



QUARTERLY STATEMENT

AS OF JUNE 30, 2016
OF THE CONDITION AND AFFAIRS OF THE

Gateway Insurance Company

NAIC Group Code	04795 <small>(Current Period)</small>	04795 <small>(Prior Period)</small>	NAIC Company Code	28339	Employer's ID Number	43-0762309
Organized under the Laws of	Missouri		State of Domicile or Port of Entry	Missouri		
Country of Domicile	United States					
Incorporated/Organized	05/21/1986		Commenced Business	12/01/1986		
Statutory Home Office	1401 S Brentwood Blvd., Ste 100 <small>(Street and Number)</small>		St. Louis, MO, US 63144-1416 <small>(City or Town, State, Country and Zip Code)</small>			
Main Administrative Office	150 Northwest Point Blvd, 3rd Floor <small>(Street and Number)</small>		Elk Grove Village, IL, US 60007 <small>(City or Town, State, Country and Zip Code)</small>		847-472-6700 <small>(Area Code) (Telephone Number)</small>	
Mail Address	150 Northwest Point Blvd, 3rd Floor <small>(Street and Number or P.O. Box)</small>		Elk Grove Village, IL, US 60007 <small>(City or Town, State, Country and Zip Code)</small>			
Primary Location of Books and Records	150 Northwest Point Blvd, 3rd Floor <small>(Street and Number)</small>		Elk Grove Village, IL, US 60007 <small>(City or Town, State, Country and Zip Code)</small>		847-700-8603 <small>(Area Code) (Telephone Number)</small>	
Internet Web Site Address	www.atlas-fin.com					
Statutory Statement Contact	Paul Anthony Romano <small>(Name)</small>		847-700-8603 <small>(Area Code) (Telephone Number) (Extension)</small>			
	promano@atlas-fin.com <small>(E-Mail Address)</small>		847-264-2716 <small>(Fax Number)</small>			

OFFICERS

Name	Title	Name	Title
Scott David Wollney	President, CEO	Paul Anthony Romano	VP, CFO, Treasurer
Leslie Patterson DiMaggio	Secretary, VP Operations		

OTHER OFFICERS

Bruce Wayne Giles	VP Product Development & Underwriting	Joseph Raymond Shugrue	VP Claims
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DIRECTORS OR TRUSTEES

Daniel Joseph Boxell	Leslie Patterson DiMaggio	Bruce Wayne Giles	Serena Marie Lintker
Zenovia Diane Love	Paul Anthony Romano	Joseph Raymond Shugrue	Lyn Dianne Ward
Scott David Wollney			

State of Illinois

County of Cook

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Scott David Wollney President, CEO	Paul Anthony Romano VP, CFO, Treasurer	Leslie Patterson DiMaggio Secretary, VP Operations

a. Is this an original filing? Yes [X] No []

b. If no:
1. State the amendment number
2. Date filed
3. Number of pages attached

Subscribed and sworn to before me this
12TH day of AUGUST, 2016

Imelda Bayani, Senior Staff Accountant
April 3, 2017



STATEMENT AS OF JUNE 30, 2016 OF THE Gateway Insurance Company

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	26,792,646	0	26,792,646	27,498,140
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens	0		0	0
3.2 Other than first liens	0		0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$ encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances)	0	0	0	0
5. Cash (\$2,149,541), cash equivalents (\$0) and short-term investments (\$0)	2,149,541	0	2,149,541	3,669,104
6. Contract loans (including \$ premium notes)	0		0	0
7. Derivatives	0		0	0
8. Other invested assets	445,690	0	445,690	205,389
9. Receivables for securities	0		0	0
10. Securities lending reinvested collateral assets	0		0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	29,387,877	0	29,387,877	31,372,632
13. Title plants less \$ charged off (for Title insurers only)	0		0	0
14. Investment income due and accrued	138,335	0	138,335	168,484
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	629,382	0	629,382	3,789,328
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	24,838,670	0	24,838,670	25,033,713
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)	0		0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	5,094,754		5,094,754	1,798,106
16.2 Funds held by or deposited with reinsured companies	0		0	0
16.3 Other amounts receivable under reinsurance contracts	0		0	0
17. Amounts receivable relating to uninsured plans	0		0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	102,423		102,423	50,396
18.2 Net deferred tax asset	4,130,330	1,923,317	2,207,013	2,150,576
19. Guaranty funds receivable or on deposit	2,052		2,052	2,052
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0		0	0
23. Receivables from parent, subsidiaries and affiliates	0		0	156
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other-than-invested assets	302,527	260,325	42,201	32,558
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	64,626,349	2,183,643	62,442,706	64,398,002
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	64,626,349	2,183,643	62,442,706	64,398,002
DETAILS OF WRITE-INS				
1101.			0	0
1102.			0	0
1103.			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Receivable from pools	36,001		36,001	26,358
2502. State income tax receivable	6,200		6,200	6,200
2503. Prepaid expenses	224,749	224,749	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	35,576	35,576	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	302,527	260,325	42,201	32,558

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ 4,015,213)	10,480,451	12,108,868
2. Reinsurance payable on paid losses and loss adjustment expenses	1,835,016	1,511,841
3. Loss adjustment expenses	3,738,187	3,994,893
4. Commissions payable, contingent commissions and other similar charges	2,897,902	2,983,177
5. Other expenses (excluding taxes, licenses and fees)	308,623	576,235
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	256,068	375,223
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	0	0
7.2 Net deferred tax liability	0	0
8. Borrowed money \$ 0 and interest thereon \$	0	0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ 34,214,638 and including warranty reserves of and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	14,360,211	14,115,793
10. Advance premium	0	0
11. Dividends declared and unpaid:		
11.1 Stockholders	0	0
11.2 Policyholders	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions)	6,801,928	9,748,265
13. Funds held by company under reinsurance treaties	800,000	800,000
14. Amounts withheld or retained by company for account of others	46,735	84,455
15. Remittances and items not allocated	10,209	2,707
16. Provision for reinsurance (including \$ certified)	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18. Drafts outstanding	0	0
19. Payable to parent, subsidiaries and affiliates	1,465,328	220,419
20. Derivatives	0	0
21. Payable for securities	0	0
22. Payable for securities lending	0	0
23. Liability for amounts held under uninsured plans	0	0
24. Capital notes \$ and interest thereon \$	0	0
25. Aggregate write-ins for liabilities	(627,050)	(932,417)
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	42,373,607	45,589,459
27. Protected cell liabilities		0
28. Total liabilities (Lines 26 and 27)	42,373,607	45,589,459
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock	3,815,000	3,815,000
31. Preferred capital stock	0	0
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes	3,000,000	3,000,000
34. Gross paid in and contributed surplus	7,434,572	7,434,572
35. Unassigned funds (surplus)	5,819,527	4,558,970
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)	0	0
36.2 shares preferred (value included in Line 31 \$)	0	0
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	20,069,100	18,808,543
38. Totals (Page 2, Line 28, Col. 3)	62,442,706	64,398,002
DETAILS OF WRITE-INS		
2501. Unearned ceding commissions	483,373	459,765
2502. Escheatables	80,049	74,050
2503. Other liability - premium deficiency reserve	3,032	1,765
2598. Summary of remaining write-ins for Line 25 from overflow page	(1,193,504)	(1,467,997)
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	(627,050)	(932,417)
2901.		0
2902.		0
2903.		0
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0
3201.		0
3202.		0
3203.		0
3298. Summary of remaining write-ins for Line 32 from overflow page	0	0
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)	0	0

STATEMENT OF INCOME

	1	2	3
	Current Year	Prior Year	Prior Year Ended
	to Date	to Date	December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 29,946,184)	26,200,469	10,451,188	28,931,163
1.2 Assumed (written \$ 13,291,370)	13,029,212	11,812,009	25,164,740
1.3 Ceded (written \$ 29,991,194)	26,227,739	10,456,792	28,959,962
1.4 Net (written \$ 13,246,360)	13,001,942	11,806,404	25,135,942
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 5,295,239):			
2.1 Direct	9,815,343	2,689,721	6,197,048
2.2 Assumed	5,334,107	4,635,782	9,124,881
2.3 Ceded	9,835,743	2,684,518	6,223,180
2.4 Net	5,313,707	4,640,985	9,098,750
3. Loss adjustment expenses incurred	2,392,810	2,083,547	5,600,434
4. Other underwriting expenses incurred	3,484,963	3,608,233	7,055,219
5. Aggregate write-ins for underwriting deductions	3,671	10,843	11,230
6. Total underwriting deductions (Lines 2 through 5)	11,195,150	10,343,608	21,765,633
7. Net income of protected cells	0	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	1,806,792	1,462,796	3,370,309
INVESTMENT INCOME			
9. Net investment income earned	128,911	232,387	375,557
10. Net realized capital gains (losses) less capital gains tax of \$ 36,482	(14,409)	(69,836)	(99,429)
11. Net investment gain (loss) (Lines 9 + 10)	114,501	162,551	276,127
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 48 amount charged off \$ 84,441)	(84,393)	(27,685)	(113,922)
13. Finance and service charges not included in premiums	42,472	57,268	112,002
14. Aggregate write-ins for miscellaneous income	26,043	23,761	(98,384)
15. Total other income (Lines 12 through 14)	(15,877)	53,344	(100,303)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	1,905,416	1,678,691	3,546,133
17. Dividends to policyholders	0	0	0
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	1,905,416	1,678,691	3,546,133
19. Federal and foreign income taxes incurred	605,241	590,601	1,545,502
20. Net income (Line 18 minus Line 19)(to Line 22)	1,300,175	1,088,090	2,000,631
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	18,808,543	12,893,718	12,893,718
22. Net income (from Line 20)	1,300,175	1,088,090	2,000,631
23. Net transfers (to) from Protected Cell accounts	0	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (46,505)	(86,366)	(51,972)	(61,497)
25. Change in net unrealized foreign exchange capital gain (loss)	0	0	0
26. Change in net deferred income tax	(51,991)	82,084	968,439
27. Change in nonadmitted assets	98,739	437,454	(145,748)
28. Change in provision for reinsurance	0	0	153,000
29. Change in surplus notes	0	3,000,000	3,000,000
30. Surplus (contributed to) withdrawn from protected cells	0	0	0
31. Cumulative effect of changes in accounting principles	0	0	0
32. Capital changes:			
32.1 Paid in	0	0	0
32.2 Transferred from surplus (Stock Dividend)	0	0	0
32.3 Transferred to surplus	0	0	0
33. Surplus adjustments:			
33.1 Paid in	0	0	0
33.2 Transferred to capital (Stock Dividend)	0	0	0
33.3 Transferred from capital	0	0	0
34. Net remittances from or (to) Home Office	0	0	0
35. Dividends to stockholders	0	0	0
36. Change in treasury stock	0	0	0
37. Aggregate write-ins for gains and losses in surplus	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37)	1,260,557	4,555,656	5,914,825
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	20,069,100	17,449,373	18,808,543
DETAILS OF WRITE-INS			
0501. Premium deficiency expense	3,671	10,843	11,230
0502.		0	0
0503.		0	0
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599. TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)	3,671	10,843	11,230
1401. Retroactive reinsurance income/(expense)	26,407		(68,305)
1402. Miscellaneous income	98	21,414	3,990
1403. Fines and penalties	(462)	2,889	(34,068)
1498. Summary of remaining write-ins for Line 14 from overflow page	0	(542)	0
1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	26,043	23,761	(98,384)
3701.		0	0
3702.		0	0
3703.		0	0
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0	0
3799. TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)	0	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance.....	13,655,013	10,059,404	15,005,020
2. Net investment income	199,545	329,799	598,907
3. Miscellaneous income	(15,877)	53,344	(100,303)
4. Total (Lines 1 to 3)	13,838,681	10,442,548	15,503,623
5. Benefit and loss related payments	10,016,320	5,392,504	10,850,844
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	6,437,925	5,779,092	9,623,131
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	693,750	440,000	1,320,000
10. Total (Lines 5 through 9)	17,147,995	11,611,596	21,793,975
11. Net cash from operations (Line 4 minus Line 10)	(3,309,315)	(1,169,048)	(6,290,352)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	6,094,612	3,848,193	13,850,526
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	1	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,094,612	3,848,194	13,850,526
13. Cost of investments acquired (long-term only):			
13.1 Bonds	5,530,703	5,476,784	10,323,180
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	250,000	300,000	300,000
13.6 Miscellaneous applications	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	5,780,703	5,776,784	10,623,180
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	313,910	(1,928,590)	3,227,346
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	3,000,000	3,000,000
16.2 Capital and paid in surplus, less treasury stock.....	0	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied).....	1,475,842	320,064	1,304,439
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	1,475,842	3,320,064	4,304,439
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(1,519,563)	222,426	1,241,433
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	3,669,104	2,427,670	2,427,670
19.2 End of period (Line 18 plus Line 19.1)	2,149,541	2,650,096	3,669,104

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies:

A. Accounting Practices

The accompanying financial statements of Gateway Insurance Company (the Company) have been prepared in conformity with accounting practices prescribed or permitted by the Missouri Department of Insurance.

The Missouri Department of Insurance recognizes only statutory accounting practices (SAP) prescribed or permitted by the State of Missouri for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Missouri Insurance Law. The National Association of Insurance Commissioners’ (NAIC) *Accounting Practices and Procedures manual*, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Missouri.

The Missouri Department of Insurance has adopted certain prescribed accounting practices that differ from those found in the NAIC SAP. The company did not utilize any of the Missouri prescribed or permitted accounting practices that depart from NAIC SAP during 2016 or 2015.

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Missouri is shown below:

NET INCOME		State of Domicile	2016	2015
(1)	Missouri Company state basis (page 4, line 20, columns 1 & 3)	MO	\$ 1,300,175	\$ 2,000,631
(2)	State prescribed practices that increase/(decrease) NAIC SAP:	MO	\$ 0	\$ 0
(3)	NAIC SAP (1-2=3)	MO	\$ 1,300,175	\$ 2,000,631
SURPLUS				
(4)	Missouri Company state basis (page 3, line 37, columns 1 & 2)	MO	\$ 20,069,100	\$ 18,808,543
(5)	State prescribed practices that increase/(decrease) NAIC SAP:	MO	\$ 0	\$ 0
(6)	NAIC SAP (4-5=6)	MO	\$ 20,069,100	\$ 18,808,543

C. Accounting Policy

Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities except for interest only securities or securities where the yield had become negative that are valued using the prospective method.

No significant changes to the remainder of the note.

2. Accounting Changes and Corrections of Errors:

No significant changes.

3. Business Combinations and Goodwill:

No significant changes.

4. Discontinued Operations:

No significant changes.

5. Investments:

D. Loan-Backed Securities

- 1) Prepayment assumptions were obtained from Bloomberg market data and the Company’s investment manager’s internal estimates.
- 2) The Company does not have any loan-backed securities with a recognized other-than-temporary impairment.
- 3) The Company does not have any loan-backed securities with a recognized other-than-temporary impairment.
- 4) All impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss are as follows:

(a)	The aggregate amount of unrealized losses:	1.	Less than 12 Months	\$ 1,730
		2.	12 Months or Longer	\$ 18,228
(b)	The aggregate related fair value of securities with unrealized losses:	1.	Less than 12 Months	\$ 1,655,729
		2.	12 Months or Longer	\$ 2,789,821

- 5) Bonds in an unrealized loss position are regularly reviewed for other-than-temporary declines in value. Factors considered in determining whether a decline is other-than-temporary include the length of time a bond has been in an unrealized loss position and the reasons for the decline in value. Assessments include judgments about an obligor’s or guarantor’s current and projected financial position, projected ability to service and repay its debt obligations, the existence of, and realizable value for, any collateral backing the obligations, and the macro-economic and micro-economic outlooks for specific industries and issuers. Estimating the future cash flows of loan-

NOTES TO FINANCIAL STATEMENTS

backed securities also involves assumptions regarding the underlying collateral such as prepayment rates, default and recovery rates, existence of subordinated classes capable of absorbing losses, and third-party servicing abilities.

E. Repurchase Agreements

The Company does not have any repurchase agreements.

I. Working Capital Finance Investments

The Company does not have any working capital finance investments.

J. Offsetting and Netting of Assets and Liabilities

The Company does not have offsetting or netting to report.

No significant changes to the remainder of the note.

6. Joint Ventures, Partnerships, and Limited Liability Companies:

No significant changes.

7. Investment Income:

No significant changes.

8. Derivative Investments:

No significant changes.

9. Income Taxes:

No significant changes.

10. Information Concerning Parent, Subsidiaries and Affiliates:

No significant changes.

11. Debt:

During the period covered by this statement, the Company had no outstanding debt.

12. Retirement Plans, Deferred Compensation, Post-employment Benefits and Compensated Absences and Other Post-retirement Benefit Plans:

A. Defined Benefit Plan

The Company does not participate in a defined benefit plan.

No significant changes to the remainder of the note.

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations:

11) The Company issued the following surplus debentures or similar obligations:

On May 1, 2015, a surplus note in the amount of \$3,000,000 was issued to American Insurance Acquisition, Inc., the Company’s parent, in exchange for cash. Interest in the amount of \$82,049 was paid on this note during the year.

No significant changes for the remainder of the note.

14. Liabilities, Contingencies and Assessments:

No significant changes.

15. Leases:

No significant changes.

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk:

No significant changes.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishment of Liabilities:

The Company had no transfers of receivables reported as sales, no transfers and servicing of financial assets and no wash sales.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans:

No significant changes.

NOTES TO FINANCIAL STATEMENTS

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators:

No significant changes.

20. Fair Value Measurement:

A.

1) Fair Value Measurements at Reporting Date

Description	Level 1	Level 2	Level 3	Total
a. Assets at fair value				
Bonds				
Industrial and Misc.	\$0	\$417,520	\$0	\$417,520
Total assets at fair value	\$0	\$417,520	\$0	\$417,520

- 2) The Company does not have any fair value measurements categorized within Level 3.
- 3) Level 2 bonds were adjusted to fair market value due to categorization to Class 3.
- 4) The fair values of the Level 2 securities are obtained from independent pricing services or from the Company’s investment manager and are determined using quoted market prices from an orderly market at the reporting date for those or similar investments. If quoted market prices from an orderly market are not available, the fair values are determined by the Company’s investment manager using an income approach valuation technique (present value using the discount rate adjustment technique).
- 5) The Company does not have derivative assets and liabilities.

C.

Type of	Aggregate	Admitted				Not
Financial Instrument	Fair	Assets	Level 1	Level 2	Level 3	Practicable
	Value					(Carrying
						Value)
Long Term Bonds	\$27,259,380	\$26,792,646	\$4,156,097	\$23,103,283	\$0	\$0

D. The Company does not have any assets that are not practicable to estimate fair value as of June 30, 2016.

21. Other Items:

I. Risk Sharing Provisions of the Affordable Care Act

The Company does not transact any accident and health business.

No significant changes for the remainder of the note.

22. Events Subsequent:

There are no material subsequent events.

23. Reinsurance:

No significant changes.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination:

No significant changes.

25. Change in Incurred Losses and Loss Adjustment Expenses:

Reserves as of December 31, 2015 were \$16.1 million. As of June 30, 2016, \$7.6 million has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior accident years. Reserves remaining for prior years are now \$8.5 million as a result of re-estimation of unpaid claims and claim adjustment expenses principally on private passenger and commercial auto lines of business. Therefore, there has been unfavorable prior-year development of \$26,000 from December 31, 2015 to June 30, 2016. Any change is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements:

No significant changes.

27. Structured Settlements:

No significant changes.

28. Health Care Receivables:

No significant changes.

NOTES TO FINANCIAL STATEMENTS

29.

Participating Policies:

No significant changes.
30.

Premium Deficiency Reserves:

No significant changes.
31.

High Deductibles:

No significant changes.
32.

Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses:

No significant changes.
33.

Asbestos/Environmental Reserves:

No significant changes.
34.

Subscriber Savings Accounts:

No significant changes.
35.

Multiple Peril Crop Insurance:

No significant changes.
36.

Financial Guaranty Insurance:

The Company does not transact any financial guaranty business.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☐ No ☒
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☐ No ☐
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒
- 2.2

If yes, date of change:
- 3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

Yes ☒ No ☐
- If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒
- 4.2

If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

Yes ☐ No ☒ NA ☐
- If yes, attach an explanation.
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2015
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2011
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

05/16/2013
- 6.4

By what department or departments?

Missouri Department of Insurance
- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☒ No ☐ NA ☐
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☒ No ☐ NA ☐
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

GENERAL INTERROGATORIES

9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes [X] No []

9.11

If the response to 9.1 is No, please explain:
.....

9.2

Has the code of ethics for senior managers been amended?

Yes [] No [X]

9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
.....

9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [] No [X]

9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).
.....

FINANCIAL

10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?.....

Yes [] No [X]

10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:.....\$

INVESTMENT

11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes [] No [X]

11.2

If yes, give full and complete information relating thereto:
.....

12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:\$

13.

Amount of real estate and mortgages held in short-term investments:\$

14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes [] No [X]

14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$	\$
14.22 Preferred Stock	\$	\$
14.23 Common Stock	\$	\$
14.24 Short-Term Investments	\$	\$
14.25 Mortgage Loans on Real Estate	\$	\$
14.26 All Other	\$	\$
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$

15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes [] No [X]

15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes [] No []

If no, attach a description with this statement.

GENERAL INTERROGATORIES

- 16 For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.3 Total payable for securities lending reported on the liability page
- \$

\$

\$

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes [X] No []

17.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian Address
FIFTH THIRD BANK.....	5001 KINGSLEY DRIVE, MAILDROP 1MOB2J, CINCINNATI, OH 45227.....

17.2 For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes [] No [X]

17.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

17.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
109875.....	ASSET ALLOCATION & MANAGEMENT COMPANY, LLC.....	30 W MONROE STREET, 3RD FLOOR, CHICAGO, IL 60603.....

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes [X] No []

18.2 If no, list exceptions:
.....

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? Yes [] No [X] NA []
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? Yes [] No [X]
If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? Yes [] No [X]
3.2 If yes, give full and complete information thereto.
.....

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see *Annual Statement Instructions* pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero? Yes [] No [X]

4.2 If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
.....										
.....										
.....										
.....										
.....										
TOTAL			0	0	0	0	0	0	0	0

5. Operating Percentages:
5.1 A&H loss percent %
5.2 A&H cost containment percent %
5.3 A&H expense percent excluding cost containment expenses %
6.1 Do you act as a custodian for health savings accounts?..... Yes [] No [X]
6.2 If yes, please provide the amount of custodial funds held as of the reporting date..... \$
6.3 Do you act as an administrator for health savings accounts?..... Yes [] No [X]
6.4 If yes, please provide the balance of the funds administered as of the reporting date..... \$

SCHEDULE F - CEDED REINSURANCE

[illegible]

STATEMENT AS OF JUNE 30, 2016 OF THE Gateway Insurance Company

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

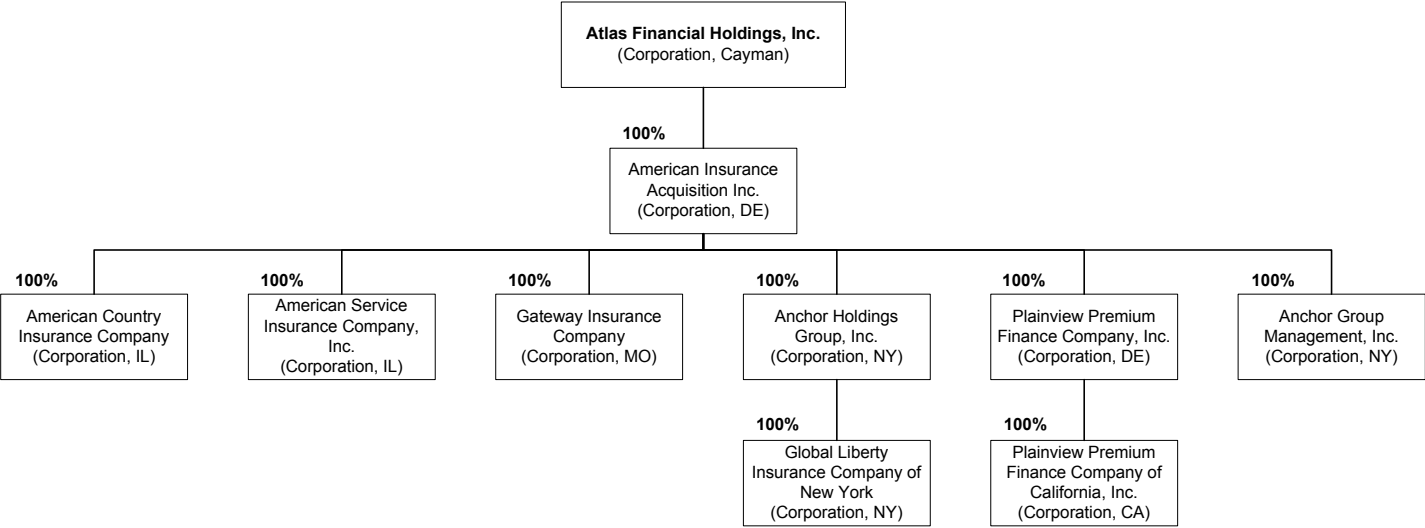
Current Year to Date - Allocated by States and Territories							
States, etc.	1	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2	3	4	5	6	7
	Active Status	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date
1. Alabama	AL L	322,241	13,375	26,451	157,500	76,536	64,627
2. Alaska	AK L	0	0	0	0	9,068	0
3. Arizona	AZ L	1,046,137	52,381	53,216	72,641	206,190	169,504
4. Arkansas	AR L	121,530	0	5,767	0	144,493	68,074
5. California	CA L	7,468,361	5,228,067	2,198,099	1,475,190	5,112,000	2,976,669
6. Colorado	CO L	353,203	107,030	23,382	8,879	225,990	106,662
7. Connecticut	CT N	0	0	0	0	0	0
8. Delaware	DE L	186,669	0	0	0	24,859	0
9. Dist. Columbia	DC L	0	0	0	0	0	0
10. Florida	FL L	0	0	111,518	149,405	338,694	1,039,462
11. Georgia	GA L	329,340	0	17,701	0	114,834	447,851
12. Hawaii	HI L	0	0	0	81,973	150	15,100
13. Idaho	ID L	153,129	(1,940)	19,417	40,000	47,725	(3,804)
14. Illinois	IL L	0	31,278	595,647	605,243	465,485	2,230,858
15. Indiana	IN L	(9,746)	58,122	243,813	127,003	514,239	976,243
16. Iowa	IA L	249,983	15,933	99,332	33,213	37,098	86,598
17. Kansas	KS L	524,173	120,399	64,216	3,653	137,239	81,764
18. Kentucky	KY L	583,581	315,767	235,908	109,649	136,144	224,475
19. Louisiana	LA L	452,826	1,742,400	538,439	200,565	512,471	390,772
20. Maine	ME L	389,824	263,851	107,672	47,453	163,294	182,205
21. Maryland	MD L	1,192,204	11,766	119,622	100,906	305,091	37,108
22. Massachusetts	MA N	0	0	0	0	0	0
23. Michigan	MI L	0	0	0	0	5,016	0
24. Minnesota	MN L	4,210,100	1,091,373	491,755	53,601	1,052,586	275,167
25. Mississippi	MS L	650,461	126,966	115,751	43,408	184,908	284,587
26. Missouri	MO L	827,998	329,174	699,974	328,279	468,082	844,594
27. Montana	MT L	8,354	0	0	0	240	0
28. Nebraska	NE L	90,761	184,988	73,659	20,532	242,567	376,062
29. Nevada	NV L	3,001,922	0	3,599	0	727,060	0
30. New Hampshire	NH N	0	0	0	0	0	0
31. New Jersey	NJ N	0	0	0	0	0	0
32. New Mexico	NM L	270,857	1,103	26,123	377	53,456	9,312
33. New York	NY L	0	0	(68,453)	64,807	411,991	427,880
34. No. Carolina	NC L	0	0	0	0	3,280	0
35. No. Dakota	ND L	(8,324)	1,959	2,745	4,782	15,525	33,466
36. Ohio	OH L	0	0	55,870	161,033	49,624	299,649
37. Oklahoma	OK L	215,728	30,968	62,654	29,188	61,520	77,313
38. Oregon	OR L	920,682	0	76,940	0	115,339	0
39. Pennsylvania	PA L	0	0	(6,486)	25,882	170,814	74,977
40. Rhode Island	RI L	0	0	0	0	0	0
41. So. Carolina	SC L	1,000,228	179,948	237,325	119,332	399,303	410,392
42. So. Dakota	SD L	32,924	43,931	49,997	1,788	20,188	30,509
43. Tennessee	TN L	429,679	(54,742)	88,855	30,367	338,221	835,017
44. Texas	TX L	3,124,935	461,419	937,578	640,586	799,890	963,031
45. Utah	UT L	308,911	0	7,784	0	180,772	155,588
46. Vermont	VT L	0	0	0	0	0	0
47. Virginia	VA L	315,244	0	49,597	16,442	181,204	44,718
48. Washington	WA L	130,652	1,895,070	336,381	118,455	566,817	319,288
49. West Virginia	WV L	329,352	312,815	32,640	38,830	147,593	141,036
50. Wisconsin	WI L	722,265	124,902	1,697,366	273,157	315,135	2,277,823
51. Wyoming	WY L	0	0	0	0	0	0
52. American Samoa	AS N	0	0	0	0	0	0
53. Guam	GU N	0	0	0	0	0	0
54. Puerto Rico	PR N	0	0	0	0	0	0
55. U.S. Virgin Islands	VI N	0	0	0	0	0	0
56. Northern Mariana Islands	MP N	0	0	0	0	0	0
57. Canada	CAN N	0	0	0	0	0	0
58. Aggregate Other Alien	OT XXX	0	0	0	0	0	0
59. Totals	(a) 47	29,946,184	12,688,303	9,431,854	5,184,117	15,082,730	16,974,576
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.	XXX	0	0	0	0	0	0
58999. TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX	0	0	0	0	0	0

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

As At:
June 30, 2016



Atlas Ownership Percentages

Public Shareholders Holding	100%
Less Than 10% Each	
Total	100%

12

12

12

1212

PART 1 - LOSS EXPERIENCE

Line of Business		Current Year to Date			4 Prior Year to Date Direct Loss Percentage
		1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1.	Fire	0	0	0.0	0.0
2.	Allied lines	0	0	0.0	0.0
3.	Farmowners multiple peril	0	0	0.0	0.0
4.	Homeowners multiple peril	0	0	0.0	0.0
5.	Commercial multiple peril	0	0	0.0	0.0
6.	Mortgage guaranty	0	0	0.0	0.0
8.	Ocean marine	0	0	0.0	0.0
9.	Inland marine	0	0	0.0	0.0
10.	Financial guaranty	0	0	0.0	0.0
11.1	Medical professional liability -occurrence	0	0	0.0	0.0
11.2	Medical professional liability -claims made	0	0	0.0	0.0
12.	Earthquake	0	0	0.0	0.0
13.	Group accident and health	0	0	0.0	0.0
14.	Credit accident and health	0	0	0.0	0.0
15.	Other accident and health	0	0	0.0	0.0
16.	Workers' compensation	0	0	0.0	0.0
17.1	Other liability occurrence	160,697	59,458	37.0	59.6
17.2	Other liability-claims made	0	0	0.0	0.0
17.3	Excess Workers' Compensation	0	0	0.0	0.0
18.1	Products liability-occurrence	0	0	0.0	0.0
18.2	Products liability-claims made	0	0	0.0	0.0
19.1,19.2	Private passenger auto liability	0	0	0.0	0.0
19.3,19.4	Commercial auto liability	24,120,354	8,604,235	35.7	25.0
21.	Auto physical damage	1,919,418	1,151,651	60.0	45.5
22.	Aircraft (all perils)	0	0	0.0	0.0
23.	Fidelity	0	0	0.0	0.0
24.	Surety	0	0	0.0	0.0
26.	Burglary and theft	0	0	0.0	0.0
27.	Boiler and machinery	0	0	0.0	0.0
28.	Credit	0	0	0.0	0.0
29.	International	0	0	0.0	0.0
30.	Warranty	0	0	0.0	0.0
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0.0	0.0
35.	TOTALS	26,200,469	9,815,343	37.5	25.7
DETAILS OF WRITE-INS					
3401.				0.0	0.0
3402.				0.0	0.0
3403.				0.0	0.0
3498.	Sum. of remaining write-ins for Line 34 from overflow page	0	0	0.0	0.0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire	0	0	0
2.	Allied lines	0	0	0
3.	Farmowners multiple peril	0	0	0
4.	Homeowners multiple peril	0	0	0
5.	Commercial multiple peril	0	0	0
6.	Mortgage guaranty	0	0	0
8.	Ocean marine	0	0	0
9.	Inland marine	0	0	0
10.	Financial guaranty	0	0	0
11.1	Medical professional liability-occurrence	0	0	0
11.2	Medical professional liability-claims made	0	0	0
12.	Earthquake	0	0	0
13.	Group accident and health	0	0	0
14.	Credit accident and health	0	0	0
15.	Other accident and health	0	0	0
16.	Workers' compensation	0	0	0
17.1	Other liability occurrence	103,849	215,996	144,774
17.2	Other liability-claims made	0	0	0
17.3	Excess Workers' Compensation	0	0	0
18.1	Products liability-occurrence	0	0	0
18.2	Products liability-claims made	0	0	0
19.1,19.2	Private passenger auto liability	0	0	0
19.3,19.4	Commercial auto liability	14,019,006	26,869,909	11,891,833
21.	Auto physical damage	1,256,376	2,860,279	651,696
22.	Aircraft (all perils)	0	0	0
23.	Fidelity	0	0	0
24.	Surety	0	0	0
26.	Burglary and theft	0	0	0
27.	Boiler and machinery	0	0	0
28.	Credit	0	0	0
29.	International	0	0	0
30.	Warranty	0	0	0
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business	0	0	0
35.	TOTALS	15,379,231	29,946,184	12,688,303
DETAILS OF WRITE-INS				
3401.		0		0
3402.		0		0
3403.		0		0
3498.	Sum. of remaining write-ins for Line 34 from overflow page	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2016 Loss and LAE Payments on Claims Reported as of Prior Year-End	2016 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2016 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11 + 12)
1. 2013 + Prior	3,145	1,064	4,209	2,437	271	2,708	2,185	243	(944)	1,484	1,477	(1,494)	(17)
2. 2014	1,370	882	2,252	1,766	196	1,962	995	111	(815)	291	1,391	(1,390)	1
3. Subtotals 2014 + prior	4,515	1,946	6,461	4,203	467	4,670	3,180	354	(1,759)	1,775	2,868	(2,884)	(16)
4. 2015	1,956	7,687	9,643	2,679	298	2,977	1,561	173	4,974	6,708	2,284	(2,242)	42
5. Subtotals 2015 + prior	6,471	9,633	16,104	6,882	765	7,647	4,741	527	3,215	8,483	5,152	(5,126)	26
6. 2016	XXX	XXX	XXX	XXX	1,945	1,945	XXX	1,302	4,434	5,736	XXX	XXX	XXX
7. Totals	6,471	9,633	16,104	6,882	2,710	9,592	4,741	1,829	7,649	14,219	5,152	(5,126)	26
8. Prior Year-End Surplus As Regards Policy-holders	18,809										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. 79.6	2. (53.2)	3. 0.2
											Col. 13, Line 7 Line 8		
											4. 0.1		

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.


	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?NO.....
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?NO.....
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?NO.....
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?NO.....

Explanation:

- 1.
- 2.
- 3.
- 4.


Bar Code:

1.




28339201649000002

2.




28339201645500002

3.



28339201636500002

4.



28339201650500002

OVERFLOW PAGE FOR WRITE-INS

PQ002 Additional Aggregate Lines for Page 02 Line 25.
*ASSETS

	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
2504. Other assets - security deposit.....	31,806	31,806	0	0
2505. Other receivables.....	1,887	1,887	0	0
2506. Other assets - other deposits.....	1,883	1,883	0	0
2597. Summary of remaining write-ins for Line 25 from Page 02	35,576	35,576	0	0

PQ003 Additional Aggregate Lines for Page 03 Line 25.
*LIAB

	1 Current Statement Date	2 December 31, Prior Year
2504. Retroactive reinsurance reserve ceded.....	(1,193,504)	(1,467,997)
2505. GAB loss fund.....		0
2506. Miscellaneous payable.....		0
2597. Summary of remaining write-ins for Line 25 from Page 03	(1,193,504)	(1,467,997)

PQ004 Additional Aggregate Lines for Page 04 Line 14.
*STMTINCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
1404. Gain/(loss) on sale of fixed assets.....		(542)	0
1497. Summary of remaining write-ins for Line 14 from Page 04	0	(542)	0

SCHEDULE A – VERIFICATION

Real Estate

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition		0
3. Current year change in encumbrances		0
4. Total gain (loss) on disposals		0
5. Deduct amounts received on disposals		0
6. Total foreign exchange change in book/adjusted carrying value		0
7. Deduct current year's other-than-temporary impairment recognized		0
8. Deduct current year's depreciation		0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts	0	0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B – VERIFICATION

Mortgage Loans

	1	2
	Year To Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	0
2.2 Additional investment made after acquisition	0	0
3. Capitalized deferred interest and other	0	0
4. Accrual of discount	0	0
5. Unrealized valuation increase (decrease)	0	0
6. Total gain (loss) on disposals	0	0
7. Deduct amounts received on disposals	0	0
8. Deduct amortization of premium and mortgage interest points and commitment fees	0	0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest	0	0
10. Deduct current year's other-than-temporary impairment recognized	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Total valuation allowance	0	0
13. Subtotal (Line 11 plus Line 12)	0	0
14. Deduct total nonadmitted amounts	0	0
15. Statement value at end of current period (Line 13 minus Line 14)	0	0

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	205,389	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	300,000
2.2 Additional investment made after acquisition	250,000	0
3. Capitalized deferred interest and other	0	0
4. Accrual of discount	0	0
5. Unrealized valuation increase (decrease)	(9,699)	(94,611)
6. Total gain (loss) on disposals	0	0
7. Deduct amounts received on disposals	0	0
8. Deduct amortization of premium and depreciation	0	0
9. Total foreign exchange change in book/adjusted carrying value	0	0
10. Deduct current year's other-than-temporary impairment recognized	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	445,690	205,389
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	445,690	205,389

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	27,498,140	31,257,856
2. Cost of bonds and stocks acquired	5,530,703	10,323,180
3. Accrual of discount	3,146	7,066
4. Unrealized valuation increase (decrease)	(123,171)	0
5. Total gain (loss) on disposals	22,073	(24,182)
6. Deduct consideration for bonds and stocks disposed of	6,094,612	13,850,526
7. Deduct amortization of premium	43,632	215,254
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other-than-temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	26,792,646	27,498,140
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	26,792,646	27,498,140

STATEMENT AS OF JUNE 30, 2016 OF THE Gateway Insurance Company

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	23,286,314	1,794,699	3,337,655	(26,514)	23,286,314	21,716,844	0	22,364,555
2. NAIC 2 (a).....	3,937,297	772,653	49,875	(1,792)	3,937,297	4,658,282	0	5,133,585
3. NAIC 3 (a).....	347,500	0	0	70,020	347,500	417,520	0	0
4. NAIC 4 (a).....	0	0	0	0	0	0	0	0
5. NAIC 5 (a).....	0	0	0	0	0	0	0	0
6. NAIC 6 (a).....	0	0	0	0	0	0	0	0
7. Total Bonds	27,571,111	2,567,351	3,387,530	41,713	27,571,111	26,792,646	0	27,498,140
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	27,571,111	2,567,351	3,387,530	41,713	27,571,111	26,792,646	0	27,498,140

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$0 ; NAIC 2 \$0 ;
NAIC 3 \$0 ; NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

SCHEDULE DA - PART 1
Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	0	XXX	0	0	0

SCHEDULE DA - VERIFICATION
Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	696,053
2. Cost of short-term investments acquired	0	5,824,328
3. Accrual of discount	0	0
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	0	6,520,381
7. Deduct amortization of premium.....	0	0
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other-than-temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	0	0
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Verification

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

STATEMENT AS OF JUNE 30, 2016 OF THE Gateway Insurance Company

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	2	Location		5	6	7	8	9	10	11	12	13
CUSIP Identification	Name or Description	City	State	Name of Vendor or General Partner	NAIC Designation	Date Originally Acquired	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership
Joint, Partnership or Limited Liability Company Interests that have the Underlying Characteristics - Other - Unaffiliated												
000000-00-0-	Pivotal Capital Fund, LP	Menlo Park	CA	Pivotal GP Partners, LLC		03/20/2015	1	300,000	150,000		450,000	4.570
2199999 - Joint,	Partnership or Limited Liability Company Interests that have the Underlying Characteristics - Other - Unaffiliated							300,000	150,000	0	450,000	XXX
4499999 – Subtotals - Unaffiliated								300,000	150,000	0	450,000	XXX
4599999 – Subtotals - Affiliated								0	0	0	0	XXX
4699999 Totals								300,000	150,000	0	450,000	XXX

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

[illegible]

E03

E04

[illegible]

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

SCHEDULE D - PART 4

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
Bonds - U.S. Governments																					
38378D-CE-3	CMO/RMBS - GNR 1217B KG		06/20/2016	Direct		19,305	19,305	19,978	19,861	0	(556)	0	(556)	0	19,305	0	0	0	202	07/20/2039	1
38378T-X8-8	CMO/RMBS - GNR 13109C M		06/16/2016	Direct		55,806	55,806	58,492	58,080	0	(2,274)	0	(2,274)	0	55,806	0	0	0	810	06/16/2041	1
38379E-WZ-2	CMO/RMBS - GNR 14116D VE		06/20/2016	Direct		11,284	11,284	11,876	11,860	0	(577)	0	(577)	0	11,284	0	0	0	153	09/20/2027	1
912828-B9-0	UNITED STATES TREASURY		04/15/2016	Jefferies		518,084	500,000	511,311	0	0	(516)	0	(516)	0	510,795	0	7,289	7,289	6,332	02/28/2021	1
912828-U0-1	UNITED STATES TREASURY		04/15/2016	Citi Group		503,475	500,000	497,717	0	0	126	0	126	0	497,843	0	5,632	5,632	3,957	02/29/2020	1
0599999 - Bonds - U.S. Governments						1,107,954	1,086,395	1,099,373	89,801	0	(3,796)	0	(3,796)	0	1,095,032	0	12,922	12,922	11,454	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																					
3136AH-6A-3	CMO/RMBS - FNR 145E LB		06/27/2016	Direct		37,704	37,704	37,952	37,935	0	(230)	0	(230)	0	37,704	0	0	0	385	07/25/2043	1
3136AK-7E-7	CMO/RMBS - FNR 1467G HC		06/27/2016	Direct		44,959	44,959	46,308	46,052	0	(1,093)	0	(1,093)	0	44,959	0	0	0	592	03/25/2044	1
3136AK-N7-4	CMO/RMBS - FNR 1454A LA		06/27/2016	Direct		40,407	40,407	41,272	41,225	0	(818)	0	(818)	0	40,407	0	0	0	513	02/25/2044	1
3136AK-NC-3	CMO/RMBS - FNR 1439A AB		06/27/2016	Direct		37,821	37,821	38,873	38,716	0	(896)	0	(896)	0	37,821	0	0	0	481	09/25/2039	1
3137B6-AY-7	CMO/RMBS - FHR 4272C DC		06/15/2016	Direct		34,069	34,069	34,266	34,247	0	(178)	0	(178)	0	34,069	0	0	0	357	04/15/2043	1
3137B8-Z3-4	CMO/RMBS - FHR 4316B DA		06/15/2016	Direct		7,340	7,340	7,597	7,599	0	(249)	0	(249)	0	7,340	0	0	0	91	02/15/2039	1
3137B8-GR-3	CMO/RMBS - FHR 4360C DA		06/15/2016	Direct		29,083	29,083	30,324	30,211	0	(1,128)	0	(1,128)	0	29,083	0	0	0	366	05/15/2037	1
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						231,383	231,382	236,590	235,975	0	(4,592)	0	(4,592)	0	231,383	0	0	0	2,784	XXX	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
00842A-AD-1	CMO/RMBS - ABMT 154 A4		06/27/2016	Direct		15,915	15,915	15,955	15,955	0	(40)	0	(40)	0	15,915	0	0	0	220	06/26/2045	1FM
03064Y-AC-2	ABS - AMCAR 142 A3		06/08/2016	Direct		67,615	67,615	67,613	67,614	0	1	0	1	0	67,615	0	0	0	262	02/08/2019	1FE
05568Y-AA-6	ABS - BNSF 071 PTC		04/04/2016	Direct		21,857	21,857	26,557	25,668	0	(3,811)	0	(3,811)	0	21,857	0	0	0	655	04/01/2024	1FE
17305E-FS-9	ABS - CCCIT 14A6 A6		04/15/2016	INTL FCStone Financial Inc.		509,531	500,000	508,													

E05

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

STATEMENT AS OF JUNE 30, 2016 OF THE Gateway Insurance Company

SCHEDULE E - PART 1 - CASH

[illegible]

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter							
1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
NONE							
8699999 Total Cash Equivalents					0	0	0