2 BASIS OF PREPARATION (CONTINUED)**2.3 New standards, interpretations and amendments adopted by the Group (continued)****IFRS 9 Financial Instruments**

The Group adopted IFRS 9 on insurance receivables to recognise a loss allowance for expected credit losses ("ECL").

The adoption of the ECL requirements of IFRS 9 on insurance receivables has resulted an increase in the impairment allowances in respect of the Group's insurance and reinsurance receivables by QR 1,271 thousand as of 1 January 2022. The increase in allowance was adjusted to retained earnings.

Impact of adoption of IFRS 17 and IFRS 9

The tables below summarise the impact of initial application of IFRS 17 and IFRS 9 (on insurance receivables) as at 31 December 2022, 1 January 2022 and for the six months period ended 30 June 2022.

Interim condensed consolidated statement of financial position

	<i>As previously reported QR ('000)</i>	<i>Effect of restatement QR ('000)</i>	<i>Restated QR ('000)</i>
31 December 2022			
Assets			
Reinsurance contract assets	84,199	(48,138)	36,061
Insurance and reinsurance receivables/Other receivables and assets	381,933	(291,851)	90,082
Due from related parties	618	(618)	-
Liabilities			
Provisions, reinsurance and other payables/Other payables	114,824	35,726	150,550
Payable to policyholders of ULIP	1,251	(1,251)	-
Due to related parties	164,591	(164,591)	-
Insurance contract liabilities	582,327	(212,971)	369,356
Equity			
Retained earnings	219,386	2,480	221,866
1 January 2022			
Assets			
Reinsurance contract assets	146,581	(111,399)	35,182
Insurance and reinsurance receivables/Other receivables	423,678	(371,724)	51,954
Due from related parties	1,021	(1,021)	-
Liabilities			
Provisions, reinsurance and other payables/Other payables	104,503	18,194	122,697
Due to related parties	164,574	(164,574)	-
Insurance contract liabilities	736,638	(355,290)	381,348
Equity			
Retained earnings	223,254	17,526	240,780

2 BASIS OF PREPARATION (CONTINUED)**2.3 New standards, interpretations and amendments adopted by the Group (continued)***Impact of adoption of IFRS 17 and IFRS 9 (continued)***Interim condensed consolidated statement of profit or loss**

	<i>As previously reported QR ('000)</i>	<i>Effect of restatement QR ('000)</i>	<i>Restated QR ('000)</i>
Insurance revenue	-	579,784	579,784
Insurance service expense	-	(569,688)	(569,688)
Net income from reinsurance contracts held	-	10,321	10,321
Insurance service result	-	20,417	20,417
Net underwriting results	46,351	(46,351)	-
Investment income	26,717	-	26,717
Finance costs	(1,945)	-	(1,945)
Net investment income	24,772	-	24,772
Insurance finance income for insurance contracts issued	-	3,650	3,650
Insurance finance expenses for reinsurance contracts held	-	(5,593)	(5,593)
Net insurance financial result	-	(1,943)	(1,943)
Net insurance and investment result	71,123	(27,877)	43,246
Operating and administrative expenses	(27,885)	20,498	(7,387)
Depreciation and amortization	(386)	-	(386)
Profit before tax	42,852	(7,379)	35,473
Income tax expense	(139)	-	(139)
Prior period tax adjustment	1,943	-	1,943
Profit for the period	44,656	(7,379)	37,277
Earnings per share			
Basic and diluted earnings per share in Qatari Riyals	0.13	(0.02)	0.11

Interim condensed consolidated statement of cash flows

The implementation of IFRS 17 and IFRS 9 (on insurance receivables) do not have an impact on net cash from operating, investing and financing activities.

2 BASIS OF PREPARATION (CONTINUED)

2.3 New standards, interpretations and amendments adopted by the Group (continued)

Amendments to IAS 1: Classification of Liabilities as Current or Non-current

In January 2020, the IASB issued amendments to paragraphs 69 to 76 of IAS 1 to specify the requirements for classifying liabilities as current or non-current. The amendments clarify:

- What is meant by a right to defer settlement
- That a right to defer must exist at the end of the reporting period
- That classification is unaffected by the likelihood that an entity will exercise its deferral right
- That only if an embedded derivative in a convertible liability is itself an equity instrument would the terms of a liability not impact its classification.

These amendments had no impact on the consolidated financial statements of the Group as there were no modifications of the Group's financial instruments during the period.

Definition of Accounting Estimates - Amendments to IAS 8

In February 2021, the IASB issued amendments to IAS 8, in which it introduces a definition of 'accounting estimates'. The amendments clarify the distinction between changes in accounting estimates and changes in accounting policies and the correction of errors. Also, they clarify how entities use measurement techniques and inputs to develop accounting estimates.

These amendments had no impact on the consolidated financial statements of the Group as there were no modifications of the Group's financial instruments during the period.

Disclosure of Accounting Policies - Amendments to IAS 1 and IFRS Practice Statement 2

In February 2021, the IASB issued amendments to IAS 1 and IFRS Practice Statement 2 Making Materiality Judgements, in which it provides guidance and examples to help entities apply materiality judgements to accounting policy disclosures. The amendments aim to help entities provide accounting policy disclosures that are more useful by replacing the requirement for entities to disclose their 'significant' accounting policies with a requirement to disclose their 'material' accounting policies and adding guidance on how entities apply the concept of materiality in making decisions about accounting policy disclosures.

These amendments had no impact on the consolidated financial statements of the Group as there were no modifications of the Group's financial instruments during the period.

2.4 Standards issued but not yet effective

The following new and amended standards and interpretations that are issued, but not yet effective. The Group intends to adopt these new and amended standards and interpretations, if applicable, when they become effective.

<i>Standard / Interpretation</i>	<i>Effective date</i>
Amendments to IFRS 16: Lease Liability in a Sales and Leaseback	1 January 2024
Amendments to IAS 1: Non-Current Liabilities with Covenants	1 January 2024

3 SIGNIFICANT ACCOUNTING POLICIES

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held

IFRS 17 has brought significant changes to the accounting for insurance and reinsurance contracts. The Group has applied the following significant accounting policies in the preparation of financial statement on the effective date of the Standard i.e., 01 January 2023:

3.1.1 Insurance and reinsurance contracts

The Group issues insurance contracts in the normal course of business, under which it accepts significant insurance risk from its policyholders. As a general guideline, the Group determines whether it has significant insurance risk, by comparing benefits payable after an insured event with benefits payable if the insured event had not occurred. Contracts that have a legal form of insurance but do not transfer significant insurance risk and expose the Group to financial risk are classified as investment contracts and follow financial instruments accounting under IFRS 9. The Group also issues reinsurance contracts in the normal course of business to compensate other entities for claims arising from one or more insurance contracts issued by those entities.

3.1.2 Level of Aggregation

The Group identifies portfolios by aggregating insurance contracts that are subject to similar risks and managed together. In grouping insurance contracts into portfolios, the Group considers the similarity of risks rather than the specific labelling of product lines. The Group has determined that all contracts within each product line, as defined for management purposes, have similar risks. Therefore, when contracts are managed together, they represent a portfolio of contracts. Each portfolio is further disaggregated into groups of contracts that are issued within a calendar year (annual cohorts) and are

- (i) contracts that are onerous at initial recognition;
- (ii) contracts that at initial recognition have no significant possibility of becoming onerous subsequently; or
- (iii) a group of remaining contracts. These groups represent the level of aggregation at which insurance contracts are initially recognised and measured. Such groups are not subsequently reconsidered.

For each portfolio of contracts, the Group determines the appropriate level at which reasonable and supportable information is available to assess whether these contracts are onerous at initial recognition and whether non-onerous contracts have a significant possibility of becoming onerous. This level of granularity determines sets of contracts.

The Group uses significant judgement to determine at what level of granularity the Group has reasonable and supportable information that is sufficient to conclude that all contracts within a set are sufficiently homogeneous and will be allocated to the same group without performing an individual contract assessment.

Portfolios of reinsurance contracts held are assessed for aggregation separately from portfolios of insurance contracts issued. Applying the grouping requirements to reinsurance contracts held, the Group aggregates reinsurance contracts held concluded within a calendar year (annual cohorts) into groups of (i) contracts for which there is a net gain at initial recognition, if any; (ii) contracts for which at initial recognition there is no significant possibility of a net gain arising subsequently; and (iii) remaining contracts in the portfolio, if any.

3.1.3 Recognition

Groups of insurance contracts issued are initially recognised from the earliest of the following:

- the beginning of the coverage period;
- the date when the first payment from the policyholder is due or actually received, if there is no due date; or
- when the Group determines that a group of contracts becomes onerous.

A group of reinsurance contracts held that covers the losses of separate insurance contracts on a proportionate basis (proportionate or quota share reinsurance) is recognised at the later of:

- the beginning of the coverage period of the group; or
- the initial recognition of any underlying insurance contract.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.4 Insurance contract modification and derecognition

The Group derecognises insurance contracts when:

- The rights and obligations relating to the contract are extinguished (i.e., discharged, cancelled or expired); or
- The contract is modified such that the modification results in a change in the measurement model, or the applicable standard for measuring a component of the contract. In such cases, the Group derecognises the initial contract and recognises the modified contract as a new contract

When a modification is not treated as a derecognition, the Group recognises amounts paid or received for the modification with the contract as an adjustment to the relevant liability for remaining coverage.

3.1.5 Combination of insurance contracts

Sometimes, the Group enters into two or more contracts at the same time with the same or related counterparties to achieve an overall commercial effect. The Group accounts for such a set of contracts as a single insurance contract when this reflects the substance of the contracts. When making this assessment, the Group considers whether:

- The rights and obligations are different when looked at together compared to when looked at individually
- The Group is unable to measure one contract without considering the other

3.1.6 Separating components from insurance and reinsurance contracts

The Group assesses its insurance and reinsurance contracts to determine whether they contain distinct components which must be accounted for under another IFRS instead of under IFRS 17. After separating any distinct components, the Group applies IFRS 17 to all remaining components of the (host) insurance contract. Currently, the Group's contracts do not include any distinct components that require separation. Some reinsurance contracts issued contain profit commission arrangements. Under these arrangements, there is a minimum guaranteed amount that the policyholder will always receive either in the form of profit commission, or as claims, or another contractual payment irrespective of the insured event happening. The minimum guaranteed amounts have been assessed to be highly interrelated with the insurance component of the reinsurance contracts and are, therefore, non-distinct investment components which are not accounted for separately.

3.1.7 Contract boundary

The measurement of a group of insurance contracts includes all future cash flows expected to arise within the boundary of each contract in the group.

Cash flows are within the boundary of an insurance contract if they arise from substantive rights and obligations that exist during the reporting period in which the Group can compel the policyholder to pay the premiums, or in which the Group has a substantive obligation to provide the policyholder with insurance contract services. A substantive obligation to provide insurance contract services ends when:

- The Group has the practical ability to reassess the risks of the particular policyholder and, as a result, can set a price or level of benefits that fully reflects those risks; or
- Both of the following criteria are satisfied:
 - i. The Group has the practical ability to reassess the risks of the portfolio of insurance contracts that contain the contract and, as a result, can set a price or level of benefits that fully reflects the risk of that portfolio; and
 - ii. The pricing of the premiums up to the date when the risks are reassessed does not take into account the risks that relate to periods after the reassessment date

A liability or asset relating to expected premiums or claims outside the boundary of the insurance contract are not recognised. Such amounts relate to future insurance contracts.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.8 Measurement

The following table sets out the accounting policy choices adopted by the Group:

	Measurement models the option is allowed to be applied	IFRS 17 options	Adopted approach
Insurance acquisition cash flows	PAA	Where the coverage period of contract in the group at initial recognition is no more than one year, IFRS 17 allows an accounting policy choice of either expensing the insurance acquisition cashflows when incurred or amortizing them over the contract's coverage period.	Insurance acquisition cash flows are allocated to related groups of insurance contracts and amortised over the coverage period of the related group using a systematic and rational basis.
Liability for Remaining Coverage ("LRC") adjusted for financial risk and time value of money	PAA	Where there is no significant financing component in relation to the LRC, or where the time between providing each part of the services and the related premium due date is no more than a year, an entity is not required to make an adjustment for accretion of interest on the LRC.	For all contracts measured under the PAA, there is no allowance as the premiums are expected to be received within one year of the coverage period.
Liability for Incurred Claims ("LIC") adjusted for time value of money	PAA	Where claims are expected to be paid within a year of the date that the claim is incurred, it is not required to adjust these amounts for the time value of money	The Group discounts the LIC for the time value of money.
Insurance finance income and expenses	All	IFRS 17 provides an accounting policy choice to recognise the impact of changes in discount rates and other financial variables in profit or loss or in OCI. The accounting policy choice (the P&L or OCI option) is applied on a portfolio basis.	The Group includes all insurance finance income or expenses for the period in profit or loss.
Disaggregation of risk adjustment	All	An insurer is not required to include the entire change in the risk adjustment for non-financial risk in the insurance service result. Instead, it can choose to split the amount between the insurance service result and insurance finance income or expenses.	The Company disaggregates changes in the risk adjustment for non-financial risk between insurance service result and insurance finance income or expenses.
Presentation of income/ (expense) from reinsurance contracts held	All	IFRS 17 allows options in presenting income or expenses from reinsurance contracts held, other than insurance finance income or expenses. An alternative would be to gross up this single amount and present separately the amounts recovered from the reinsurer (as income) and an allocation of the premiums paid (as reinsurance expenses) in line items separate from insurance revenue and insurance service expenses.	The Group elected to present a single net amount in net expenses from reinsurance contracts held.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.8 Measurement (continued)

3.1.8.1 Insurance contracts measured under the premium allocation approach - Initial and Subsequent Measurement

The Group applies the premium allocation approach to all the insurance contracts (other than long term credit life insurance contracts & unit-linked investment products) that it issues and reinsurance contracts that it holds as;

- The coverage period of each contract in the group is one year or less, including insurance contract services arising from all premiums within the contract boundary; or
- For contracts longer than one year, the Group has modelled possible future scenarios and reasonably expects that the measurement of the liability for remaining coverage for the group containing those contracts under the PAA does not differ materially from the measurement that would be produced applying the general model. In assessing materiality, the Group has also considered qualitative factors such as the nature of the risk and types of its lines of business.

The Group does not apply the PAA if, at the inception of the group of contracts, it expects significant variability in the fulfilment cash flows that would affect the measurement of the liability for the remaining coverage during the period before a claim is incurred.

For a group of contracts that is not onerous at initial recognition, the Group measures the liability for remaining coverage as:

- The premiums, if any, received at initial recognition
- Minus any insurance acquisition cash flows at that date,
- Plus or minus any amount arising from the derecognition at that date of the asset recognised for insurance acquisition cash flows and
- Any other asset or liability previously recognised for cash flows related to the group of contracts that the Group pays or receives before the group of insurance contracts is recognised.

Subsequent measurement:

The Group measures the carrying amount of the liability for remaining coverage at the end of each reporting period as the liability for remaining coverage at the beginning of the period:

- Plus premiums received in the period
- Minus insurance acquisition cash flows
- Plus any amounts relating to the amortisation of the insurance acquisition cash flows recognised as an expense in the reporting period for the group
- Plus any adjustment to the financing component, where applicable
- Minus the amount recognised as insurance revenue for the services provided in the period
- Minus any investment component paid or transferred to the liability for incurred claims

The Group estimates the liability for incurred claims as the fulfilment cash flows related to incurred claims. The fulfilment cash flows incorporate, in an unbiased way, all reasonable and supportable information available without undue cost or effort about the amount, timing and uncertainty of those future cash flows, they reflect current estimates from the perspective of the Group and include an explicit adjustment for non-financial risk (the risk adjustment).

When facts and circumstances indicate that a group of contracts has become onerous, the Group performs a test for onerousness. If the amount of the fulfilment cash flows exceeds the carrying amount of the LRC, the Group recognises the amount of the difference as a loss in profit or loss and increases the LRC for the corresponding amount.

3.1.8.2 Insurance contracts measured other than PAA - Initial and Subsequent Measurement

The Group measures a group of contracts on initial recognition as the sum of the expected fulfilment cash flows within the contract boundary and the contractual service margin representing the unearned profit in the contracts relating to services that will be provided under the contracts.

Fulfilment cash flows comprise unbiased and probability-weighted estimates of future cash flows, discounted to present value to reflect the time value of money and financial risks, plus a risk adjustment for non-financial risk.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.8 Measurement (continued)

3.1.8.2 Insurance contracts measured other than PAA - Initial and Subsequent Measurement (continued)

The Group's objective in estimating future cash flows is to determine the expected value, or the probability weighted mean, of the full range of possible outcomes, considering all reasonable and supportable information available at the reporting date without undue cost or effort. The Group estimates future cash flows considering a range of scenarios which have commercial substance and give a good representation of possible outcomes. The cash flows from each scenario are probability-weighted and discounted using current assumptions.

When estimating future cash flows, the Group includes all cash flows that are within the contract boundary including:

- Premiums and related cash flows
- Claims and benefits, including reported claims not yet paid and expected future claims
- Payments to policyholders resulting from embedded surrender value options
- An allocation of insurance acquisition cash flows attributable to the portfolio to which the contract belongs
- Claims handling costs
- Policy administration and maintenance costs, including recurring commissions that are expected to be paid to intermediaries
- An allocation of fixed and variable overheads directly attributable to fulfilling insurance contracts
- Transaction-based taxes
- Costs incurred for performing investment activities that enhance insurance coverage benefits for the policyholder
- Costs incurred for providing investment-related service and investment-return service to policyholders
- Other costs specifically chargeable to the policyholder under the terms of the contract

The Group updates its estimates at the end of each reporting period using all newly available information, as well as historic evidence and information about trends. The Group determines its current expectations of probabilities of future events occurring at the end of the reporting period. In developing new estimates, the Group considers the most recent experience and earlier experience, as well as other information.

The measurement of fulfilment cash flows includes insurance acquisition cash flows which are allocated as a portion of premium to profit or loss (through insurance revenue) over the period of the contract in a systematic and rational way on the basis of the passage of time.

Subsequent measurement:

The CSM at the end of the reporting period represents the profit in the group of insurance contracts that has not yet been recognised in profit or loss, because it relates to future service to be provided.

For a group of insurance contracts the carrying amount of the CSM of the group at the end of the reporting period equals the carrying amount at the beginning of the reporting period adjusted, as follows:

- The effect of any new contracts added to the group
- For contracts measured under the GMM, interest accreted on the carrying amount of the CSM during the reporting period, measured at the discount rates at initial recognition
- The changes in fulfilment cash flows relating to future service, except to the extent that:
- Such increases in the fulfilment cash flows exceed the carrying amount of the CSM, giving rise to a loss; or
- Such decreases in the fulfilment cash flows are allocated to the loss component of the liability for remaining coverage.
- The effect of any currency exchange differences on the CSM
- The amount recognised as insurance revenue because of the transfer of insurance contract services in the period, determined by the allocation of the CSM remaining at the end of the reporting period (before any allocation) over the current and remaining coverage period.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.8 Measurement (continued)

3.1.8.2 Insurance contracts measured other than PAA - Initial and Subsequent Measurement (continued)

Subsequent measurement (continued):

For direct participating contracts measured under the VFA, the Group adjusts the CSM for the change in the amount of the Groups share of the fair value of the underlying items and changes in fulfilment cash flows that relate to future services, except to the extent that:

- a decrease in the amount of the Group's share of the fair value of the underlying items, or an increase in the fulfilment cash flows that relate to future services, exceeds the carrying amount of the CSM, giving rise to a loss in profit or loss (included in insurance service expenses) and creating a loss component; or
- an increase in the amount of the Group's share of the fair value of the underlying items, or a decrease in the fulfilment cash flows that relate to future services, is allocated to the loss component, reversing losses previously recognised in profit or loss (included in insurance service expenses).
- The changes in fulfilment cash flows relating to future service that adjust the CSM comprise of:
- Experience adjustments that arise from the difference between the premium receipts (and any related cash flows such as insurance acquisition cash flows and insurance premium taxes) and the estimate, at the beginning of the period, of the amounts expected. Differences related to premiums received (or due) related to current or past services are recognised immediately in profit or loss while differences related to premiums received (or due) for future services are adjusted against the CSM
- Changes in estimates of the present value of future cash flows in the liability for remaining coverage. For contracts measured under the GMM these changes exclude those relating to the time value of money and changes in financial risk (recognised in the consolidated condensed statement of profit or loss rather than adjusting the CSM)
- Differences between any investment component expected to become payable in the period and the actual investment component that becomes payable in the period. Those differences are determined by comparing (i) the actual investment component that becomes payable in the period with (ii) the payment in the period that was expected at the start of the period plus any insurance finance income or expenses related to that expected payment before it becomes payable.
- Changes in the risk adjustment for non-financial risk that relate to future service.

For direct participating contracts measured under the VFA changes in fulfilment cash flows that relate to future services and adjust the CSM are measured at current discount rates and include the changes in the effect of the time value of money and financial risks that do not arise from underlying items.

Where, during the coverage period, a group of insurance contracts becomes onerous, the Group recognises a loss in profit or loss for the net outflow, resulting in the carrying amount of the liability for the group being equal to the fulfilment cash flows. A loss component is established by the Group for the liability for remaining coverage for such onerous group depicting the losses recognised.

The Group measures the carrying amount of a group of insurance contracts at the end of each reporting period as the sum of: (i) the liability for remaining coverage comprising fulfilment cash flows related to future service allocated to the group at that date and the CSM of the group at that date; and (ii) the liability for incurred claims for the Group comprising the fulfilment cash flows related to past service allocated to the group at that date.

3.1.8.3 Reinsurance contracts held

Reinsurance contracts held are accounted for applying IFRS 17 when they meet the definition of an insurance contract. This includes the condition that the contract must transfer significant insurance risk.

Reinsurance contracts transfer significant insurance risk only if they transfer to the reinsurer substantially all the insurance risk relating to the reinsured portions of the underlying insurance contracts, even if a reinsurance contract does not expose the issuer (reinsurer) to the possibility of a significant loss.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.8 Measurement (continued)

3.1.8.3 Reinsurance contracts held (continued)

Portfolios of reinsurance contracts held are assessed for aggregation separately from portfolios of insurance contracts issued. Applying the grouping requirements to reinsurance contracts held, the Group aggregates reinsurance contracts held concluded within a calendar year (annual cohorts) into groups of (i) contracts for which there is a net gain at initial recognition, if any; (ii) contracts for which at initial recognition there is no significant possibility of a net gain arising subsequently; and (iii) remaining contracts in the portfolio, if any.

A group of reinsurance contracts held is recognised as follows:

- If the reinsurance contracts provide proportionate coverage, the date the Group initially recognizes any underlying insurance contracts (onerous or not).
- In all other cases, at the beginning of the coverage period of the group of reinsurance contracts. However, if the Group recognises an onerous group of underlying insurance contracts on an earlier date and the related reinsurance contract was entered into before that earlier date, then the group of reinsurance contracts is recognised on that earlier date.

Cash flows are within the contract boundary if they arise from substantive rights and obligations that exist during the reporting period in which the Group is compelled to pay amounts to the reinsurer or has a substantive right to receive services from the reinsurer.

A substantive right to receive services from the reinsurer shall end when the reinsurer:

- has the practical ability to reassess the risks transferred to it and can set a price or level of benefits that fully reflects those reassessed risks; or
- has a substantive right to terminate the coverage

The Group measures its reinsurance assets for a group of reinsurance contracts that it holds on the same basis as insurance contracts that it issues. However, they are adapted to reflect the features of reinsurance contracts held that differ from insurance contracts issued, for example the generation of expenses or reduction in expenses rather than revenue.

Where the Group recognises a loss on initial recognition of an onerous group of underlying insurance contracts or when further onerous underlying insurance contracts are added to a group, the Group establishes a loss-recovery component of the asset for remaining coverage for a group of reinsurance contracts held depicting the recovery of losses. The Group calculates the loss-recovery component by multiplying the loss recognised on the underlying insurance contracts and the percentage of claims on the underlying insurance contracts the Group expects to recover from the group of reinsurance contracts held. The Group uses a systematic and rational method to determine the portion of losses recognised on the group to insurance contracts covered by the group of reinsurance contracts held where some contracts in the underlying group are not covered by the group of reinsurance contracts held. The loss-recovery component adjusts the carrying amount of the asset for remaining coverage.

3.1.8.4 Modification and derecognition

The Group derecognises insurance contracts when:

- The rights and obligations relating to the contract are extinguished (i.e., discharged, cancelled or expired); or
- The contract is modified such that the modification results in a change in the measurement model, or the applicable standard for measuring a component of the contract. In such cases, the Group derecognises the initial contract and recognises the modified contract as a new contract

When a modification is not treated as a derecognition, the Group recognises amounts paid or received for the modification with the contract as an adjustment to the relevant liability for remaining coverage.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.8 Measurement (continued)

3.1.8.5 Insurance Acquisition Cash Flows

The Group includes insurance acquisition cash flows in the measurement of a group of insurance contracts if they are directly attributable to either the individual contracts in a group, the group itself or the portfolio of insurance contracts to which the group belongs. The Group estimates, at a portfolio level, insurance acquisition cash flows not directly attributable to the group but directly attributable to the portfolio. The Group then allocates them to the group of newly written and renewed contracts on a systematic and rational basis.

At each reporting date, the Group reviews the carrying amounts of the asset for insurance acquisition cash flows to determine whether there is an indication that the asset has suffered an impairment. If any such indication exists, the Group adjusts the carrying amount of the asset so that the carrying amount of the asset does not exceed the expected net cash inflow for the associated future groups of contracts. An impairment loss is recognised in profit or loss for the difference.

3.1.9 Insurance operations

Insurance revenue

The insurance revenue for the period is the amount of expected premium receipts (excluding any investment component) allocated to the period. The Company allocates the expected premium receipts to each period of insurance contract services on the basis of the passage of time. But if the expected pattern of release of risk during the coverage period differs significantly from the passage of time, then the allocation is made on the basis of the expected timing of incurred insurance service expenses.

The Company changes the basis of allocation between the two methods above as necessary, if facts and circumstances change. The change is accounted for prospectively as a change in accounting estimate. For the periods presented, all revenue has been recognised on the basis of the passage of time.

Loss components

The Company assumes that no contracts are onerous at initial recognition unless facts and circumstances indicate otherwise. Where this is not the case, and if at any time during the coverage period, the facts and circumstances indicate that a group of insurance contracts is onerous, the Company establishes a loss component as the excess of the fulfilment cash flows that relate to the remaining coverage of the group over the carrying amount of the liability for remaining coverage of the group as determined. Accordingly, by the end of the coverage period of the group of contracts the loss component will be zero.

Where the Company recognises a loss on initial recognition of an onerous group of underlying insurance contracts, or when further onerous underlying insurance contracts are added to a group, the Company establishes a loss-recovery component of the asset for remaining coverage for a group of reinsurance contracts held depicting the expected recovery of the losses.

A loss-recovery component is subsequently reduced to zero in line with reductions in the onerous group of underlying insurance contracts in order to reflect that the loss-recovery component shall not exceed the portion of the carrying amount of the loss component of the onerous group of underlying insurance contracts that the entity expects to recover from the group of reinsurance contracts held.

Insurance finance income and expense

Insurance finance income or expenses comprise the change in the carrying amount of the group of insurance contracts arising from:

- The effect of the time value of money and changes in the time value of money; and
- The effect of financial risk and changes in financial risk.

The Group elects not to disaggregate the insurance finance income or expenses and present wholly in the profit or loss. The impact of changes in market interest rates on the value of the insurance assets and liabilities are reflected in profit or loss in order to minimise accounting mismatches between the accounting for financial assets and insurance assets and liabilities.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.9 Insurance operations (continued)

Net income or expense from reinsurance contracts held

The Group presents the net on the face of the statement of profit or loss and other comprehensive income, the amounts expected to be recovered from reinsurers, and an allocation of the reinsurance premiums paid. The Company treats reinsurance cash flows that are contingent on claims on the underlying contracts as part of the claims that are expected to be reimbursed under the reinsurance contract held and excludes investment components and commissions from an allocation of reinsurance premiums presented on the face of the statement of profit or loss.

3.1.10 Significant judgements and estimates

Assessment of significance of insurance risk:

The Group applies its judgement in assessing whether a contract transfers to the issuer significant insurance risk. A contract transfers significant insurance risk only if an insured event could cause the Group to pay additional amounts that are significant in any single scenario and only if there is a scenario that has commercial substance in which the issuer has a possibility of a loss on a present value basis upon an occurrence of the insured event, regardless of whether the insured event is extremely unlikely.

Risk adjustment for non-financial risk

The risk adjustment for non-financial risk is the compensation that the Group requires for bearing the uncertainty about the amount and timing of the cash flows of groups of insurance contracts. The risk adjustment reflects an amount that an insurer would rationally pay to remove the uncertainty that future cash flows will exceed the expected value amount.

The Group has estimated the risk adjustment using a confidence level (probability of sufficiency) approach at the 75th percentile. That is, the Group has assessed its indifference to uncertainty for all product lines (as an indication of the compensation that it requires for bearing non-financial risk) as being equivalent to the 75th percentile confidence level less the mean of an estimated probability distribution of the future cash flows. The Group has estimated the probability distribution of the future cash flows, and the additional amount above the expected present value of future cash flows required to meet the target percentiles.

Discount rates

Insurance contract liabilities are calculated by discounting expected future cash flows at a risk free rate, plus an illiquidity premium where applicable. The Group uses the bottom-up approach to derive the discount rates based on liquid risk-free yield curve.

Contractual service margin (CSM)

The CSM is a component of the asset or liability for the group of insurance contracts that represents the unearned profit the Group will recognise as it provides services in the future. An amount of the CSM for a group of insurance contracts is recognised in profit or loss as insurance revenue in each period to reflect the insurance contract services provided under the group of insurance contracts in that period.

The amount is determined by:

- Identifying the coverage units in the group
- Allocating the CSM at the end of the period (before recognising any amounts in profit or loss to reflect the insurance contract services provided in the period) equally to each coverage unit provided in the current period and expected to be provided in the future

The number of coverage units in a group is the quantity of insurance contract services provided by the contracts in the group, determined by considering the quantity of the benefits provided and the expected coverage period. For groups of unit linked life insurance contracts, the coverage unit is the unit reserve while for other long term life groups of contracts, the coverage unit is the premiums. The total coverage units of each group of insurance contracts are reassessed at the end of each reporting period to adjust for the reduction of remaining coverage for claims paid, expectations of lapses and cancellation of contracts in the period. They are then allocated based on probability-weighted average duration of each coverage unit provided in the current period and expected to be provided in the future.

3 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

3.1 Changes in accounting policies for insurance contracts issued and reinsurance contracts held (continued)

3.1.10 Significant judgements and estimates (continued)

Contractual service margin (CSM) (continued)

For reinsurance contracts issued, the number of coverage units in a group reflects the expected pattern of underwriting of the underlying contracts because the level of service provided depends on the number of underlying contracts in force. The quantity of benefit is the maximum probable loss. The remaining coverage units are reassessed at the end of each reporting period to reflect the expected pattern of service and the expectations of lapses and cancellations of contracts. The remaining coverage is allocated based on probability weighted average duration of each coverage unit provided in the current period and expected to be provided in the future.

Onerous groups

The Group uses significant judgement to determine at what level of granularity the Group has reasonable and supportable information that is sufficient to conclude that all contracts within a set are sufficiently homogeneous and will be allocated to the same group without performing an individual contract assessment.

Time value of money

The Group adjusts the carrying amount of the insurance contracts liabilities and reinsurance contracts assets to reflect the time value of money and the effect of financial risk using discount rates that reflect the characteristics of the cash flows of the group of contracts.

Liability for incurred claims

The ultimate cost of outstanding claims is estimated by using a range of standard actuarial claims projection techniques, such as Chain Ladder and Initial Expected Loss Ratio methods.

The main assumption underlying these techniques is that a Group's past claims development experience can be used to project future claims development and hence ultimate claims costs. These methods extrapolate the development of paid and incurred losses, average costs per claim (including claims handling costs), and claim numbers based on the observed development of earlier years and expected loss ratios. Large claims are usually separately addressed, either by being reserved at the face value of loss adjuster estimates or separately projected in order to reflect their future development. In most cases, no explicit assumptions are made regarding future rates of claims inflation or loss ratios. Instead, the assumptions used are those implicit in the historical claims development data on which the projections are based. Additional qualitative judgement is used to assess the extent to which past trends may not apply in future, (e.g., to reflect one-off occurrences as well as internal factors such as portfolio mix, policy features and claims handling procedures) in order to arrive at the estimated ultimate cost of claims. The Group also has the right to pursue third parties for payment of some or all costs. Estimates of salvage recoveries and subrogation reimbursements are considered as an allowance in the measurement of ultimate claims costs.

4 BANK BALANCES AND SHORT-TERM DEPOSITS

	30 June 2023 (Reviewed) QR ('000)	31 December 2022 (Audited) QR ('000)
Cash at banks	38,995	37,804
Short-term deposits (including time deposits)	589,669	537,163
Cash and cash equivalents	628,664	574,967

The expected credit losses relating to short term deposits amounted to QR 50 thousand (31 December 2022: QR 32 thousand) and were in stage 1.

5 FINANCIAL INVESTMENTS

	<i>30 June 2023 (Reviewed) QR ('000)</i>	<i>31 December 2022 (Audited) QR ('000)</i>
Financial investments at fair value through other comprehensive income (FVOCI) (i)	647,660	715,139
Financial investments at fair value through profit or loss (FVTPL)	60,498	58,547
	708,158	773,686
Investments held on behalf of policyholders' unit linked products (FVTPL)	3,109	1,251
	711,267	774,937

Expected Credit losses of debt securities measured at FVOCI amounted to QR 841 thousand at 30 June 2023 (31 December 2022: QR 1,095 thousand).

6 INSURANCE AND REINSURANCE CONTRACTS ASSETS AND LIABILITIES**6.1 Reconciliation of the liability for remaining coverage and the liability for incurred claims**

	<i>(Reviewed)</i>				
	<i>Liabilities for remaining coverage</i>		<i>Liabilities for incurred claims</i>		<i>Total</i>
	<i>Excluding loss component</i>	<i>Loss component</i>	<i>Estimates of the present value of future cash flows</i>	<i>Risk adjustment</i>	
	<i>QR ('000)</i>	<i>QR ('000)</i>	<i>QR ('000)</i>	<i>QR ('000)</i>	<i>QR ('000)</i>
Opening insurance contract liabilities	(419,057)	-	777,373	11,040	369,356
Opening insurance contract assets	-	-	-	-	-
Net insurance contract (assets)/liabilities as at 1 January 2023	(419,057)	-	777,373	11,040	369,356
Insurance revenue	(527,109)	-	-	-	(527,109)
Insurance service expenses					
Incurred claims and other directly attributable expenses	-	-	378,646	6,051	384,697
Amortisation of insurance acquisition cash flows	16,985	-	-	-	16,985
Changes to liabilities for incurred claims	-	-	76,515	(6,039)	70,476
Insurance service result	(510,124)	-	455,161	12	(54,951)
Insurance finance expense	-	-	12,348	178	12,526
Total changes in the statement of comprehensive income	(510,124)	-	467,509	190	(42,425)
Cash flows					
Premiums received	555,907	-	-	-	555,907
Claims and other directly attributable expenses paid	-	-	(448,117)	-	(448,117)
Insurance acquisition cash flows	(21,097)	-	-	-	(21,097)
Total cash flows	534,810	-	(448,117)	-	86,693
Net insurance contract (assets)/liabilities as at 30 June 2023	(394,371)	-	796,765	11,230	413,624
Closing insurance contract liabilities	(394,371)	-	796,765	11,230	413,624
Closing insurance contract assets	-	-	-	-	-
Net insurance contract (assets)/liabilities as at 30 June 2023	(394,371)	-	796,765	11,230	413,624

6 INSURANCE AND REINSURANCE CONTRACTS ASSETS AND LIABILITIES (CONTINUED)

6.1 Reconciliation of the liability for remaining coverage and the liability for incurred claims (continued)

	<i>Liabilities for remaining coverage</i>		<i>Restated Liabilities for incurred claims</i>		<i>Total</i>
	<i>Excluding loss component QR ('000)</i>	<i>Loss component QR ('000)</i>	<i>Estimates of the present value of future cash flows QR ('000)</i>	<i>Risk adjustment QR ('000)</i>	<i>QR ('000)</i>
Opening insurance contract liabilities	(329,043)	-	699,365	11,026	381,348
Opening insurance contract assets	-	-	-	-	-
Net insurance contract (assets)/liabilities as at 1 January 2022	(329,043)	-	699,365	11,026	381,348
Insurance revenue	(1,215,315)	-	-	-	(1,215,315)
Insurance service expenses					
Incurred claims and other directly attributable expenses	-	-	736,039	7,331	743,370
Amortisation of insurance acquisition cash flows	58,432	-	-	-	58,432
Changes to liabilities for incurred claims	-	-	351,036	(7,255)	343,781
Insurance service result	(1,156,883)	-	1,087,075	76	(69,732)
Insurance finance expense/(income)	-	-	(6,980)	(62)	(7,042)
Total changes in the statement of comprehensive income	(1,156,883)	-	1,080,095	14	(76,774)
Cash flows					
Premiums received	1,101,149	-	-	-	1,101,149
Claims and other directly attributable expenses paid	-	-	(1,002,087)	-	(1,002,087)
Insurance acquisition cash flows	(34,280)	-	-	-	(34,280)
Total cash flows	1,066,869	-	(1,002,087)	-	64,782
Net insurance contract (assets)/liabilities as at 31 December 2022	(419,057)	-	777,373	11,040	369,356
Closing insurance contract liabilities	(419,057)	-	777,373	11,040	369,356
Closing insurance contract assets	-	-	-	-	-
Net insurance contract (assets)/liabilities as at 31 December 2022	(419,057)	-	777,373	11,040	369,356

6 INSURANCE AND REINSURANCE CONTRACTS ASSETS AND LIABILITIES (CONTINUED)

6.2 Reconciliation of changes in reinsurance contracts held by remaining coverage and the amount recoverable for incurred claims

	(Reviewed)				
	Assets for remaining coverage		Amounts recoverable on incurred claims		Total
	Excluding loss component	Loss component	Estimates of the present value of future cash flows	Risk adjustment	
	QR ('000)	QR ('000)	QR ('000)	QR ('000)	QR ('000)
Opening reinsurance contract liabilities	-	-	-	-	-
Opening reinsurance contract assets	(612,384)	-	644,548	3,897	36,061
Net reinsurance contract assets/(liabilities) as at 1 January 2023	(612,384)	-	644,548	3,897	36,061
An allocation of reinsurance premiums	(27,517)	-	-	-	(27,517)
Amounts recoverable from reinsurers for incurred claims					
Amounts recoverable for incurred claims and other expenses	-	-	22,352	877	23,229
Loss-recovery on onerous underlying contracts and adjustments	-	-	-	-	-
Changes to amounts recoverable for incurred claims	-	-	(17,518)	(1,449)	(18,967)
Net income/(expense) from reinsurance contracts held	(27,517)	-	4,834	(572)	(23,255)
Reinsurance finance income	-	-	10,969	65	11,034
Total changes in the statement of profit or loss	(27,517)	-	15,803	(507)	(12,221)
Cash flows					
Premiums paid net of ceding commissions	27,835	-	-	-	27,835
Recoveries from reinsurance	-	-	(25,435)	-	(25,435)
Total cash flows	27,835	-	(25,435)	-	2,400
Net reinsurance contract assets/(liabilities) as at 30 June 2023	(612,066)	-	634,916	3,390	26,240
Closing reinsurance contract liabilities	(352,229)	-	343,871	91	(8,267)
Closing reinsurance contract assets	(259,837)	-	291,045	3,299	34,507
Net reinsurance contract assets/(liabilities) as at 30 June 2023	(612,066)	-	634,916	3,390	26,240

6 INSURANCE AND REINSURANCE CONTRACTS ASSETS AND LIABILITIES (CONTINUED)

6.2 Reconciliation of changes in reinsurance contracts held by remaining coverage and the amount recoverable for incurred claims

	<i>Assets for remaining coverage</i>		<i>Restated Amounts recoverable on incurred claims</i>		<i>Total</i>
	<i>Excluding loss component QR ('000)</i>	<i>Loss component QR ('000)</i>	<i>Estimates of the present value of future cash flows QR ('000)</i>	<i>Risk adjustment QR ('000)</i>	<i>QR ('000)</i>
Opening reinsurance contract liabilities	-	-	-	-	-
Opening reinsurance contract assets	(587,625)	-	618,692	4,115	35,182
Net reinsurance contract assets/(liabilities) as at 1 January 2022	(587,625)	-	618,692	4,115	35,182
An allocation of reinsurance premiums	(129,311)	-	-	-	(129,311)
Amounts recoverable from reinsurers for incurred claims					
Amounts recoverable for incurred claims and other expenses	-	-	135,287	1,955	137,242
Loss-recovery on onerous underlying contracts and adjustments	-	-	-	-	-
Changes to amounts recoverable for incurred claims	-	-	(25,435)	(2,143)	(27,578)
Net income/(expense) from reinsurance contracts held	(129,311)	-	109,852	(188)	(19,647)
Reinsurance finance expense	-	-	(9,091)	(30)	(9,121)
Total changes in the statement of profit or loss	(129,311)	-	100,761	(218)	(28,768)
Cash flows					
Premiums paid net of ceding commissions	104,552	-	-	-	104,552
Recoveries from reinsurance	-	-	(74,905)	-	(74,905)
Total cash flows	104,552	-	(74,905)	-	29,647
Net reinsurance contract assets/(liabilities) as at 31 December 2022	(612,384)	-	644,548	3,897	36,061
Closing reinsurance contract liabilities	-	-	-	-	-
Closing reinsurance contract assets	(612,384)	-	644,548	3,897	36,061
Net reinsurance contract assets/(liabilities) as at 31 December 2022	(612,384)	-	644,548	3,897	36,061

7 RELATED PARTY DISCLOSURES

The following tables provide the total amount of transactions that have been entered into with related parties for the relevant financial period.

Related parties represent major shareholders, directors and key management personnel of the Group, jointly controlled or significantly influenced by such parties. Pricing policies and terms of these transactions are approved by the Group's management.

7.1 Transactions carried out with related parties

These represent transactions with related parties, i.e. parties are considered to be related if one party has the ability to control the other party or exercise significant influence over the other party in making financial and operating decisions and directors of the Group.

	<i>For the six months period ended 30 June 2023 (Reviewed) QR ('000)</i>	<i>For the six months period ended 30 June 2022 (Reviewed) QR ('000)</i>
Significant Investor		
Premiums	<u>4,183</u>	<u>15,589</u>
Claims	<u>3,349</u>	<u>71,429</u>
Dividend paid	<u>10,938</u>	<u>19,250</u>
Affiliate Companies		
Premiums	<u>2,569</u>	<u>13,634</u>
Purchase of services	<u>6,308</u>	<u>7,119</u>
Claims	<u>7,723</u>	<u>10,768</u>

7.2 Related party balances

Balances of related parties included in the interim financial information are as follows:

<i>(a) Due from related parties</i>	<i>30 June 2023 (Reviewed) QR ('000)</i>	<i>31 December 2022 (Audited) QR ('000)</i>
Significant Investor		
Qatar Insurance Company Q.S.P.C.	356	356
Affiliate Companies		
Kuwait Qatar Insurance Company K.S.C.C.	-	262
Qatar Reinsurance Company Limited	<u>148</u>	<u>-</u>
Total	<u>504</u>	<u>618</u>

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NOTES TO THE INTERIM CONDENSED CONSOLIDATED FINANCIAL STATEMENTS

For the six months period ended 30 June 2023

7 RELATED PARTY DISCLOSURES (CONTINUED)

7.2 Related party balances (continued)

(b) Due to related parties

	30 June 2023 (Reviewed) QR ('000)	31 December 2022 (Audited) QR ('000)
Significant Investor		
Qatar Insurance Company Q.S.P.C.	76,675	104,562
Affiliate Companies		
Kuwait Qatar Insurance Company K.S.C.C.	801	-
Qatar Insurance Group W.L.L.	15,333	18,174
Epicure Investment Management L.L.C.	1,823	1,896
Anoud Technologies L.L.C.	4,214	1,479
Oman Qatar Insurance Company S.A.O.G.	22,588	23,165
QIC Group Services L.L.C.	269	268
Qatar Insurance Real Estate Company W.L.L.	16,520	15,047
Total	138,223	164,591

Outstanding related party balances at the reporting date are unsecured, interest free and payable on demand. No impairment losses relating to these balances were recognized during the period (2022: Nil).

Compensation of key management personnel

The remuneration of directors and other members of key management during the period were as follows:

	For the six months period ended 30 June 2023 (Reviewed) QR ('000)	For the six months period ended 30 June 2022 (Reviewed) QR ('000)
Salaries and other short-term benefits	3,532	3,173
End of service benefits	82	81
	3,614	3,254

8 SHARE CAPITAL AND LEGAL RESERVE

8.1 Share Capital

	Authorised, issued and fully paid up	
	30 June 2023 (Reviewed)	31 December 2022 (Audited)
Authorised, issued and fully paid up		
Share capital (QR'000)	350,000	350,000
Number of shares of QR 1 each	350,000,000	350,000,000

8 SHARE CAPITAL (CONTINUED)

8.2 Dividends

The Shareholders in the Annual General Meeting held on 19 March 2023, approved a cash dividend of QR 0.125 per share, aggregating to QR 43,750 thousand in line with the recommendation of the Board of Directors for the year 2022 (2022: QAR 0.22 per share, aggregating to QR 77,000 thousand).

8.3 Legal reserve

Legal reserve is computed in accordance with Qatar Central Bank (QCB) regulations, applicable provisions of Qatar Commercial Companies' Law and the Articles of Association of the Company, 10% of the profit for the year is required to be transferred to a legal reserve, until such reserve balance equals 100% of the paid-up share capital. The reserve is not normally available for distribution, except in the circumstances stipulated by the above-mentioned law.

9 SEGMENT INFORMATION

For management reporting purposes, the Group is organised into two business segments - Medical and Life insurance. These sectors are the basis on which the Group reports its operating sector information. No operating segments have been aggregated in arriving at the reportable segment of the Group.

Segment information for the three months period ended 30 June 2023 (Reviewed)

	<i>Medical QR ('000)</i>	<i>Life QR ('000)</i>	<i>Total insurance QR ('000)</i>	<i>Investments /other income QR ('000)</i>	<i>Unallocated expenses QR ('000)</i>	<i>Total QR ('000)</i>
Insurance service result from insurance contracts issued	7,586	20,919	28,505	-	-	28,505
Net expense from reinsurance contracts held	(5,219)	(7,131)	(12,350)	-	-	(12,350)
Insurance service result	2,367	13,788	16,155	-	-	16,155
Net investment income	-	-	-	14,776	-	14,776
Net insurance financial result	(388)	(19)	(407)	-	-	(407)
General and administrative expenses	-	-	-	-	(3,733)	(3,733)
Depreciation	-	-	-	-	(232)	(232)
Income tax reversal	-	-	-	-	127	127
Profit after tax	1,979	13,769	15,748	14,776	(3,838)	26,686

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9 SEGMENT INFORMATION (CONTINUED)

Segment information for the three months period ended 30 June 2022 (Restated)

	<i>Medical QR ('000)</i>	<i>Life QR ('000)</i>	<i>Total insurance QR ('000)</i>	<i>Investments /other income QR ('000)</i>	<i>Unallocated expenses QR ('000)</i>	<i>Total QR ('000)</i>
Insurance service result from insurance contracts issued	(17,411)	19,065	1,654	-	-	1,654
Net expense from reinsurance contracts held	38,546	(39,449)	(903)	-	-	(903)
Insurance service result	21,135	(20,384)	751	-	-	751
Net investment income	-	-	-	9,071	-	9,071
Net insurance financial result	(63)	(551)	(614)	-	-	(614)
General and administrative expenses	-	-	-	-	(2,774)	(2,774)
Depreciation	-	-	-	-	(175)	(175)
Income tax reversal	-	-	-	-	1,892	1,892
Profit after tax	21,072	(20,935)	137	9,071	(1,057)	8,151

Segment information for the six months period ended 30 June 2023 (Reviewed)

	<i>Medical QR ('000)</i>	<i>Life QR ('000)</i>	<i>Total insurance QR ('000)</i>	<i>Investments /other income QR ('000)</i>	<i>Unallocated expenses QR ('000)</i>	<i>Total QR ('000)</i>
Insurance service result from insurance contracts issued	17,108	37,843	54,951	-	-	54,951
Net expense from reinsurance contracts held	(10,872)	(12,383)	(23,255)	-	-	(23,255)
Insurance service result	6,236	25,460	31,696	-	-	31,696
Net investment income	-	-	-	25,354	-	25,354
Net insurance financial result	(2,371)	879	(1,492)	-	-	(1,492)
General and administrative expenses	-	-	-	-	(8,418)	(8,418)
Depreciation	-	-	-	-	(432)	(432)
Income tax reversal	-	-	-	-	7	7
Profit after tax	3,865	26,339	30,204	25,354	(8,843)	46,715

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NOTES TO THE INTERIM CONDENSED CONSOLIDATED FINANCIAL STATEMENTS

For the six months period ended 30 June 2023

9 SEGMENT INFORMATION (CONTINUED)

Segment information for the six months period ended 30 June 2022 (Restated)

	<i>Medical QR ('000)</i>	<i>Life QR ('000)</i>	<i>Total insurance QR ('000)</i>	<i>Investments /other income QR ('000)</i>	<i>Unallocated expenses QR ('000)</i>	<i>Total QR ('000)</i>
Insurance service result from insurance contracts issued	(18,435)	28,531	10,096	-	-	10,096
Net expense from reinsurance contracts held	15,490	(5,169)	10,321	-	-	10,321
Insurance service result	(2,945)	23,362	20,417	-	-	20,417
Net investment income	-	-	-	24,772	-	24,772
Net insurance financial result	(610)	(1,333)	(1,943)	-	-	(1,943)
General and administrative expenses	-	-	-	-	(7,387)	(7,387)
Depreciation	-	-	-	-	(386)	(386)
Income tax reversal	-	-	-	-	1,804	1,804
Profit after tax	(3,555)	22,029	18,474	24,772	(5,969)	37,277

Segment statement of financial position

Assets and liabilities of the Group are commonly used across the primary segments.

10 BASIC AND DILUTED EARNINGS PER SHARE

	<i>For the six months period ended 30 June 2023 (Reviewed) QR ('000)</i>	<i>For the six months period ended 30 June 2022 (Restated) QR ('000)</i>
Net profit for the period (QR '000)	46,715	37,277
Weighted average number of ordinary shares	350,000,000	350,000,000
Basic and diluted earnings per share (QR)	0.13	0.11

As the Company has no potential dilutive shares, the diluted EPS is equal to the basic EPS.

11 COMMITMENTS AND CONTINGENT LIABILITIES

	<i>30 June 2023 (Reviewed) QR ('000)</i>	<i>31 December 2022 (Audited) QR ('000)</i>
Bank guarantees	41,693	39,400
	41,693	39,400

12 FAIR VALUE HIERARCHY OF FINANCIAL INSTRUMENTS

The following table shows an analysis of financial instruments recorded at fair value by level of the fair value hierarchy.

The different levels have been defined as follows:

<i>30 June 2023 (Reviewed)</i>	<i>Level 1 (QR '000)</i>	<i>Level 2 (QR '000)</i>	<i>Level 3 (QR '000)</i>	<i>Total (QR '000)</i>
Financial investments at fair value through other comprehensive income (FVOCI)	647,660	-	-	647,660
Financial investments at fair value through profit or loss (FVTPL)	63,607	-	-	63,607
Derivative financial assets	-	11,972	-	11,972
	<u>711,267</u>	<u>11,972</u>	<u>-</u>	<u>723,239</u>
<i>31 December 2022 (Audited)</i>	<i>Level 1 (QR '000)</i>	<i>Level 2 (QR '000)</i>	<i>Level 3 (QR '000)</i>	<i>Total (QR '000)</i>
Financial investments at fair value through other comprehensive income (FVOCI)	715,139	-	-	715,139
Financial investments at fair value through profit or loss (FVTPL)	59,798	-	-	59,798
Derivative financial assets	-	23,891	-	23,891
	<u>774,937</u>	<u>23,891</u>	<u>-</u>	<u>798,828</u>

There were no transfers between Level 1 and Level 2 fair value measurements during the period, and no transfers into or out of Level 3 fair value measurements during the period.