



QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2015 OF THE CONDITION AND AFFAIRS OF THE

American Country Insurance Company

(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) Internet Web Site Address www.atlas-fin.com	NAIC Group Code _	04795	, 04795	NAIC Company C	ode38237	Employer's ID	Number	36-4168532
Country of Domicile Incorporated/Organized In			,					
Incorporaled/Organized 12/07/1978 Commenced Business 12/31/1979 Incorporaled/Organized 150 Northwest Point Bivd., 3rd Floor (Giver and Number) 150 Northwest Point Bivd., 3rd Floor (Giver and Number) 150 Northwest Point Bivd., 3rd Floor (Giver and Number) (Gi	Organized under the La	aws of	Illinois		_ State of Domicile or	Port of Entry		Illinois
Statutory Home Office 150 Northwest Point Blvd., 3rd Floor Elk Grove Village, IL, US 60007 (Clay of Town, State, Country and 2) Code) (Clay of Town	Country of Domicile		 ,		United States			
Size and Allowship Size and Size and Allowship Size and Allowship Size and Size and Allowship Size and Size and Allowship Size and Size	Incorporated/Organized	d	12/07/1978		Commenced Busines	ss	12/31/19	79
Main Administrative Office 150 Northwest Point Blvd, 3rd Floor (Street and Number) (City or Town, Slan, Country and Zip Code) (New Code) (Telephone Number) (City or Town, Slan, Country and Zip Code) (New Code) (Telephone Number) (City or Town, Slan, Country and Zip Code) (New Code) (Telephone Number) (City or Town, Slan, Country and Zip Code) (New Code) (Telephone Number) (City or Town, Slan, Country and Zip Code) (New Code) (Telephone Number) (City or Town, Slan, Country and Zip Code) (New Code) (Telephone Number) (City or Town, Slan, Country and Zip Code) (New Code) (Telephone Number) (City or Town, Slan, Code) (New Code) (Telephone Number) (Telephone Number) (New Code) (Telephone Number) (Telephone Number) (Telephone Number) (Telephone Number) (Telephone Number) (Telephone	Statutory Home Office	7						
Mail Address 150 Northwest Point Blvd, 3rd Floor (Size and Number)	Main Administrative Of	fice 150 N	,	,	Elle Croup Village		-	
Mail Address 150 Northwest Point Blvd., 3rd Floor (Sirea and Number or P.O. Boy.) Primary Location of Books and Records 150 Northwest Point Blvd., 3rd Floor (City or Tem.) (City or Tem.) (City or Tem.) (Sirea and Number) (Sirea and Number) (City or Tem.) (Sirea and Number) (City or Tem.) (Sirea and Number) (City or Tem.) (Marco State. Country and Zip Code) (Area Code) (Telephone Number) (Internet Web Site Address) Statutory Statement Contact Paul Anthony Romano 847-264-2716 (Fave Number) (Estension) Promano@attlas-fin.com (Name) (Area Code) (Telephone Number) (Estension) Promano@attlas-fin.com (Name) (Area Code) (Telephone Number) (Estension) Promano@attlas-fin.com (Name) (Area Code) (Telephone Number) (Estension) Promano@attlas-fin.com (Name) (Paul Anthony Romano (Name) (Name	Main Administrative Or	130 1		310 11001	(City or Town, State, C	ountry and Zin Code)		ode) (Telephone Number)
Primary Location of Books and Records 150 Northwest Point Blvd., 3rd Floor Elk Grove Village, IL, US 60007 847-700-8603	Mail Address		west Point Blvd., 3rd F	Floor ,				
Internet Web Site Address Statutory Statement Contact Paul Anthony Romano (Name) (,	,			City or Town, State, Co	untry and Zip Co	de)
Internet Web Site Address Statutory Statement Contact Paul Anthony Romano Read Address Paul Anthony Romano Read Address OFFICERS Title Scott David Wollney President, CEO Paul Anthony Romano VP Finance, CFO, Treasurer OTHER OFFICERS Same Title Scott David Wollney President, CEO Paul Anthony Romano VP Finance, CFO, Treasurer OTHER OFFICERS VP Product Development & Underwriting DIRECTORS OR TRUSTEES Lesile Patterson DiMaggio Scott David Wollney DIRECTORS OR TRUSTEES Lesile Patterson DiMaggio Scott David Wollney DIRECTORS OR TRUSTEES Lesile Patterson DiMaggio Scott David Wollney State of	Primary Location of Bo	oks and Records	150 Northwest Poi	nt Blvd., 3rd Floor				
Statutory Statement Contact Paul Anthony Romano (Name) (N	Indonesia Maria Otta Asilala		(Street and	l Number)		te, Country and Zip Cod	e) (Area	Code) (Telephone Number)
promano@atlas-fin.com (Remail Address) OFFICERS Name Title Name Title Scott David Wollney President, CEO Paul Anthony Romano VP Finance, CFO, Treasurer Lesile Patterson DiMaggio Secretary, VP Operations & IT OTHER OFFICERS Bruce Wayne Giles Underwriting Joseph Raymond Shugrue VP Claims DIRECTORS OR TRUSTEES Lesile Patterson DiMaggio Bruce Wayne Giles Paul Anthony Romano Joseph Raymond Shugrue Scott David Wollney State of Joseph Raymond Shugrue State of Joseph Raymond Shugrue State of Joseph Raymond Shugrue Joseph Raymond Shugrue State of Joseph Raymond Shugrue State of Joseph Raymond Shugrue State of Joseph Raymond Shugrue State of Joseph Raymond Shugrue State State of Joseph Raymond Shugrue State State Shugrae State State State State Shugrae Sta	Internet Web Site Addr	ess			www.atlas-fin.com			
Promano@atlas-fin.com	Statutory Statement Co	ontact	Paul Ant	hony Romano		847-	700-8603	
CE-Mail Address OFFICERS Name Title Name Name Title Name Name Title Title Name Title Title Title Title Title Title Title Title Tit		- · · ·				(Area Code) (Telep	hone Number) (E	xtension)
Name Scott David Wollney Leslie Patterson DiMaggio Bruce Wayne Giles DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Bruce Wayne Giles DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney Directors 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 states above, all of the herien described easies were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and half his 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 have been convocition and failins of the sold reporting period stated above, and of its income and deductions therefrom for the period ended and have been convocition and failins of the sold reporting period stated above, and of its income and deductions therefrom for the period ended and have been convocition and failins of the sold reporting period stated above, and of its income and deductions therefrom for the period ended and have been convocition and failins of the sold reporting period stated above, and of its income and deductions therefrom for the period ended and have been convocition and failins of the sold reporting period stated above, and of its income and deductions therefrom for the period ended and have been convocition and failins of the sold reporting period stated above, and of its income and deductions therefrom for the period ended the been convocition and failins of the sold reporting period stated above, and of its income and deductions therefrom for the period ended that been convocition and failins of the sold reporting ended stated above, and of its income and deductions therefrom for the period ended and seven to accounting practi								
Name Scott David Wollney Leslie Patterson DiMaggio Secretary, VP Operations & IT OTHER OFFICERS Bruce Wayne Giles Underwriting Joseph Raymond Shugrue ORANGE Patterson DiMaggio Secretary Secretary Product Development & Underwriting Joseph Raymond Shugrue ORANGE Patterson DiMaggio DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Bruce Wayne Giles DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney State of County of Cook SS The officers of this reporting entity being duty sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period states above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or cleams therein except as herein stated, and that this statement, together with related exhibits, schedules and expinations therein contained, annexed or referred to, is a full and true state assets 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 and have been completed in accordance vith 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 the information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers alone procedures, according to the best of the various regulators in lieu of or in addition to the enclosed statement. Scott David Wollney President, CEO VP Finance, CFO, Treasurer a. Is this an original filing? Yes [X] No [1] Subscribed and swom to before me this 9th day of November, 2015 Leslie Patterson DiMaggio 3. Number of pages attached		(C-NAIN MODIF	:SS)			(Fax Number)		
Name Scott David Wollney Leslie Patterson DiMaggio Secretary, VP Operations & IT OTHER OFFICERS Bruce Wayne Giles Underwriting Joseph Raymond Shugrue ORANGE Patterson DiMaggio Secretary Secretary Product Development & Underwriting Joseph Raymond Shugrue ORANGE Patterson DiMaggio DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Bruce Wayne Giles DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney State of County of Cook SS The officers of this reporting entity being duty sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period states above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or cleams therein except as herein stated, and that this statement, together with related exhibits, schedules and expinations therein contained, annexed or referred to, is a full and true state assets 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 and have been completed in accordance vith 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 the information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers alone procedures, according to the best of the various regulators in lieu of or in addition to the enclosed statement. Scott David Wollney President, CEO VP Finance, CFO, Treasurer a. Is this an original filing? Yes [X] No [1] Subscribed and swom to before me this 9th day of November, 2015 Leslie Patterson DiMaggio 3. Number of pages attached				OFFICE	RS			
Scott David Wollney Lesile Patterson DiMaggio Secretary, VP Operations & IT OTHER OFFICERS VP Product Development & Underwriting Joseph Raymond Shugrue VP Claims DIRECTORS OR TRUSTEES Bruce Wayne Giles Bruch Wayne Giles Bruch Wayne Giles Bruc	Name		Title	011101				Title
DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney DIRECTORS OR TRUSTEES Bruce Wayne Giles Paul Anthony Romano Joseph Raymond Shugrue State of July County of Cook State of		ollnev		E0			VD Finance	
Bruce Wayne Giles DIRECTORS OR TRUSTEES Lesile Patterson DiMaggio Scott David Wollney State of					Paul Anthony Ro	omano	VP Finance	, CFO, Treasurer
Bruce Wayne Giles DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney State of County of Cook Ss 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 isabilities and of the condition and affairs of the said reporting entity and 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 with a state rules or regulations required differences in reporting not related to accounting practices and Procedures, according to the best of the information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the rejated corresponding electronic filling with the NAIC, when required, thins is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. Scott David Wollingy President, CEO VP Finance, CFO, Treasurer Scott David Wollingy President, CEO VP Finance, CFO, Treasurer Scott David Wollingy President, CEO VP Finance, CFO, Treasurer Leslie Patterson DiMaggio Scott David Wollingy President, CEO November, 2015 1. State the amendment number 2. Date filed 3. Number of pages attached	Ecolic i attersori E	Jiwaggio						
Bruce Wayne Giles DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Scott David Wollney State of				OTHER OF	FICERS			
DIRECTORS OR TRUSTEES Leslie Patterson DiMaggio Bruce Wayne Giles Paul Anthony Romano Joseph Raymond Shugrue Scott David Wollney State of								
State of	Bruce Wayne	Giles	Underwritir	<u> </u>	Joseph Raymond	Shugrue	VF	² Claims
State of								
State of								
State of			DIRE	CTORS OR	TRUSTEES			
State of	Leslie Patterson [DiMaggio				omano	Joseph Ra	avmond Shuarue
County ofss 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 isabilities 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 the best of the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling 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 Finance, CFO, Treasurer Scott David Wollney Paul Anthony Romano VP Finance, CFO, Treasurer a. Is this an original filling? Yes [X] No [] Subscribed and sworn to before me this 9th day of November, 2015 1. State the amendment number 2. Date filed 3. Number of pages attached	Scott David W	'ollney						
County ofss 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 isabilities 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 the best of the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling 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 Finance, CFO, Treasurer Scott David Wollney Paul Anthony Romano VP Finance, CFO, Treasurer a. Is this an original filling? Yes [X] No [] Subscribed and sworn to before me this 9th day of November, 2015 1. State the amendment number 2. Date filed 3. Number of pages attached								
County ofss The officers of this reporting entity being duty 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 iabilities 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 the 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 Devid Wolingy President, CE Paul Anthony Romano VP Finance, CFO, Treasurer Secretary, VP Operations & I Subscribed and swom to before me this 9th day of November, 2015 1. State the amendment number 2. Date filed 3. Number of pages attached								
County ofss 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 isabilities 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 the 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 Wolingy President, CEO Paul Anthony Romano VP Finance, CFO, Treasurer Scott David Wolingy President, CEO Paul Anthony Romano Leslie Patterson DiMaggio Secretary, VP Operations & I State the amendment number 2. Date filed 3. Number of pages attached	State of							
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 isabilities 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 filling with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling may be requested by various regulators in lieu of or in addition to the enclosed statement. Scott David Wollney Paul Anthony Romano VP Finance, CFO, Treasurer Secretary, VP Operations & I Subscribed and swom to before me this 9th day of November, 2015 1. State the amendment number 2. Date filed 3. Number of pages attached								
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 filling with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling may be requested by various regulators in lieu of or in addition to the enclosed statement. Scott David Wollney Paul Anthony Romano VP Finance, CFO, Treasurer Scott David Wollney Paul Anthony Romano VP Finance, CFO, Treasurer a. Is this an original filling? Yes [X] No [] Subscribed and swom to before me this a. Is this an original filling? 1. State the amendment number 2. Date filed 3. Number of pages attached	County of	Cook	SS					
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 filling with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling may be requested by various regulators in lieu of or in addition to the enclosed statement. Scott David Wollney Paul Anthony Romano VP Finance, CFO, Treasurer Subscribed and swom to before me this 9th day of November, 2015 1. State the amendment number 2. Date filed 3. Number of pages attached	The officers of this reporti	ina entity beina duly	sworn each denose an	d say that they are th	ne described officers of s	aid reporting entity	and that on the	a rapadina pariod stated
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 inabilities 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 filling with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling may be requested by various regulators in lieu of or in addition to the enclosed statement. Scott David Wollney Paul Anthony Romano VP Finance, CFO, Treasurer Secretary, VP Operations & IT. a. Is this an original filling? Yes [X] No [] Subscribed and swom to before me this 9th day of November, 2015 Subscribed and swom to before me this 2. Date filled 3. Number of pages attached	above, all of the herein de	escribed assets wer	e the absolute property (of the said reporting e	entity, free and clear fron	n any liens or claims	thereon exce	int as herein stated 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 filling with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling 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 Finance, CFO, Treasurer a. Is this an original filling? Yes [X] No [] Subscribed and swom to before me this 9th day of November, 2015 Subscribed and swom to before me this 2. Date filled 3. Number of pages attached	that this statement, toget	her with related exl	hibits, schedules and ext	planations therein co	ntained, annexed or refe	erred to is a full an	d true stateme	ent of all the assets and
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 filling with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling may be requested by various regulators in lieu of or in addition to the enclosed statement. Paul Anthony Romano Leslie Patterson DiMaggio Yes [X] No []	liabilities and of the condi	tion and affairs of th	ne said reporting entity as	s of the reporting peri	iod stated above, and of	its income and dedu	actions therefro	om for the period ended
information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filling with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling may be requested by various regulators in lieu of or in addition to the enclosed statement. Scott David Wollney Paul Anthony Romano Leslie Patterson DiMaggio Secretary, VP Operations & IT	law may differ or (2) th	a in accordance with	1 the NAIC Annual State	ment Instructions and	d Accounting Practices a	nd Procedures man	ual except to the	ne extent that: (1) state
the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filling) of the enclosed statement. The electronic filling may be requested by various regulators in lieu of or in addition to the enclosed statement. Paul Anthony Romano Leslie Patterson DiMaggio VP Finance, CFO, Treasurer Secretary, VP Operations & I	information, knowledge ar	d belief, respective	ly. Furthermore, the scor	e of this attestation b	or related to accounting by the described officers:	practices and proce	ated correspon	ing to the best of their
Scott David Wollney President, CEO Paul Anthony Romano VP Finance, CFO, Treasurer Subscribed and swom to before me this 9th day of November, 2015 Leslie Patterson DiMaggio Secretary, VP Operations & IT 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	the NAIC, when required,	Athat is an exact co	py (except for formatting	differences due to el	ectronic filing) of the end	losed statement. Th	e electronic fili	ng may be requested by
President, CEO VP Finance, CFO, Treasurer a. Is this an original filing? Yes [X] No [] Subscribed and swom to before me this 9th day of November, 2015 Louis Charouhis, Sr. Staff Accountant	various regulators in lieu	for in addition to th	e enclosed statement.					\bigcirc
President, CEO VP Finance, CFO, Treasurer a. Is this an original filing? Yes [X] No [] Subscribed and swom to before me this 9th day of November, 2015 Louis Charouhis, Sr. Staff Accountant			~	1/11	1/mes	77/	\wedge	I Nas
President, CEO VP Finance, CFO, Treasurer a. Is this an original filing? Yes [X] No [] Subscribed and swom to before me this 9th day of November, 2015 Louis Charouhis, Sr. Staff Accountant	Scott D	wid Wollney		Paul Anthony F	Pomano	- V W	in Potterson	DiMossis
Subscribed and swom to before me this 9th day of November, 2015 Louis Charouhis, Sr. Staff Accountant a. Is this an original filling? Yes [X] No [] b. If no: 1. State the amendment number 2. Date filed 3. Number of pages attached						Secre	tary VP One	rations & IT
Subscribed and swom to before me this 9th day of November, 2015 1. State the amendment number 2. Date filed 3. Number of pages attached		7						
9th day of November, 2015 1. State the amendment number 2. Date filed 3. Number of pages attached		7.1			a. Is t	this an original filing?		res [X] No []
2. Date filed 2. Number of pages attached St. Staff Accountant			Civilización:					
Louis Charouhis, Sr. Staff Accountant	9th	lay of Nove	mber, 2015				it number	
Louis Charouhis, Sr. Staff Accountant	1	h 11						
	Louis Charophie Sr	Staff Accountant			3, 1	Number of pages att	acned	
		Stati Noovantalli						

OFFICIAL SEAL LOUIS CHAROUHIS Notary Public - State of Illinois My Commission Expires Mar 1, 2019

ASSETS

			Current Statement Date	9	4
		1	2	3	7
				Net Admitted Assets	December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	28,925,600		28,925,600	32,622,196
l	Stocks:			, ,	, ,
	2.1 Preferred stocks				
	2.2 Common stocks	i			
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
_ ,	Real estate:				
4.					
	4.1 Properties occupied by the company (less				
	\$ encumbrances)				
	4.2 Properties held for the production of income				
	(less \$ encumbrances)				
	4.3 Properties held for sale (less				
	\$ encumbrances)				
5.	Cash (\$6,362,053),				
	cash equivalents (\$)				
	and short-term investments (\$	6,362,053		6,362,053	3,458,119
6.	Contract loans (including \$ premium notes)				
l	Derivatives				
8.	Other invested assets	2,093,977		2,093,977	1,622,928
9.	Receivables for securities				
i	Securities lending reinvested collateral assets				
l	Aggregate write-ins for invested assets				
l	Subtotals, cash and invested assets (Lines 1 to 11)				
l	Title plants less \$				
13.					
	only)			154,434	1E4 424
i	Investment income due and accrued	104,434		104,404	104,434
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of	7 004 700		7 004 700	0.007.440
	collection			7 ,894 ,732	3,927,443
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned				
	but unbilled premiums)	30,501,712		30,501,712	27,055,891
	15.3 Accrued retrospective premiums				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	4,865,253		4,865,253	8,713,173
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17	Amounts receivable relating to uninsured plans				
ı	Current federal and foreign income tax recoverable and interest thereon				78,911
	2 Net deferred tax asset				
i	Guaranty funds receivable or on deposit				
i	·		i		
l	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets				
	(\$)				
	Net adjustment in assets and liabilities due to foreign exchange rates				
	Receivables from parent, subsidiaries and affiliates				
	Health care (\$) and other amounts receivable				
25.	Aggregate write-ins for other-than-invested assets	515,374	146 ,740	368,634	367 , 869
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	89,061,547	2,951,396	86,110,151	79,843,176
27.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts				
28.	Total (Lines 26 and 27)	89,061,547	2,951,396	86,110,151	79,843,176
T	DETAILS OF WRITE-INS	,,	,,,,,,,,,	22,110,101	.,,,,,,,
1101	DETAILS OF WRITE-INS				
i			i		
l					
l	Commence of a majorine with in a faul in 44 ferm and for a majorine with in a faul in 44 ferm and a majorine with the faul in				
i	Summary of remaining write-ins for Line 11 from overflow page				
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
ı	Deposits in pools and associations			357 ,675	357 , 675
i	Prepaid expenses				
i	Other assets - advance commissions	· ·			
2598.	Summary of remaining write-ins for Line 25 from overflow page	23,373	12,414	10,959	10 , 194
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	515,374	146,740	368,634	367,869

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current	2 December 31,
1	9 574 004 N	Statement Date	Prior Year21,871,744
	Losses (current accident year \$8,571,994)		
l	Reinsurance payable on paid losses and loss adjustment expenses Loss adjustment expenses	1	4,549,819 4,382,722
	Commissions payable, contingent commissions and other similar charges		2,395,234
	Other expenses (excluding taxes, licenses and fees)		672,722
	Taxes, licenses and fees (excluding federal and foreign income taxes)		352,321
l	Current federal and foreign income taxes (including \$		
i	2 Net deferred tax liability		
i	Borrowed money \$ and interest thereon \$		
	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
0.	including warranty reserves of \$		
	including \$	21 635 104	16 596 794
10	Advance premium		
	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)	i	
	Funds held by company under reinsurance treaties		
	Amounts withheld or retained by company for account of others		
	Remittances and items not allocated		
	Provision for reinsurance (including \$ certified)		
1	Net adjustments in assets and liabilities due to foreign exchange rates		
	Drafts outstanding		
i	Payable to parent, subsidiaries and affiliates		
1	Derivatives		
	Payable for securities		
	Payable for securities lending		
	Liability for amounts held under uninsured plans.		
l	Capital notes \$and interest thereon \$		
l	Aggregate write-ins for liabilities		
l	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
	Protected cell liabilities		
	Total liabilities (Lines 26 and 27)		
	Aggregate write-ins for special surplus funds		
i	Common capital stock	i	
1	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
i	Surplus notes	i	
l	Gross paid in and contributed surplus	1	
1	Unassigned funds (surplus)		
1	Less treasury stock, at cost:		
	36.1 shares common (value included in Line 30 \$		
	36.2shares preferred (value included in Line 31 \$		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	26,705,886	18,425,419
	Totals (Page 2, Line 28, Col. 3)	86,110,151	79,843,176
30.	DETAILS OF WRITE-INS	33,110,101	70,040,170
2501.	Unearned ceded commissions	611,345	131,958
	Other liability - premium deficiency reserve		
i	Escheatables	·	5,470
2598.	Summary of remaining write-ins for Line 25 from overflow page	2,021	1,816
1	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	691,555	139,244
i			
i			
	Summary of remaining write-ins for Line 29 from overflow page		
1	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
i		i	
l	Summary of remaining write-ins for Line 32 from overflow page	1	
	Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		

STATEMENT OF INCOME

	STATEMENT OF INC	OWIL		
		1 Current Year	2 Prior Year	3 Prior Year Ended
		to Date	to Date	December 31
	LINDERWRITING INCOME	to Date	to Date	December 51
1	UNDERWRITING INCOME Premiums earned:			
	1.1 Direct (written \$	53 783 207	42 , 478 , 907	58,496,356
	1.2 Assumed (written \$			29 , 529 , 587
	1.3 Ceded (written \$		42,536,222	58,588,799
	1.4 Net (written \$		a. a-a aaa l	29,437,144
	DEDUCTIONS:	27,011,012	21,200,000	
2.	Losses incurred (current accident year \$11,930,528):			
	2.1 Direct	21.527.772	20,093,891	25 , 887 , 925
	2.2 Assumed	11,302,178	10,282,195	10,713,902
	2.3 Ceded			25,861,677
	2.4 Net	11,010,833	10 , 217 , 200	10 , 740 , 150
3.	Loss adjustment expenses incurred	5,064,688	3,053,372	7 , 583 , 397
4.	Other underwriting expenses incurred	8,243,844		8,664,600
5.	Aggregate write-ins for underwriting deductions	19,615		
6.	Total underwriting deductions (Lines 2 through 5)	24,338,980	19 , 860 , 447	26,988,146
	Net income of protected cells			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	3,472,692	1 , 389 , 952	2,448,998
	INVESTMENT INCOME			
9.	Net investment income earned	254 ,732	365,775	484 ,216
10.	Net realized capital gains (losses) less capital gains tax of \$	(66,237)	(47,011)	(18,577)
11.	Net investment gain (loss) (Lines 9 + 10)	188,495	318,764	465,639
	OTHER INCOME			
	Net gain or (loss) from agents' or premium balances charged off		=	,
	(amount recovered \$(49) amount charged off \$106,686)			
13.	Finance and service charges not included in premiums	128,468	, , , , , , , , , , , , , , , , , , , ,	134,563
	Aggregate write-ins for miscellaneous income		51,661	66,286
	Total other income (Lines 12 through 14)	(111,462)	21,678	61,571
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal	0 540 705	4 700 004	0.070.000
4-7	and foreign income taxes (Lines 8 + 11 + 15)		1 ,730 ,394	2,976,209
	Dividends to policyholders			(586)
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)	3 5/10 725	1,730,394	2,976,794
10	Federal and foreign income taxes incurred		764,456	1,020,674
i	<u> </u>		965,938	1,956,120
20.	Net income (Line 18 minus Line 19)(to Line 22)	1,931,113	900,900	1,930,120
	CAPITAL AND SURPLUS ACCOUNT			
21	Surplus as regards policyholders, December 31 prior year	18 //25 //10	15 080 652	15 080 652
	Net income (from Line 20)			
	Net transfers (to) from Protected Cell accounts			1,950,120
1	Change in net unrealized capital gains or (losses) less capital gains tax of			
24.	\$10,554	20 487	0 285	(81 816)
25	Change in net unrealized foreign exchange capital gain (loss)	20,407		(01,010)
26.	Change in net deferred income tax	/10 662	373 001	3 1/13 160
	Change in nonadmitted assets			
i	Change in provision for reinsurance	' '	<i>'</i>	\ ' ' '
	Change in surplus notes			
	Surplus (contributed to) withdrawn from protected cells			
i	Cumulative effect of changes in accounting principles			
i	Capital changes:			
	32.1 Paid in			
	32.2 Transferred from surplus (Stock Dividend)			
	32.3 Transferred to surplus			
33.	Surplus adjustments:			
	33.1 Paid in			1,425,000
	33.2 Transferred to capital (Stock Dividend)			
	33.3 Transferred from capital			
34.	Net remittances from or (to) Home Office			
i	Dividends to stockholders	l l		
	Change in treasury stock			
37.	Aggregate write-ins for gains and losses in surplus			
38.	Change in surplus as regards policyholders (Lines 22 through 37)	8,280,467	3,295,007	3,335,766
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	26,705,886	18,384,660	18,425,419
	DETAILS OF WRITE-INS			
0501.	Premium deficiency expense.	19,615		
1				
1				
ı	Summary of remaining write-ins for Line 5 from overflow page			
	TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)	19,615		
	Miscellaneous income		388	968
	Fines and penalties.	, , ,	(1,335)	(1,393)
i	Retroactive reinsurance income.	\ ' '	49,728	63,830
i	Summary of remaining write-ins for Line 14 from overflow page		2,880	2,880
	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	(133,195)	51,661	66,286
1				
i	Summary of remaining write-ins for Line 37 from overflow page			
3799.	TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)			

CASH FLOW

		1	2	3
		Current Year	Prior Year	Prior Year Ended
		To Date	To Date	December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance		19,835,933	28,743,94
2.	Net investment income		609,259	797 ,70
3.	Miscellaneous income	(111,462)	21,679	61,57
4.	Total (Lines 1 to 3)	22,278,292	20,466,871	29,603,21
5.	Benefit and loss related payments	11,251,586	9,346,698	16,140,33
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
			10,428,007	13,634,04
8.	Dividends paid to policyholders			(58
9.	Federal and foreign income taxes paid (recovered) net of \$tax on capital			
	gains (losses)	1,460,000	595,000	990,00
10.	Total (Lines 5 through 9)	24,864,362	20,369,705	30,763,79
	Net cash from operations (Line 4 minus Line 10)	(2,586,070)	97,166	(1,160,57
	Cash from Investments	(, , , , , , , , , , , , , , , , , , ,	. ,	(,,
12	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	14.379.309	4,861,016	6.444.84
	12.2 Stocks			
	12.3 Mortgage loans			
	0 0			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds	1		
		14,379,310	4 861 016	6 444 84
	Cost of investments acquired (long-term only):			
	13.1 Bonds	10 967 761	6 258 269	6 991 36
	13.2 Stocks			
	13.5 Other invested assets		1,500,000	1 500 00
	13.6 Miscellaneous applications		1,000,000	1,000,00
	13.7 Total investments acquired (Lines 13.1 to 13.6)	11,353,501	7,758,269	8,491,36
	• • •	11,000,001	7,700,200	0,401,00
	Net increase (or decrease) in contract loans and premium notes	3,025,809	(2,897,253)	(2,046,51
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	3,020,009	(2,097,203)	(2,040,31
4.0	Cash from Financing and Miscellaneous Sources			
	Cash provided (applied):	4 000 000		
	16.1 Surplus notes, capital notes	4,000,000	1 125 000	1 105 00
	16.2 Capital and paid in surplus, less treasury stock	I .	1,425,000	1,425,00
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	i		
	16.5 Dividends to stockholders		/222 202\	626,63
	16.6 Other cash provided (applied)	(2,135,805)	(322,283)	020,03
	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).	2,464,195	1,102,717	2,051,64
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	2,707,100	1,102,111	2,001,09
10	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	2 003 034	(1,697,370)	/1 155 //
	Cash, cash equivalents and short-term investments:	, 303,334	(1,001,310)	(1,100,44
	·	3,458,119	1 612 565	4,613,56
	19.1 Beginning of year	6,362,053	2,916,195	3,458,11
	19.2 End of period (Line 18 plus Line 19.1)	0,302,003	2,910,193	J,400, I

1. Summary of Significant Accounting Policies:

A. Accounting Practices

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

Prescribed statutory accounting practices (SAP) include the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* (NAIC SAP), as well as state laws, regulations, and general administrative rules. Permitted statutory accounting practices encompass all accounting practices not so prescribed when such practices are approved by the insurance department of the insurer's state of domicile. The Company did not use any permitted or prescribed practices during 2015 or 2014.

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

NET II	NCOME	State of Domicile	<u>2015</u>	<u>2014</u>
(1)	Illinois Company state basis (page 4, line 20, columns 1 & 3)	IL	\$ 1,937,773	\$ 1,956,120
(2)	State prescribed practices that increase/(decrease) NAIC SAP:	IL	\$ 0	\$ 0
(3)	NAIC SAP (1-2=3)	IL	\$ 1,937,773	\$ 1,956,120
<u>SURPI</u>	LUS			
(4)	Illinois Company state basis (page 3, line 37,			
(5)	columns 1 & 2)	IL	\$ 26,705,886	\$ 18,425,419
(5)	State prescribed practices that increase/(decrease) NAIC SAP:	IL	\$ 0	\$ 0
(6)	NAIC SAP (4-5=6)	IL	\$ 26,705,886	\$ 18,425,419

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

- 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	\$ 66,864
2.	12 Months or Longer	\$ 29,291

(b) The aggregate related fair value of securities with unrealized losses:

1.	Less than 12 Months	\$ 6,901,868
2.	12 Months or Longer	\$ 2,339,291

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-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 for the remainder of the note.

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

No significant changes for the remainder of the note.

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:

A. On March 11, 2015, Atlas Financial Holdings, Inc. (AFH) and American Insurance Acquisition, Inc. (AIA), the Company's ultimate parent and direct parent, respectively, acquired Anchor Holdings Group, Inc. (AHG), the parent company of Global Liberty Insurance Company of New York (GLI) along with its affiliated underwriting and premium finance companies. AFH and AIA purchased all the outstanding common shares of AHG, GLI, and affiliates for a combination of cash and AFH preferred shares subject to final adjustment based on year-end financial results.

On May 1, 2015, the Company received a contribution in the amount of \$4.6 million in the form of a surplus note from its parent, AIA.

No significant changes for the remainder of the note.

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 for 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:

				Principal and/or			
		Par Value		Interest	Total	Unapproved	
		(Face	Carrying	Paid	Principal	Principal	
		Amount of	Value of	Current	and/or	and/or	Date of
Date Issued	Interest Rate	Note)	<u>Note</u>	Year	Interest Paid	<u>Interest</u>	Maturity
May 1, 2015	Prime + 2%	\$4,600,000	\$4,600,000	\$101,232	\$101,232	\$4,600,000	May 1, 2020
	not to						
	exceed 10%						

A surplus note in the amount of \$4,600,000 was issued to AIA in exchange for cash.

The surplus note has the following repayment conditions and restrictions: Each payment of interest on and principal of the surplus note may be made only with the prior approval of the Illinois Department of Insurance and only to the extent the Company has sufficient surplus earnings to make such payment. In addition, no principal or interest shall be paid if the payment reduces the Company's surplus below \$18,400,000.

The surplus note has the following subordination terms: Repayment of the principal and interest shall be and is hereby subordinated to the prior payment of, or provision for, all general liabilities of the Company and the claims of policyholders and creditors of the Company, but shall rank superior to the claim, interest and equity of the shares or shareholders of the Company, and such subordination shall be equally applicable in the case of any merger, consolidation, liquidation, rehabilitation, reorganization, dissolution, sale or other disposal of all, or substantially all, of the assets of the Company.

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.

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

No significant changes.

20. Fair Value Measurements:

A.

1) Fair Value Measurements at Reporting Date

Description	<u>Level 1</u>	Level 2	Level 3	<u>Total</u>
a. Assets at fair value				
Bonds				
Industrial and Misc.	\$0	\$198,750	\$0	\$198,750
Total assets at fair value	\$0	\$198,750	\$0	\$198,750

- 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.

						Not
						Practicable
Type of Financial	Aggregate					(Carrying
<u>Instrument</u>	Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Value)
Long Term Bonds	\$28,724,531	\$28,925,598	\$2,570,901	\$26,153,630	\$0	\$0

D. The Company does not have any assets that are not practicable to estimate fair value as of September 30, 2015.

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, 2014 were \$26.25 million. As of September 30, 2015, \$12.71 million has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$12.32 million as a result of re-estimation of unpaid claims and claim adjustment expenses principally on private passenger and commercial auto lines of insurance. Therefore, there has been favorable prior-year development of \$1,217,000 from December 31, 2014 to September 30, 2015. 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
40.	intercompany	rooming	Arrangements

No significant changes.

27. Structured Settlements:

No significant changes.

28. Health Care Receivables:

No significant changes.

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 write financial guaranty insurance.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1	Did the reporting entity experience any momicile, as required by the Model Act?	naterial transactions requiring the	filing of Disclosure of Mate	erial Transactio	ns with the S	tate of	Y	es []	No	[X]
1.2	If yes, has the report been filed with the o						Υ	es []	No	[]
2.1	Has any change been made during the y reporting entity?						Υ	es []	No	[X]
2.2	If yes, date of change:									
3.1	Is the reporting entity a member of an Inswhich is an insurer?						Υ	es [X]	No	[]
	If yes, complete Schedule Y, Parts 1 and	1A.								
3.2	Have there been any substantial change	s in the organizational chart since	e the prior quarter end?				Y	es []	No	[X]
3.3	If the response to 3.2 is yes, provide a br	-								
4.1	Has the reporting entity been a party to a	nerger or consolidation during t	he period covered by this s	statement?			Υ	es []	No	[X]
4.2	If yes, provide the name of entity, NAIC of ceased to exist as a result of the merger		icile (use two letter state a	bbreviation) for	any entity th	at has				
		1 Name of Entity	NAIC C	2 Company Code	3 State of D					
5.	If the reporting entity is subject to a manafact, or similar agreement, have there be If yes, attach an explanation.	agement agreement, including th en any significant changes regar	rd-party administrator(s), r ding the terms of the agree	nanaging gene ement or princip	ral agent(s), a pals involved?	attorney-in-	Yes []	No [X]	NA	[]
6.1	State as of what date the latest financial	examination of the reporting entit	y was made or is being ma	ade				12	/31/2	2010
6.2	State the as of date that the latest financ This date should be the date of the exam	ial examination report became av	railable from either the stat	e of domicile o	the reporting	entity.				
6.3	State as of what date the latest financial or the reporting entity. This is the release sheet date).	date or completion date of the e	xamination report and not	the date of the	examination	(balance		06	/29/2	2012
6.4	By what department or departments?									
	Illinois Department of Insurance									
6.5	Have all financial statement adjustments statement filed with Departments?						Yes []	No []	NA	[X]
6.6	Have all of the recommendations within t						Yes [X]	No []	NA	[]
7.1	Has this reporting entity had any Certifica suspended or revoked by any government						Υ	'es []	No	[X]
7.2	If yes, give full information:									
8.1	Is the company a subsidiary of a bank ho	olding company regulated by the					Υ	es []	No	[X]
8.2	If response to 8.1 is yes, please identify t	Ğ	' '							
8.3	Is the company affiliated with one or mor	e banks, thrifts or securities firms					Υ	es []	No	[X]
8.4	If response to 8.3 is yes, please provide federal regulatory services agency [i.e. th Deposit Insurance Corporation (FDIC) ar regulator.]	ne Federal Reserve Board (FRB)	the Office of the Comptro	ller of the Curre	ency (OCC), t	he Federal				
	1		2	3	4	5	6			
	Affiliate Name		cation , State)	FRB	осс	FDIC	SEC			

GENERAL INTERROGATORIES

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 flied by the reporting entity. Compilance with applicable governmental laws, rules and regulations. Compilance with applicable governmental laws, rules and response to 9.1 is No, please explain: Compilance with applicable governmental laws, rules and response to 9.2 is Yes, provide information related to amendment(s). The response to 9.2 is Yes, provide information related to amendment(s). The response to 9.3 is Yes, provide the nature of any waiver(s). FINANCIAL Financial laws and provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]	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?	Yes [X]	No []
9.2 Has the code of ethics for senior managers been amended? 9.2 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 walved for any of the specified officers? 9.3 If the response to 9.3 is Yes, provide the nature of any walver(s). FINANCIAL 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaded, placed under option agreement, or otherwise made available for use by another person? (Exclude securities lending agreements) 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 other investments: 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? 14.2 If yes, please complete the following: 14.2 Bonds 14.2 Bonds 14.2 Bonds 14.2 Bonds 14.2 Bonds 14.2 Bonds 14.2 Common Stock 14.2 Common Stock 14.2 Common Real Estate 14.2 Sourcher investments 15. S 16. [X] 17. [Xes [] No [X] 18. [Xes [] No [Xe		(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		
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?	9.11			
9.3 Have any provisions of the code of ethics been waived for any of the specified officers? 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? 11.1 Were any of the stocks, bonds, or other assets of the reporting entity lorance, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) 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? 14.2 If yes, please complete the following: 14.2 If yes, please complete the following: 14.2 Prior Year-End Book/Adjusted Carrying Value 14.2 Bonds 14.2 Preferred Stock 14.2 Short-Term Investments 14.2 Source and Carrying Value 14.2 Short-Term Investments 15. Short-Term Investments 16. Short-Term Investments 17. Short-Term Investments 18. Short-Term Investments 18. Short-Term Investments 19. Short-Term Investments 19. Short-Term Investments 19. Short-Term Investments 19. Short-Term Inv	9.2	Has the code of ethics for senior managers been amended?	Yes []	No [X]
Have any provisions of the code of ethics been waived for any of the specified officers? FINANCIAL 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: 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 lending agreements.) 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? 14.2 If yes, please complete the following: 14.21 Bonds 14.22 Preferred Stock 14.23 Common Stock 14.23 Common Stock 14.24 Short-Term Investments 14.25 Mortgage Loans on Real Estate 14.26 Mortgage Loans on Real Estate 14.26 Mortgage Loans on Real Estate 14.27 Total Investment in Parent, Subsidiaries and Affiliates 14.28 Total Investment in Parent, Subsidiaries and Affiliates 14.28 Total Investment in Parent, Subsidiaries and Affiliates 14.28 Total Investment in Parent, Subsidiaries and Affiliates 14.29 Total Investment in Parent, Subsidiaries and Affiliates 14.28 Total Investment in Parent, Subsidiaries and Affiliates 14.29 Total Investment in Parent, Subsidiaries and Affiliates 15. No [X] 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DBP? 15. No [X]	9.21			
FINANCIAL 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	9.3		Yes []	No [X]
FINANCIAL 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	9.31			
10.1 Does the reporting entity report any amounts due from parent, subsidiaries on Page 2 of this statement?				
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 lending agreements.)	10.1		Yes [X]	No []
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.) 11.2 If yes, give full and complete information relating thereto: 11.2 Amount of real estate and mortgages held in other invested assets in Schedule BA: 12.	10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$		
for use by another person? (Exclude securities under securities lending agreements.) 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? 15.1 If yes, please complete the following: 16.1 Prior Year-End Book/Adjusted Carrying Value 17. Current Quarter Book/Adjusted Carrying Value 18. Current Quarter Book/Adjusted Carrying Value 19. Current Quarter Book/Adjusted Carrying Va				
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? 14.2 If yes, please complete the following: 14.2 If yes, please complete the following: 15.1 Bonds 16.2 Current Quarter 17. Current Quarter 18. Common Stock 18. S 19. No [X]	11.1		Yes []	No [X]
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? 15. If yes, please complete the following: 16. Prior Year-End Book/Adjusted Carrying Value 16. Prior Year-End Book/Adjusted Carrying Value 17. Current Quarter Book/Adjusted Carrying Value 18. S S S S S S S S S S S S S S S S S S S	11.2			
14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? 14.2 If yes, please complete the following: 1	12.			
14.2 If yes, please complete the following: 1	13.	Amount of real estate and mortgages held in short-term investments:		
1 2 Prior Year-End Book/Adjusted Current Quarter Book/Adjusted Carrying Value 14.21 Bonds \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?	Yes [] No [X]
Prior Year-End Book/Adjusted Carrying Value 14.21 Bonds \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	14.2	If yes, please complete the following:		
14.22 Preferred Stock \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Prior Year-End Current Quarter Book/Adjusted Book/Adjusted Carrying Value Carrying Value		
14.24 Short-Term Investments \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
14.25 Mortgage Loans on Real Estate \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26). \$ 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]		14.25 Mortgage Loans on Real Estate \$		
(Subtotal Lines 14.21 to 14.26)\$ 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above\$ \$ Yes [] No [X]				
above		(Subtotal Lines 14.21 to 14.26)\$\$		
15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?				
	15.1		Yes []	No [X]

If no, attach a description with this statement.

GENERAL INTERROGATORIES

16	For the reporting entity's sec 16.1 Total fair value of rei 16.2 Total book adjusted/ 16.3 Total payable for sec	\$ \$					
17.	entity's offices, vaults or safe pursuant to a custodial agree Considerations, F. Outsource	ety deposit boxes, were all stement with a qualified bank of	ocks, bonds and othe or trust company in ac stodial or Safekeeping	r securities, owned to cordance with Section Agreements of the	ments held physically in the reporting throughout the current year held on 1, III – General Examination NAIC Financial Condition Examine.	rs	X] No []
17.1	For all agreements that com	ply with the requirements of	the NAIC Financial Co	ondition Examiners I	Handbook, complete the following:		
		1 Name of Custoo	lian(s)		2 Custodian Address		
	Fifth	n Third Bank			side Plaza, 29th Floor 06		
17.2	For all agreements that do n location and a complete exp		ents of the NAIC <i>Final</i>	ncial Condition Exan	niners Handbook, provide the name	3 ,	
		1 Name(s)	2 Location	(s)	3 Complete Explanation(s)		
17.3	Have there been any change	es, including name changes,	in the custodian(s) id	entified in 17.1 durin	g the current quarter?		X] No []
17.4	If yes, give full and complete	e information relating thereto					
			2 lew Custodian hird Bank	3 Date of Change 08/10/2015	4 Reason Cost Efficiency		
		<u> </u>					
17.5		ors, broker/dealers or individ and have authority to make i			nt have access to the investment ty:		
		1 Central Registration Depos		2 ame(s)	3 Address		
		109875			30 West Monroe Street, 3rd Floor Chicago, IL 60603		
	Have all the filing requireme If no, list exceptions:	ents of the <i>Purposes and Pro</i>	cedures Manual of the	e NAIC Securities Va	aluation Office been followed?		[X] No []

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?												
2.	Has the reporting from any loss that If yes, attach an e	may occur on the									'es []	No [X]		
3.1	Have any of the re	eporting entity's	primary reinsur	ance contracts	been canceled?	?				Ү	'es []	No [X]		
3.2	If yes, give full and	d complete infor	mation thereto.											
4.1	Are any of the liab Annual Statement greater than zero?	t Instructions per	rtaining to discl	osure of discou	unting for definiti	on of "tabular	reserves,") disc	counted at a rat	e of interest	Ү	'es []	No [X]		
					TOTAL DI	SCOUNT		DIS	COUNT TAKE	N DURING PE	RIOD			
Li	1 ine of Business	2 Maximum Interest	3 Discount Rate	4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 TOTAL	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	1°			
			TOTAL											
	5.2 A&H co	ss percent ost containment kpense percent	percentexcluding cost	containment ex	xpenses.							% % %		
6.1	Do you act as a co		· ·								'es []	No [X]		
6.2	If yes, please prov											M. FV3		
6.3	Do you act as an									Ү	es []	NO [X]		
6.4	If yes, please prov	vide the balance	or the funds ac	aministered as	or the reporting	oate				\$				

SCHEDULE F - CEDED REINSURANCE

	1 0	Snowing All Ne	ew Reinsurers - Current Year to Date			7
1 NAIC	2	3	4	5	6 Certified Reinsurer Rating	7 Effective Date of Certified
Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Reinsurer Rating (1 through 6)	Reinsurer Rating
, , , , , , , , , , , , , , , , , , , ,		PROPERTY/CASUALTY — AFFILIATES PROPERTY/CASUALTY — U.S. INSURERS PROPERTY/CASUALTY — POOLS AND ASSOCIATIONS PROPERTY/CASUALTY — ALL OTHER INSURERS LLOYD'S SYNDICATE NUMBER 958. LLOYD'S SYNDICATE NUMBER 4444.	, , , , , , , , , , , , , , , , , , , ,	//	(1 1 3 3 1)	
		PROPERTY/CASUALTY — U.S. INSURERS				
		PROPERTY/CASUALTY - POOLS AND ASSOCIATIONS				
		PROPERTY/CASUALTY — ALL OTHER INSURERS				
00000	. AA - 1126958	LLOYD'S SYNDICATE NUMBER 958	GBR	Authorized		
00000	AA - 1126004	LLOYD'S SYNDICATE NUMBER 4444	GBR.	Authorized		
	.					
	·			+		·····
	·			†		†
	· 			+		·
	·	 		+		·····
		(
	.					ļ
						
	·					
	.					
	.			-		
	·			-		
	·	1		·		

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

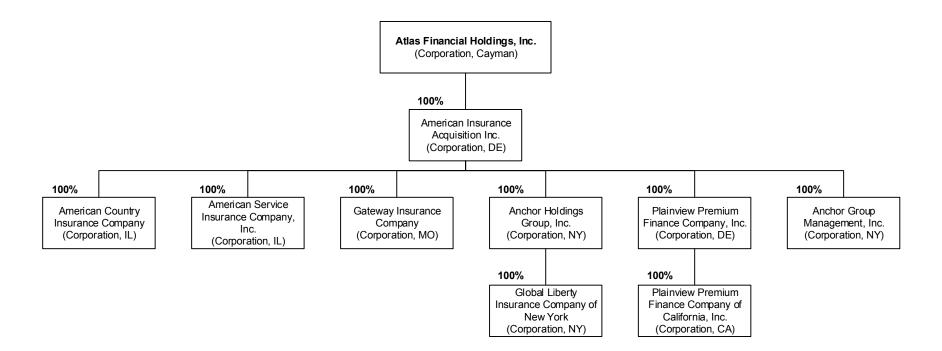
		1 4	Direct Premiu		y States and Territor Direct Losses Paid (D		Direct Losse	o I Innoid
		1	2	3	4	5	6	7
				5		5		5: 1/
	States, etc.	Active Status	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date
1	Alabama AL		10 Bate	10 Date	10 Bate	10 Bate	10 Bate	10 Date
	Alaska Ak							
	Arizona AZ							
	Arkansas AF							
	California CA							
	Colorado CO							
7.	Connecticut C7	: L						40,000
8.	Delaware DE	N						
9.	Dist. Columbia DC	; L						
10.	FloridaFL	N						
	Georgia GA							
12.	Hawaii HI							
	IdahoID.	i i						
	IllinoisIL.	i	6,220,844	5,062,555	3,278,353	2,091,536	, , , , , , , , , , , , , , , , , , ,	7 ,501 ,200
15.	IndianaIN	L	i i	678,771		521 , 113	297,833	264,233
	lowa IA.	l l	314,215	250,714	49,528	64,079	82,673	99 , 989
	KansasKS							
	KentuckyKY		588,078	653,191	498,927	310,068	259,385	425 , 621
	LouisianaLA							
	Maine ME							
	MarylandMI							
	Massachusetts MA							
	Michigan MI		i i	8,163,329	i	3,255,184	• •	9,720,895
	MinnesotaMi		3,611,961	5, 109, 899	1 ,789 ,559	1,851,832	2,474,299	2,693,872
1	Mississippi MS							
	Missouri Mo	l l						
	Montana M							
	Nebraska NE							
	NevadaN\		2,883,631	682,390	607 , 358	511,314	1 , 104 , 655	417 , 271
	New Hampshire NF							
	New Jersey NJ							
	New Mexico NN							
	New York NY		30,442,773	25 , 274 , 973	6,420,064	4,804,481	22,312,605	20 , 072 , 323
	No. Carolina NO							
1	No. Dakota NE							
	Ohio Oh	l l					' '	108 , 563
37.	Oklahoma Oł		643,791	922,749	306,363	222,830	2,135,683	679 , 637
	Oregon OF	i i	I I					
	PennsylvaniaPA				449 , 459			1 , 154 , 240
	Rhode IslandRl							
	So. Carolina So	i						
	So. Dakota SE	l l						
	Tennessee TN	i i						
i .	Texas TX	ı	i i		I .		' ' I	1,772,060
	Utah UT							
1	VermontVT							
	VirginiaVA							
	Washington Washington							
	West VirginiaW		i i					
	Wisconsin Wi	i	1,152,362				1,097,026	1,420,873
	Wyoming W	ı						
	American Samoa AS	l l						
	Guam Gl		i i					
	Puerto Rico PF							
	U.S. Virgin IslandsVI.							
	Northern Mariana Islands MF	l l	i i					
	Canada CA							
	Aggregate Other Alien O7							
59.	Totals	(a) 19	62,977,559	52,346,486	24,503,055	15,981,538	42,474,859	46,370,775
50004	DETAILS OF WRITE-INS	VVV						
58002.					 -			
	Summary of romaining write	XXX						
აგყყ8.	Summary of remaining write- ins for Line 58 from overflow							
	page	XXX						
58999.	TOTALS (Lines 58001 through	h						
	58003 plus 58998) (Line 58	vvv						
	above)	XXX						

⁽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: September 30, 2015



Atlas Ownership Percentages

Public Shareholders Holding Less Than 10% Each 100%

Total

100%

7

SCHEDULE Y PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
						Name of Securities					Type of Control (Ownership,			
						Exchange if			5		Board,	If Control is	Ultimate	
		NAIC				Publicly	Name of		Relationship to		Management,	Ownership	Controlling	
Group	O a a Nia a a	Company	ID	Federal	OU	Traded (U.S. or	Parent Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Entity(ies)/	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity UIP	(Name of Entity/Person)	Influence, Other)	Percentage	Person(s)	,
00000		. 00000	27 - 5466079			NASDAQ	Atlas Financial Holdings, Inc	CYM	. UIP		Ownership			
00000		00000	07 0500700				American Insurance Acquisition,	D.E.	LIDD			400 0	Atlas Financial	
00000		00000	27 - 3539769				Inc	DE	UDP	Atlas Financial Holdings, Inc	Uwnership	100.0	Holdings Inc	
	l <u>-</u>	l <u>-</u>					American Country Insurance			American Insurance			Atlas Financial	
04795	. Atlas Financial Holdings Group.	38237	36-4168532				Company	I L		Acquisition, Inc	0wnership	100.0	Holdings Inc	
	l <u>-</u>						American Service Insurance			American Insurance			Atlas Financial	
04795	. Atlas Financial Holdings Group.	42897	36-3223936				Company, Inc	IL		Acquisition, Inc	Ownership	100.0	Holdings Inc	
	l									American Insurance			Atlas Financial	
04795	.Atlas Financial Holdings Group.	28339	43-0762309				Gateway Insurance Company	MO	IA	Acquisition, Inc	Ownership	100.0	Holdings Inc	
										American Insurance			Atlas Financial	
00000		. 00000	06 - 1623351				Anchor Holdings Group, Inc	NY	NIA	Acquisition, Inc	0wnership	100.0	Holdings Inc	
							Global Liberty Insurance						Atlas Financial	
04795	. Atlas Financial Holdings Group.	11092	22-3733783				Company of New York	NY	IA	Anchor Holdings Group, Inc	Ownership	100.0	Holdings Inc	
										American Insurance	, i		Atlas Financial	
00000		00000	06-1628915				Anchor Group Management, Inc	NY	NIA	Acquisition, Inc		100.0	Holdings Inc	
				İ			Plainview Premium Finance			American Insurance	İ '		Atlas Financial	
00000		00000	20-3149956				Company, Inc.	DE	NIA	Acquisition, Inc.	Ownership	100.0	Holdings Inc	
İ							Plainview Premium Finance			Plainview Premium Finance	İ '		Atlas Financial	
00000		00000	45-5343449				Company of California, Inc	CA	NIA	Company, Inc.		100.0	Holdings Inc	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,														
	1		1			1		1	1		1			

Asterisk	Explanation	
		ı

PART 1 - LOSS EXPERIENCE

			Current Year to Date		4
	Line of Business	1 Direct Premiums	2 Direct Losses Incurred	3 Direct Loss	Prior Year to Date Direct Loss
		Earned		Percentage	Percentage
1. 2.	Fire				
2. 3.	Allied lines				
	Farmowners multiple peril	1			
4. 5.	Homeowners multiple peril				
	Commercial multiple peril				
6. 8.	Mortgage guaranty				
o. 9.	Ocean marine				
9. 10.	Inland marine				
	Financial guaranty				
11.1	Medical professional liability -occurrence				
11.2	Medical professional liability -claims made				
12.	Earthquake				
13.	Group accident and health				
14.	Credit accident and health				
15.	Other accident and health		250 452	20. 5	40
16.	Workers' compensation				42
17.1	Other liability occurrence				50 .
17.2	Other liability-claims made				
17.3	Excess Workers' Compensation				
18.1	Products liability-occurrence				
18.2	Products liability-claims made				
19.1,19.2	Private passenger auto liability		10 050 701	20. 2	
	Commercial auto liability		19,000,791		47 .:
21.	Auto physical damage	2,331,202	1,391,493	59.7	50 .
22.	Aircraft (all perils)				
23.	Fidelity		i e		
24.	Surety				
26.	Burglary and theft				
27.	Boiler and machinery				
28.	Credit				
29.	International				
30.	Warranty				
31.	Reinsurance - Nonproportional Assumed Property		XXX		XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines		XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business				
35.	TOTALS	53,783,207	21,527,772	40.0	47.3
	AILS OF WRITE-INS				
	n. of remaining write-ins for Line 34 from overflow page				
3499. Tota	lls (Lines 3401 through 3403 plus 3498) (Line 34)				

PART 2 - DIRECT PREMIUMS WRITTEN

	Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire			
2.	Allied lines			
3.	Farmowners multiple peril			
4.	Homeowners multiple peril			
5.	Commercial multiple peril			
6.	Mortgage guaranty			
8.	Ocean marine			
9.	Inland marine			
10.	Financial guaranty			
11.1	Medical professional liability-occurrence			
11.2	Medical professional liability-claims made			
12.	Earthquake			
13.	Group accident and health			
14.	Credit accident and health			
15.	Other accident and health			
16.	Workers' compensation			
17.1	Other liability occurrence	221.784	636,607	516.307
17.2	Other liability-claims made			
17.3	Excess Workers' Compensation.			
18.1	Products liability-occurrence			
18.2	Products liability-claims made			
	Private passenger auto liability			
19 3 19 4	Commercial auto liability	23 399 830	58 572 331	48 703 549
21	Commercial auto liability Auto physical damage	799 312	2 808 575	2 127 307
22.	Aircraft (all perils)			
23.	Fidelity	i i		
24.	Surety			
26.	Burglary and theft			
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Warranty	l l		
31.	Reinsurance - Nonproportional Assumed Property	ууу	үүү	YYY
32.	Reinsurance - Nonproportional Assumed Floperty Reinsurance - Nonproportional Assumed Liability	YYY	YYY	
33.	Reinsurance - Nonproportional Assumed Financial Lines			XXX
34.	Aggregate write-ins for other lines of business		XXX	
3 4 . 35.		24,420,926	62,977,559	52,346,486
	TOTALS	24,420,920	02,911,009	52,340,400
	AILS OF WRITE-INS			
04UJ				
	n. of remaining write-ins for Line 34 from overflow page			
499. Tota	ls (Lines 3401 through 3403 plus 3498) (Line 34)			

4

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

				LUSS AND L	-000 AD30		VI FIACE IVE	OLIVALO OV	JILDULL				
	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)	2015 Loss and LAE Payments on Claims Reported as of Prior Year-End	2015 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2015 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. 2012 + Prior	6,801	1,589	8,390	3,994	444	4,438	3,934	437	(840)	3,531	1,127	(1,548)	(421)
2. 2013	5,040	149	5 , 189	2,850	317	3,167	3,873	430	(2,857)	1,446	1,683	(2,259)	(576)
3. Subtotals 2013 + prior	11,841	1,738	13,579	6,844	761	7,605	7 ,807	867	(3,697)	4,977	2,810	(3,807)	(997)
4. 2014	4,291	8,385	12,676	4,601	511	5,112	4,733	526	2,085	7,344	5,043	(5,263)	(220)
5. Subtotals 2014 + prior	16 , 132	10,123	26,255	11,445	1,272	12,717	12,540	1,393	(1,612)	12,321	7,853	(9,070)	(1,217)
6. 2015	xxx	XXX	xxx	xxx	4,657	4,657	XXX	3,102	9,535	12,637	XXX	XXX	xxx
7. Totals	16,132	10,123	26,255	11,445	5,929	17,374	12,540	4,495	7,923	24,958	7,853	(9,070)	(1,217)
Prior Year-End 8. Surplus As Regards Policy- holders	18,425										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	
													Col. 13, Line 7

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
Expla	nation:	
1.		
2.		
3.		
4.		
Bar C	ode:	
1.		
2.		

OVERFLOW PAGE FOR WRITE-INS

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

	1	2	3	4
				December 31 Prior
			Net Admitted Assets	Year Net Admitted
	Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets
2504. Other assets - security deposit	12,414	12,414		
2505. Receivable from pools	10,959		10,959	10 , 194
2597. Summary of remaining write-ins for Line 25 from Page 02	23,373	12,414	10,959	10, 194

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

	1	2
	Current	December 31,
	Statement Date	Prior Year
2504. Miscellaneous payable	2,021	1,816
2597. Summary of remaining write-ins for Line 25 from Page 03	2,021	1,816

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

	1	2	3
	Current Year	Prior Year	Prior Year Ended
	to Date	to Date	December 31
1404. Gain/loss on sale of fixed assets		2,880	2,880
1405.			
1497. Summary of remaining write-ins for Line 14 from Page 04		2,880	2,880

SCHEDULE A - VERIFICATION

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

SCHEDULE B - VERIFICATION

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

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets		
	1	2 Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value, December 31 of prior year	1,622,928	246,892
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		1 ,500 ,000
2.1 Actual cost at time of acquisition 2.2 Additional investment made after acquisition 3. Capitalized deferred interest and other	385,740	
Capitalized deferred interest and other		
Accrual of discount		
5. Unrealized valuation increase (decrease). 6. Total gain (loss) on disposals. 7. Deduct amounts received on disposals. 8. Deduct amortization of premium and depreciation.		(123,964)
Total gain (loss) on disposals		
Deduct amounts received on disposals		
Deduct amortization of premium and depreciation		
9. Total foreign exchange change in book/adjusted carrying value.		
Deduct current year's other-than-temporary impairment recognized		
Deduct current year's other-than-temporary impairment recognized. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	2,093,977	1,622,928
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	2,093,977	1,622,928

SCHEDULE D - VERIFICATION

	1	2
	Year To Date	Prior Year Ended December 31
Book/adjusted carrying value of bonds and stocks, December 31 of prior year		32,361,688
2. Cost of bonds and stocks acquired	10,967,759	L6,991,361
3. Accrual of discount		1,649
Unrealized valuation increase (decrease)	(54, 268)	
5. Total gain (loss) on disposals		10 , 484
6. Deduct consideration for bonds and stocks disposed of	14,379,307	6,444,849
7. Deduct amortization of premium	175,770	298,146
Total foreign exchange change in book/adjusted carrying value		
Deduct current year's other-than-temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	28,925,592	32,622,187
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	28,925,592	32,622,187

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)	31,336,352	2,415,076	8,412,178	(54,931)	31,127,723	31,336,352	25,284,319	27,045,922
2. NAIC 2 (a)	4,287,471		590,529	(254,412)	5,708,253	4,287,471	3,442,530	6,216,076
3. NAIC 3 (a)				198,750			198,750	
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	35,623,823	2,415,076	9,002,707	(110,593)	36,835,976	35,623,823	28,925,599	33,261,998
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	35,623,823	2,415,076	9,002,707	(110,593)	36,835,976	35,623,823	28,925,599	33,261,998

NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

SCHEDULE DA - PART 1

Short-Term Investments

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

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year	639,805	1,984,457
Cost of short-term investments acquired		
Accrual of discount		
Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
Deduct consideration received on disposals		15 , 152 , 859
7. Deduct amortization of premium.		1,446
Total foreign exchange change in book/adjusted carrying value		
Deduct current year's other-than-temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		639,805
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)		639,805

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

Schedule BA - Part 2

NONE

Schedule BA - Part 3 NONE

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

			Snow	All Long-Term Bonds and Stock Acquired During the Curre	ent Quarter				
1	2	3	4	5	6	7	8	9	10
									NAIC
CLICID					No make a mark	Antoni			Designation or Market
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	Indicator (a)
Bonds - U.S. Gover		i dreigh	Date Acquired	IName of Vehicol	Shares of Stock	Cost	rai value	interest and Dividends	I illulcator (7)
	IGNR 2011-161 A		07/27/2015	KGS ALPHA CAPITAL		150.657	149.931	210	11
	ds - U.S. Governments		0172172010	NOO NETTIN ON TIME.		150,657	149.931	210	
Bonds - All Other G						100,001	110,001	210	7000
	s, Territories and Possessions								
000000-00-0						I			
Bonds - U.S. Politic	cal Subdivisions of States, Territories and Possessions				•				
000000-00-0	,								
000000-00-0									ļ
Bonds - U.S. Speci									
162393 - EG - 3 000000 - 00 - 0	CHATTANOOGA TN ELEC REVENUE		07/23/2015	BANK OF AMERICA.		261,333	215,000		1FE
000000-00-0			-						
	ds - LLS Special Revenue and Special Assessment and	l all Non-Guarante	ed Ohligations of Δ	gencies and Authorities of Governments and Their Political Subd	livisions	261,333	215.000		XXX
	and Miscellaneous (Unaffiliated)	a an interior oddiante	ca Obligations of 7	genices and Mathemates of Covernments and Their Foliated Caba	111310113	201,000	210,000		AAA
000000-00-0	wiscenarieous (orianinateu)								
000000-00-0									
000000-00-0			-						ļ
000000-00-0									ł
000000-00-0			-						
000000-00-0									1
000000-00-0									
000000-00-0			_						ļ
000000-00-0									ł
Bonds - Hybrid Sec	nu eitie e								
	bsidiaries and Affiliates								
	totals - Bonds - Part 3					411,990	364,931	210	T XXX
8399999 - Sub						411,990	364.931	210	
	Industrial and Miscellaneous (Unaffiliated)					411,990	304,331	210	
	Parent. Subsidiaries and Affiliates								
	Industrial and Miscellaneous								
	Parent, Subsidiaries and Affiliates								
Common Stocks - I									
	Money Market Mutual Funds								
9999999 Totals	Money Market Mutuar Fullus					411,990	XXX	210	XXX
Jood Jolais						111,000	MM	210	,,,,,,

⁹⁹⁹⁹⁹⁹⁹ Totals

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

SCHEDULE D - PART 4

											4K 4									
1	2	3 4	5	6	Sho	w All Long-	Term Bonds	and Stock S	old, Redeem	ed or Otherwis	e Disposed o Book/Adiusted C		urrent Quarte	e r 16	17	18	19	20	21	22
'	2				'		9	10		1		T		1 "	''	10	19	20	21	22
		F o r							11	12	13 Current Year's	14	15	Book/				Bond		NAIC Desig- nation
CUSIP		e i g Disposal		Number of Shares of				Prior Year Book/Adjusted Carrying	Unrealized Valuation Increase/	Current Year's (Amortization)/	Other Than Temporary Impairment	Total Change in B./A.C.V.	Total Foreign Exchange Change in	Adjusted Carrying Value	Foreign Exchange Gain (Loss) on	Realized Gain (Loss) on	Total Gain (Loss) on	Interest/Stock Dividends Received	Stated Contractual Maturity	
fication	Description	n Date	Name of Purchaser	Stock	Consideration	Par Value	Actual Cost	Value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	(a)
Bonds - U.S. C											_									
36202D-KK-6 G: 38378B-AS-8 GI 38378D-CE-3 GI	NR 2011-161 A		MBS PAYDOWNMBS PAYDOWNMBS PAYDOWN				1,251 46,394	424		(15)		(15)	1	408 1,245 44,937					11/20/2030. 01/16/2034. 07/20/2039.	41
	onds - U.S. Governme				46,590	46,590	48,136	45,652		(305)		(305)		46,590				761		XXX
	ner Governments					•		•				•								
	States, Territories and																			
Bonds - U.S. F	Political Subdivisions o	f States, Territorie	s and Possessions			T		T						т						
	Special Revenue and S		nt and all Non-Guaranteed		.	thorities of Go	. vernments and	I Their Political S	. Subdivisions						ļ	!	!	!		
	G A80979			Collyations of A	6,789	6,789	7,442	6,974		(185)	I	(185)	I	6,789	L	I	I	I 122	08/01/2038	31
31292H-FT-6 F0	G C01078		MBS PAYDOWN		32	32	38	33				1	ļ			ļ	ļ	2	10/01/2030.	01
3132L6-AK-7 F(08/18/2015	VARIOUS		608,950	572,764	608,830	27 . 414	ļ	(1,154)		(1, 154)		607,677		1,273	1,273	4,902		<u></u>
	NR 2012-70 HP NR 2014-5 LB	09/01/2015 09/01/2015	MBS PAYDOWN		27,395 41,520	27,395 41,520	27,787 41,793	41.569		(19)		(49)		27,395 41,520		†	t	183 327		
31388R-4M-6 FI	N 612928	09/01/2015			1,115	1,115	1.182	1.148		(33)		(33)		1,115				43		
	N AJ6086		VARIOUS		1,037,614	998,854	1,053,781	1,053,971		(8,270)		(8,270)		1,045,702		(8,088)	(8,088)	21,768		j1
3138E0-SF-7 FI	N AJ7717	09/01/2015	MBS PAYDOWN.		27,584	27,584	29,101	27,671		(88)		(88)		27,584			ļ	280		اِاِن
3138M4-ZR-6 FI 31403C-6L-0 FI	N AP1031	09/01/201509/01/2015			14,862 3,254	14,862 3,254	15,451 3,527	14,878		(21)		(21)	<u> </u>	14,862 3,254		 	 	146 54		
31405U-WT-2 FI	N 799958		MBS PAYDOWN.		6.234	6 234	6 632	6 240		(6)		(6)		6,234		t	†	46		4 1
31405U-WT-2 FI 31410K-JG-0 FI	N 889563	08/05/2015	VARIOUS_		205,015	6,234	199,940	6,240 202,534		(3,625)		(3,625)		198,909		6,106	6,106	7,059	12/01/2037.	/1
31411K-E4-1 FI	N 910155		VARIOUS			76,715	85,461	86 . 551		(1,263)		(1,263)				1,259	1,259	3,364	03/01/2037.	/1
	N 916910	08/18/2015	VARIOUS		84,533	75,976	83,045	84,779		(2,216)		(2,216)				1,970	1,970	3, 102		
31417A-QE-2 FI 31417B-RN-9 FI	N AB4052	09/01/2015 09/01/2015	MBS PAYDOWN		21,965	21,965 40,470	23,880 42,218	22,023		(58)		(58)	·	21,965 40,470		 	 	267 675	12/01/2041.	·1
31418A-JV-1 FI			MBS PAYDOWN.		30.093	30.093	31,284	30.184		(91)		(91)		30.093		t	t	590		,
31419J-TQ-1 FI			MBS PAYDOWN.		17,584	17,584	18,673			(76)		(76)		17,584		İ		203		
3199999 - B			al Assessment and all Non s of Governments and Thei																	
	Subdivisions				2,261,557	2,146,822	2,280,065	1,667,583		(17,379)		(17,379)		2,259,036		2,520	2,520	43,133	XXX	XXX
	trial and Miscellaneous																			
037411-BB-0 Al		09/01/2015	CALLED at 101.667 PIERPONT SECURITIES		355,833	350,000	352,758			3,075		3,075		355,833				2,314		
	PPLE INCBASS 2005-CB5 AF4	08/18/2015	MBS PAYDOWN		477 , 149 21 , 380	480,000 21,380	479,256 21,018	21,207				38		479,294		(2,146)	(2,146)	2,613		
254683-BK-0 D	CENT 2014-A4 A4	08/18/2015	INC		427,391	425,000	424,813	424,828		24		24		424,852		2,539	2,539	6, 157	12/15/2021.	11FE
46644M-AS-5 JI 54627R-AB-6 L	PMMT 2015-3 A3 CDA 2010-ELL A2		MBS PAYDOWN			20,725	21,020 161.079	155 071		(10)		(10)		20,725				1.913		51FE
54627R-AJ-9L	CDA 2010-ELL A2 CDA 2014-ELL A1		MBS PAYDOWN		23,523	23,523	23,518	155,271 23,522		(404)		(404)	'l	23,523		†	†	385		91FE 21FE.
615369-AD-7 M	OODY'S CORPORATION		US BANK		237 , 451	235,000	234,619	234,652		43		43		234,695		2,756	2.756	6.822	07/15/2019.	92FE
61746B-DR-4 M	ORGAN STANLEY		CREDIT SUISSE FIRST BOSTON	N	300,165	300,000	298,695	298,803				160		298,963		1,202	1,202	7,679	07/23/2019	91FE
65474V-AG-6 NI	MOTR 2013-A A	08/05/2015	MITSUBISHI		999,375	1,000,000	1,001,250	1,000,736		(313)		(313)		1,000,423		(1,048)	(1,048)	3,096	02/15/2018.	81FE
98152E-AG-4 W	UMUI 2013-1 A	08/18/2015	BARCLAYS CAPITAL		699,672	700,000	700,000	700,000	ļ			+	 	700,000	l	(328)	(328)	2,552	02/15/2018.	81FE
	onds - Industrial and N	discellaneous (Un	4affiliated)		3,717,531	3,710,495	3,718,026	2,859,019		2.786		2,786		3,714,555		2,975	2,975	34,319	XXX	XXX
Bonds - Hybrid		mocenaneous (One	annialCu)		5,717,551	5,710,495	3,710,020	2,000,019	1	2,100	l	2,700	1	3,714,300	l	2,373	2,313	34,319	1 ^^^	
	t. Subsidiaries. and Af	filiates																		
	ubtotals - Bonds - Part				6.025.678	5.903.907	6.046.227	4.572.254		(14.898)		(14.898)	ı	6.020.181	l	5.495	5.495	78.213	T XXX	T XXX
	ubtotals - Bonds				6,025,678	5,903,907	6,046,227	4,572,254		(14,898)		(14,898)		6,020,181		5,495		78,213		XXX
	ks - Industrial and Mis	cellaneous (Unaff	filiated)		0,020,010	0,000,007	0,0.0,227	1,0.2,204		(,000)		(,000)	'	0,020,101		0,400	0,400	.0,210	1 7000	
	ks - Parent, Subsidiari																			
	ks - Industrial and Mis		iliated)																	
Common Stoc	ks - Parent, Subsidiari																			
Common Stoc		es, and Annates																		
Common Stoc Common Stoc Common Stoc	ks - Parent, Subsidiari k - Mutual Funds ks - Monev Market Mu																			
Common Stoc Common Stoc Common Stoc	k - Mutual Funds ks - Money Market Mu				6,025,678	I xxx	6,046,227	4,572,254		(14.898)		(14,898)		6,020,181		5.495	5,495	78,213	T XXX	T XXX

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

SCHEDULE E - PART 1 - CASH

	Month End Depository Balances													
1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9						
Donository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7 Second Month	8							
Depository Open Depositories	Code	IIIIeresi	Quarter	Date	FIISL MOHUI	Second Month	TTIII U WOTUT	Щ						
Fifth Third Bank		I	83		(1,940,777)	551,375	6,373,241	TXXX						
Fifth Third Bank					2,096,813	551,375 1,289,012	(11,188)	XXX						
0199998 Deposits in	XXX	XXX						XXX						
0199999 Total Open Depositories	XXX	XXX	83		156,036	1,840,388	6,362,053	XXX						
								-						
	 	 						1						
	·····	·····						1						
								.]						
		ļ						-						
		ļ						-						
	t	t						1						
								.]						
	ļ	ļ												
	 							-						
	t	t						1						
	1	<u> </u>						1						
		ļ												
		ļ						-						
								1						
								.]						
								-						
								1						
								1						
	ļ	ļ						-						
		·····						1						
								.]						
	ļ	ļ						-						
		ļ						1						
	•••••							1						
								.]						
	ļ	ļ												
		·····						1						
								1						
	ļ	ļ												
								-						
								1						
	I													
	 	ļ						-						
								1						
	!	İ						.]						
	ļ	ļ						-						
	 	ļ						1						
	t	t						1						
]						
	}	ļ						-						
	 	 					L	1						
	!	İ						1						
	ļ	ļ						-						
		ļ						1						
	t	 						1						
		<u> </u>						.]						
	ļ	ļ						-						
0200000 Tetal Cook on Pagasit	VVV	VVV			450,000	4 040 000	6 200 050	1 ,,,,,						
0399999 Total Cash on Deposit 0499999 Cash in Company's Office	XXX	XXX	XXX 83	XXX	156,036	1,840,388	6,362,053	XXX						
0599999 Total	XXX	XXX	83	۸۸۸	156,036	1,840,388	6,362,053	XXX						
vovovov rotal	۸۸۸		03		150,030	1,040,300	0,002,000	1 ^^						

П

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter											
1	2	3	4	5	6	7	8				
		Date	Rate of	Maturity	Book/Adjusted	Amount of Interest	Amount Received				
Description	Code	Acquired	Interest	Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year				
	1										
		l									
	T	l									
	1	l									
			NON								
		l									
8699999 Total Cash Equivalents											
5000000 Total Odoli Equivalento											