PROPERTY AND CASUALTY COMPANIES-ASSOCIATION EDITION

LOUIS CHAROUHIS Official Seal Notary Public – State of Illinois My Commission Expires Mar 1, 2019

EDITION							~	•	-	-	

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2018 OF THE CONDITION AND AFFAIRS OF THE

American Country Insurance Company

NAIC Group Code 04795 (Current Period)	(Prior Period) NAIC Company	Code 38237	Employer's ID Numl	ber 36-4168532
Organized under the Laws of	Illinois	, State of Domicile or I	Port of Entry	Illinois
Country of Domicile		United States		
Incorporated/Organized	12/07/1978	Commenced Busines	s 12	/31/1979
Statutory Home Office	953 American Lane, 3rd Floor	· · · · · · · · · · · · · · · · · · ·	Schaumburg, IL,	US 60173
Main Administrative Office	(Street and Number) 953 American Lane, 3rd Floor (Street and Number)	Schaumburg, IL	(City or Town, State, Count , US 60173	try and Zip Code) 847-472-6700 (Area Code) (Telephone Number
	(Street and Number) American Lane, 3rd Floor treet and Number or P.O. Box)		Schaumburg, IL, US 6	60173
-	ts	Schaumburg	ity or Town, State, Country and J. IL, US 60173 , Country and Zip Code)	A ZIP Code) 847-700-8603 (Area Code) (Telephone Number
Internet Web Site Address		www.atlas-fin.com		
Statutory Statement Contact	Paul Anthony Romano (Name)		847-700-86 (Area Code) (Telephone Nu	
promano@atl	as-fin.com	847-264-2716		
(E-Mail Ad	dress)		(Fax Number)	
	OFFIC	ERS		
Name	Title	Name		Title
Scott David Wollney	President, CEO	Paul Anthony Ron	nano, VP Fi	inance, CFO, Treasurer
Leslie Patterson DiMaggio	Secretary, VP Operations & IT			
	OTHER OF VP Product Development &	FICERS		
Bruce Wayne Giles ,	Underwriting	Joseph Raymond SI	nugrue ,	VP Claims
	DIRECTORS OF	TDIISTEES		
Leslie Patterson DiMaggio	Bruce Wayne Giles	Paul Anthony Rom	ano lose	ph Raymond Shugrue
Scott David Wollney				
State of Illinois				
County of Cook	SS			
above, all of the herein described assets w	ly sworn, each depose and say that they are the absolute property of the said reporting within a school was and evaluations theorem.	entity, free and clear from a	iny liens or claims thereon	, except as herein stated, and

auove, an or use nerven described assets were the absolute property or the said reporting entity, tree 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 being, 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.

Paul Anthony Romano VP Finance, CFO, Treasurer D 0 0 Leslie Patterson DiMaggio Scott David Wollne President, CEO Secretary, VP Operations & IT Yes [X] No [] a. Is this an original filing? b. If no: Subscribed and sworn to before me this 9th _day of November, 2018 1. State the amendment number 2. Date filed 3. Number of pages attached Sr. Stalf Accountan Louis Charouhis March 1, 2019

	ASSEIS						
			Current Statement Date				4
		1	2	3	December 21		
				Net Admitted Assets	December 31 Prior Year Net		
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets		
1.	Bonds						
2.	Stocks:						
	2.1 Preferred stocks			0	0		
	2.2 Common stocks			0	0		
3.	Mortgage loans on real estate:						
	3.1 First liens			2,515,581			
	3.2 Other than first liens			0	0		
4.	Real estate:						
	4.1 Properties occupied by the company (less						
	\$ encumbrances)			0	0		
	4.2 Properties held for the production of income						
	(less \$			0	0		
	4.3 Properties held for sale (less						
	, , , , , , , , , , , , , , , , , , ,			0	0		
_	\$				0		
5.	Cash (\$						
	cash equivalents (\$	0, 400, 005		0,400,005	5 004 004		
	and short-term investments (\$0)						
	Contract loans (including \$		i		0		
	Derivatives				0		
	Other invested assets				7 ,016 ,285		
	Receivables for securities						
	Securities lending reinvested collateral assets				0		
11.	Aggregate write-ins for invested assets	0	0	0	0		
12.	Subtotals, cash and invested assets (Lines 1 to 11)		0				
	Title plants less \$						
	only)			0	0		
14.	Investment income due and accrued						
	Premiums and considerations:	,		,	,		
	15.1 Uncollected premiums and agents' balances in the course of						
	collection	17 050 379	6 370 256	10 680 123	2 028 420		
	15.2 Deferred premiums, agents' balances and installments booked but		0,070,200		2,020,420		
	deferred and not yet due (including \$earned	40 152 651			20 E00 4EE		
	but unbilled premiums)						
	15.3 Accrued retrospective premiums (\$				0		
	,			0	0		
16.	Reinsurance:						
	16.1 Amounts recoverable from reinsurers						
	16.2 Funds held by or deposited with reinsured companies				0		
	16.3 Other amounts receivable under reinsurance contracts				0		
17.	Amounts receivable relating to uninsured plans				0		
18.1	Current federal and foreign income tax recoverable and interest thereon	4,947,837					
18.2	Net deferred tax asset	4,813,204		2,431,579	1,871,456		
	Guaranty funds receivable or on deposit				0		
20.	Electronic data processing equipment and software			0	0		
	Furniture and equipment, including health care delivery assets						
	(\$			0	0		
22.	Net adjustment in assets and liabilities due to foreign exchange rates				0		
	Receivables from parent, subsidiaries and affiliates						
	Health care (\$						
	Aggregate write-ins for other-than-invested assets						
	Total assets excluding Separate Accounts, Segregated Accounts and		100,200				
20.		142,922,122	8,915,119	134,007,003	109,733,555		
77	Protected Cell Accounts (Lines 12 to 25)	142,322,122	0,810,119	104,007,003	100,100,000		
21.	From Separate Accounts, Segregated Accounts and Protected				•		
		140 000 400			0		
28.	Total (Lines 26 and 27)	142,922,122	8,915,119	134,007,003	109,733,555		
	DETAILS OF WRITE-INS						
			1				
	Summary of remaining write-ins for Line 11 from overflow page			0	0		
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0		0	0		
	Deposits in pools and associations						
	Receivable from pools			i i			
	Prepaid expenses			i i			
	Summary of remaining write-ins for Line 25 from overflow page			0	0		
2099.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	000,743	163,238	390,000	373,978		

ASSETS

LIABILITIES, SURPLUS AND OTHER FUNDS

LIADILITILO, SURFLUS AND UTTLINT	1 Current	2 December 31,
	Statement Date	Prior Year
1. Losses (current accident year \$		
 Reinsurance payable on paid losses and loss adjustment expenses Loss adjustment expenses 		9 , 246 , 902
 Loss adjustment expenses Commissions payable, contingent commissions and other similar charges 		
 Other expenses (excluding taxes, licenses and fees) 		
 Taxes, licenses and fees (excluding federal and foreign income taxes) 		
7.1Current federal and foreign income taxes (including \$		· · · · ·
7.2 Net deferred tax liability		
8. Borrowed money \$		0
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
including warranty reserves of \$		
including \$ for medical loss ratio rebate per the Public Health Service Act)		
10. Advance premium	-	0
11. Dividends declared and unpaid:		
11.1 Stockholders	-	0
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)		
13. Funds held by company under reinsurance treaties		
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		(23,584)
16. Provision for reinsurance (including \$		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
 Liability for amounts held under uninsured plans		
 24. Capital holes \$		
 Aggregate write-ins for habilities Total liabilities excluding protected cell liabilities (Lines 1 through 25) 		
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)		
29. Aggregate write-ins for special surplus funds		
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes		
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)		(11,861,046)
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$		0
36.2 shares preferred (value included in Line 31 \$		0
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	. 26,038,239	18,253,606
38. Totals (Page 2, Line 28, Col. 3)	134,007,003	109,733,555
DETAILS OF WRITE-INS		
2501. Unearned ceded commissions		
2502. Other liability - premium deficiency reserve		
2503. Escheatables		
2598. Summary of remaining write-ins for Line 25 from overflow page		0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	1,870,126	547,674
2901.		0
2902.		
2998. Summary of remaining write-ins for Line 29 from overflow page		0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0
3201.		
3202.		
3203. 3298. Summary of remaining write-ins for Line 32 from overflow page		
3290. Summary of remaining write-ins for Line 32 from overnow page	0	0
		0

STATEMENT OF INCOME

			2	3
1		Current Year	Prior Year	Prior Year Ended
		to Date	to Date	December 31
	UNDERWRITING INCOME			
1.	Premiums earned:	62 001 002	ET 104 000	
	1.1 Direct (written \$		57 , 104 ,282 	
	1.3 Ceded (written \$	64 488 303		
	1.4 Net (written \$			
	DEDUCTIONS:			
2.	Losses incurred (current accident year \$			
	2.1 Direct			
	2.2 Assumed			
	2.3 Ceded			
	2.4 Net			
3.	Loss adjustment expenses incurred			
4.	Other underwriting expenses incurred			
5.	Aggregate write-ins for underwriting deductions		20,851 33,506,993	
0. 7	Total underwriting deductions (Lines 2 through 5)			04, 349, 097
/. 0	Net income of protected cells Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	6 030 547		•
0.	Net underwinding gain (loss) (Line T minus Line 0 + Line 7)	0,000,047		
	INVESTMENT INCOME			
9.	Net investment income earned		.557 .268	
10.	Net realized capital gains (losses) less capital gains tax of \$(1,418)	(65,441)	7,232	(19,971)
11.	Net investment gain (loss) (Lines 9 + 10)			
		, , ,	,	,,
1	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off			
	(amount recovered \$			
13.	Finance and service charges not included in premiums			
	Aggregate write-ins for miscellaneous income		(8,536)	(, ,
	Total other income (Lines 12 through 14)	(48,477)	(223,949)	(480,172)
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal	0.505.040	5 054 000	(40,007,005)
	and foreign income taxes (Lines 8 + 11 + 15)			
17.	Dividends to policyholders		0	0
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	6 505 612		(10,007,005)
10			1,748,078	(1,936,088)
	Federal and foreign income taxes incurred		3,906,221	(9,060,917)
20.	Net income (Line 18 minus Line 19)(to Line 22)	0,024,301	5,900,221	(9,000,917)
	CAPITAL AND SURPLUS ACCOUNT			
21	Surplus as regards policyholders, December 31 prior year	18 253 607	25 061 460	25 061 460
	Net income (from Line 20)			
	Net income (non Ene 20)			
	Change in net unrealized capital gains or (losses) less capital gains tax of			
	\$	35,423	19.882	(120,138)
25.		0	0	0
26.	Change in net deferred income tax			
27.	Change in nonadmitted assets	2,660,334		(5,917,396)
28.	Change in provision for reinsurance		0	0
29.	Change in surplus notes		0	0
30.	Surplus (contributed to) withdrawn from protected cells		0	0
31.	Cumulative effect of changes in accounting principles		0	0
32.	Capital changes:			
	32.1 Paid in			0
	32.2 Transferred from surplus (Stock Dividend)		0	0
	32.3 Transferred to surplus		0	0
33.	Surplus adjustments:		0	
	33.1 Paid in			
1	33.2 Transferred to capital (Stock Dividend) 33.3 Transferred from capital		0	0
1 .	55.5 HANSIEHEU HUHH CAPILAL			0 0
1 31	Net remittances from or (to) Home Office			0
	Net remittances from or (to) Home Office		∩	
35.	Dividends to stockholders			() ()
35. 36.	Dividends to stockholders		0 0 0	0 0
35. 36. 37.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus		D 0	0
35. 36. 37. 38.	Dividends to stockholders	0 7,784,632	0 0 2,004,010	0 (6,807,853)
35. 36. 37. 38.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38)		D 0	0
35. 36. 37. 38. 39.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS	0 	0 0 2,004,010 27,065,470	0 (6,807,853) 18,253,607
35. 36. 37. 38. 39. 0501.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees	0 7,784,632 26,038,239 23,547	0 0 2,004,010 27,065,470 (4,028)	0 (6,807,853) 18,253,607
35. 36. 37. 38. 39. 0501. 0502.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense	0 7,784,632 26,038,239 23,547 2,834	0 0 2,004,010 27,065,470 (4,028) 24,879	0 (6,807,853) 18,253,607 (4,028) (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense	0 .7,784,632 26,038,239 .23,547 .2,834	0 0 2,004,010 27,065,470 (4,028) (4,879	0 (6,807,853) 18,253,607 (4,028) (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense	0 .7,784,632 26,038,239 .23,547 .2,834	0 0 2,004,010 27,065,470 (4,028) (4,879	0 (6,807,853) 18,253,607 (4,028) (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense Summary of remaining write-ins for Line 5 from overflow page TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)	0 7,784,632 26,038,239 23,547 2,834 	0 0 2,004,010 27,065,470 (4,028) 24,879 0 20,851	0 (6,807,853) 18,253,607 (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599. 1401.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense Summary of remaining write-ins for Line 5 from overflow page	0 7,784,632 26,038,239 23,547 23,547 2,834 0 0 26,381 2,517 (673)		0 (6,807,853) 18,253,607 (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599. 1401. 1402.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense Summary of remaining write-ins for Line 5 from overflow page TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) Ret roactive reinsurance income	0 7,784,632 26,038,239 23,547 23,547 2,834 0 0 26,381 2,517 (673)		0 (6,807,853) 18,253,607 (4,028) 29,406
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599. 1401. 1402. 1403.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense Summary of remaining write-ins for Line 5 from overflow page TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) Ret roact ive reinsurance income Miscellaneous income	0 7,784,632 26,038,239 23,547 23,547 2,834 0 0 26,381 2,517 (673) (673) (18,148)		0 (6,807,853) 18,253,607 (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense Summary of remaining write-ins for Line 5 from overflow page TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) Retroactive reinsurance income Miscellaneous income Fines and penalties	0 7,784,632 26,038,239 23,547 23,547 2,834 0 0 26,381 2,517 (673) (673) (18,148)		0 (6,807,853) 18,253,607 (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498. 1499.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense Summary of remaining write-ins for Line 5 from overflow page TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) Retroactive reinsurance income Miscellaneous income Fines and penalties Summary of remaining write-ins for Line 14 from overflow page	0 7,784,632 26,038,239 23,547 2,834 0 26,381 2,517 (673) (18,148) 0 (16,304)		0 (6,807,853) 18,253,607 (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498. 1499. 3701.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees Premium deficiency expense Summary of remaining write-ins for Line 5 from overflow page TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) Retroactive reinsurance income Miscellaneous income Fines and penalties Summary of remaining write-ins for Line 14 from overflow page TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	0 7,784,632 26,038,239 23,547 2,834 0 26,381 2,517 (673) (18,148) 0 (16,304)		0 (6,807,853) 18,253,607 (4,028) 29,406
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498. 1499. 3701. 3701. 3702. 3703.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees. Premium deficiency expense. Summary of remaining write-ins for Line 5 from overflow page TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) Retroactive reinsurance income. Miscellaneous income. Fines and penalties. Summary of remaining write-ins for Line 14 from overflow page. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	0 7,784,632 26,038,239 23,547 2,834 0 26,381 2,517 (673) (673) 0 (16,304)		0 (6,807,853) 18,253,607 (4,028) (4,028)
35. 36. 37. 38. 39. 0501. 0502. 0503. 0598. 0599. 1401. 1402. 1403. 1498. 1499. 3701. 3701. 3702. 3703.	Dividends to stockholders Change in treasury stock Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders (Lines 22 through 37) Surplus as regards policyholders, as of statement date (Lines 21 plus 38) DETAILS OF WRITE-INS CLAD fees. Premium deficiency expense. Summary of remaining write-ins for Line 5 from overflow page TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) Retroactive reinsurance income. Miscellaneous income. Fines and penalties. Summary of remaining write-ins for Line 14 from overflow page TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	0 7,784,632 26,038,239 23,547 2,834 0 26,381 2,517 (673) (673) 0 (16,304)		0 (6,807,853) 18,253,607 (4,028) (4,028)

CASH FLOW

		<u> </u>	â	
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance			
	Net investment income			
3.	Miscellaneous income	(48,477)	(223,949)	(480, 170)
	Total (Lines 1 to 3)	33,625,532	34,513,227	53,957,348
	Benefit and loss related payments			
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions			
	Dividends paid to policyholders		0	0
	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)		0	250,000
10.	Total (Lines 5 through 9)	42,989,566	35,594,928	54,357,351
11.	Net cash from operations (Line 4 minus Line 10)	(9,364,035)	(1,081,701)	(400,003)
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds			
	12.2 Stocks		0	0
	12.3 Mortgage loans		0	0
	12.4 Real estate		0	0
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0	0
	12.7 Miscellaneous proceeds	. 0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)			
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds			
	13.2 Stocks		0	0
	13.3 Mortgage loans		0	0
	13.4 Real estate		0	0
	13.5 Other invested assets		1,572,779	1,809,431
	13.6 Miscellaneous applications		0	4,550
	13.7 Total investments acquired (Lines 13.1 to 13.6)		13,214,968	15,456,512
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(5,132,512)	654,910	853,974
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes		0	0
	16.2 Capital and paid in surplus, less treasury stock	l0	0	
	16.3 Borrowed funds	l0	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
	16.5 Dividends to stockholders			0
	16.6 Other cash provided (applied)	12,313,850	(702,808)	(7,163,418)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	12,313,850	(702,808)	1,836,582
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		// ····	
	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)		(1,129,599)	
19.	Cash, cash equivalents and short-term investments:	5 004 004	0 074 400	0.074.400
	19.1 Beginning of year			
	19.2 End of period (Line 18 plus Line 19.1)	3,182,285	1,944,829	5,364,981

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1		y experience any material transactions requiring the filing of Disclosure by the Model Act?			Yes []	No [X]
1.2	If yes, has the report b	peen filed with the domiciliary state?			Yes []	No []
2.1		made during the year of this statement in the charter, by-laws, articles		ed of settlement of the	Yes []	No [X]
2.2	If yes, date of change:					
3.1		a member of an Insurance Holding Company System consisting of two		ons, one or more of	Yes [X]	No []
	If yes, complete Scheo	dule Y, Parts 1 and 1A.				
3.2	Have there been any s	substantial changes in the organizational chart since the prior quarter ϵ	end?			No []
3.3		is yes, provide a brief description of those changes. hcy Inc. was formed. The new entity is a wholly owned subsidiar	y of UBI Holdings Inc			
3.4	Is the reporting entity	publicly traded or a member of a publicly traded group?			Yes [X]	No []
3.5	If the response to 3.4 i	is yes, provide the CIK (Central Index Key) code issued by the SEC for	the entity/group			539894
4.1	Has the reporting entit	ty been a party to a merger or consolidation during the period covered	by this statement?		Yes []	No [X]
4.2		ne of entity, NAIC Company Code, and state of domicile (use two letter esult of the merger or consolidation.	state abbreviation) for	any entity that has		
		1 Name of Estitu	2	3 Otata of Dominila		
		Name of Entity	NAIC Company Code	State of Domicile		

5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in- fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?	Yes [] No [X] NA []
	If yes, attach an explanation.	
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	
6.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.	
6.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).	
6.4		
	Illinois Department of Insurance	
6.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?	Yes [] No [] NA [X]
6.6	Have all of the recommendations within the latest financial examination report been complied with?	Yes [X] No [] NA []
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?	Yes [] No [X]
7.2	If yes, give full information:	
8.1	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?	Yes [] No [X]
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.	
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?	Yes [] No [X]
8.4	If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]	

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

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	Yes [X]	No []
	(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships		
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;		
	(c) Compliance with applicable governmental laws, rules and regulations;		
	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and		
	(e) Accountability for adherence to the code.		
9.11	If the response to 9.1 is No, please explain:		
9.2	Has the code of ethics for senior managers been amended?	Yes []	No [X]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).		
9.3	Have any provisions of the code of ethics been waived for any of the specified officers?	Yes []	No [X]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).		
	FINANCIAL		
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	Yes [X]	No []
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$		
	INVESTMENT		
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)	Yes []	No [X]
11.2	If yes, give full and complete information relating thereto:		
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:	4,5	554,240
13.	Amount of real estate and mortgages held in short-term investments:		
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?	Yes [X	(] No []
14.2	If yes, please complete the following:		
	1 2 Prior Year-End Current Quarter Book/Adjusted Book/Adjusted Carrying Value Carrying Value 14.21 Bonds \$		
	14.22 Preferred Stock \$		
	14.23 Common Stock		
	14.24 Short-Term Investments \$ \$ \$ 14.25 Mortgage Loans on Real Estate \$ 2,600,000 \$ 2,515,581		
	14.26 All Other		
	14.27 Total Investment in Parent. Subsidiaries and Affiliates		

14.26 All Other
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 \$ \$ Yes [] No [X] 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? -----

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []

\$2,600,000 **\$**2,515,581

If no, attach a description with this statement.

GENERAL INTERROGATORIES

- For the reporting entity's security lending program, state the amount of the following as of the current statement date: 16
 - 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2
 - Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 16.2
 - Total payable for securities lending reported on the liability page 16.3

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

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

1	2
Name of Custodian(s)	Custodian Address
	5001 Kingsley Drive, Maildrop 1MOB2J, Cincinnati, OH 45277

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

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

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

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

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

17.5 Investment management - Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1	2				
Name of Firm or Individual	Affiliation				
Asset Allocation & Management Company, LLC	U				

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets?

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration	Name of Firm or	Legal Entity		Investment Management
Depository Number	Individual	Identifier (LEI)	Registered With	Agreement (IMA) Filed
109875	Asset Allocation & Management Company. LLC.		Securities And Exchange Commission	DS.
				-

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

18.2 If no, list exceptions:

19. By self-designating 5*GI securities, the reporting entity is certifying the following elements for each self-designated 5*GI security:

a. Documentation necessary to permit a full credit analysis of the security does not exist. b.

Issuer or obligor is current on all contracted interest and principal payments

The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5*GI securities?

Yes [] No [X]

\$		 0
\$		 0
\$		0

Yes [] No [X]

Yes [X] No []

Yes [] No [X]

Yes [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?	Yes [] No [X] NA []
	If yes, attach an explanation.	
2.	Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?	Yes [] No [X]
	If yes, attach an explanation.	
3.1	Have any of the reporting entity's primary reinsurance contracts been canceled?	Yes [] No [X]
3.2	If yes, give full and complete information thereto.	

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero?

Yes [] No [X]

4.2 If yes, complete the following schedule:

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

5.	Operating Percentages:		
	5.1 A&H loss percent		%
	5.2 A&H cost containment percent		%
	5.3 A&H expense percent excluding cost containment expenses		%
6.1	Do you act as a custodian for health savings accounts?		lo [X]
6.2	If yes, please provide the amount of custodial funds held as of the reporting date\$	š	
6.3	Do you act as an administrator for health savings accounts?	Yes [] No	lo [X]
6.4	If yes, please provide the balance of the funds administered as of the reporting date\$	۶	
7.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X] No	ο[]
7.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [] No	o []

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

	Showing All New Reinsurers - Current Year to Date							
1	2	3	4	5	6	7		
					6 Certified	Effective Date		
NAIC Company Code					Reinsurer Rating (1 through 6)	of Certified Reinsurer Rating		
Company Codo	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	(1 through 6)	Boingurar Bating		
Company Code	ID NUITBEI	Name of Reinsurer	Domiciliary Junsuiction	Type of Reinsuler	(Tunough 6)	Reinsulei Rating		
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SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

			1	Direct Premi	ums Written	by States and Territor	(Deducting Salvage)	Direct Losse	
			Active Status	2 Current Year	3 Prior Year	4 Current Year	5 Prior Year	6 Current Year	7 Prior Year
	States, etc.		(a) N	To Date	To Date	To Date	To Date	To Date	To Date
	Alabama Alaska		NN		0				0
	Arizona		NN		0				0 0
	Arkansas		N		0		0		
	California		N		0		0		
	Colorado		N		0		0		0
	Connecticut		L		0				0
	Delaware		N		0		0		0
	Dist. Columbia		L						
	Florida		N		0		0		
	Georgia		N		0		0		
12.	Hawaii	HI	N		0		0		
	Idaho		E		0		0		
	Illinois		L	3 , 106 , 338	6 , 177 , 154	2,089,055			4,824,814
	Indiana		L	1,621,531					
	lowa		L						40,617
	Kansas		E		0		0		
	Kentucky								(101,499
	Louisiana		N		0		0		
	Maine		N		0		l0		
	Maryland		N		0		0		0
	Massachusetts		L		0		0		0
	Michigan			1,586,841	2,426,035				452,471
	Minnesota		L	1,002,768		534 , 447	· · ·		
	Mississippi		L		0		0		
	Missouri		N		0		0		
	Montana		N		0		0		C
	Nebraska		N		0		0		
	Nevada		L			3,393,004	1,029,390		(456,633
	New Hampshire		N		0		0		0
	New Jersey		N		0		0		0
	New Mexico		N		0		0		0
	New York								
	No. Carolina		N		0		0		0
	No. Dakota		E		0		0		0
	Ohio		L	000 554		4.47 5.40	470.054	000.000	
	Oklahoma	OK	L						
	Oregon		E	4 000 000	0	4 474 004	700,000	000 440	
	Pennsylvania					1,171,034			, , , ,
	Rhode Island		N N		0				l
	So. Carolina So. Dakota				0 0				l
			L E						ل
	Tennessee Texas		⊑ I		0 		0. 		
			L						
	Utah		LN		0		0		U
	Vermont						0.		U
	Virginia Washington		NNNNNN		0		0.		U
	West Virginia		NЕ		0				U
	West Virginia Wisconsin		E L						ןרע מעע/ ברכ מעע/
	Wyoming								440 , 221 (440)
	American Samoa		NNNNN		U				یا م
	Guam		NNNNN		U				U
	Puerto Rico		NNNN		0 0				ل م
	U.S. Virgin Islands		NNNNNN						l. r
	Northern Mariana Islands.				0		0		ل ۲
	Canada		NNNNNN		0				۲ ۲
	Aggregate Other Alien		XXX	0				0	
	Totals		ХХХ	83,973,026	73,215,325	0 45,670,087	0. 35,988,997		21,751,783
59.	DETAILS OF WRITE-INS	3	ллл	00,010,020	10,210,020		00,000,001	02,200,200	21,101,100
58001.			ХХХ						
8002.			XXX						
8003. 8998.	Summary of remaining wr		XXX						
	ins for Line 58 from overfl								
8999.	page TOTALS (Lines 58001 thr 58003 plus 58998) (Line 5		XXX	0	0	0	0	0	0
	above)		XXX	0	0	0	0	0	

(a) Active Status Counts

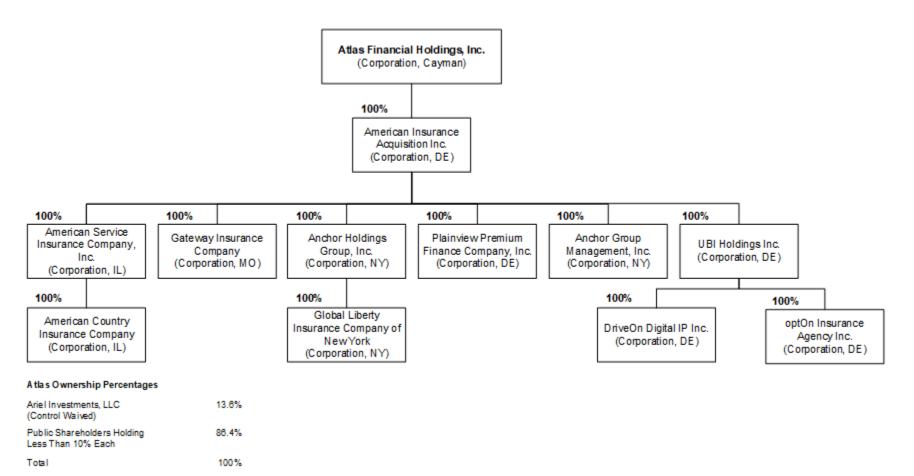
L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG
 E – Eligible – Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile – See DSLI)
 D – Domestic Surplus Lines Insurer (DSLI) – Reporting entities authorized to write surplus lines in the state of domicile
 N – None of the above – Not allowed to write surplus lines in the state of domicile

.0

.....0

......0 N – None of the above – Not allowed to write business in the state32

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



As At: 9/30/2018

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

1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15	16
						Securities Exchange if			Relationship		(Ownership, Board.	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or		Domiciliary		Directly Controlled by	Attorney-in-Fact,			Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)		Percentage	Entity(ies)/Person(s)	(Y/N)	*
00000		00000	. 27 - 5466079			NASDAQ	Atlas Financial Holdings, Inc	CYM	UIP		Ownership	0.0	Atlas Financial		0
00000		00000	27-3539769				American Insurance Acquisition,	DE	UIP	Atlas Financial Holdings, Inc.	Ownership	100 0	Holdings Inc		0
00000		00000	. 21 - 33331 03				American Country Insurance	µ∟		American Service Insurance	ownersinp		Atlas Financial		0
04795	Atlas Financial Holdings Group.	38237	36-4168532				Company	IL		Company, Inc	Ownership	100.0	Holdings Inc		0
							American Service Insurance			American Insurance			Atlas Financial		
04795	Atlas Financial Holdings Group.	42897	. 36-3223936				Company, Inc	IL	UDP	Acquisition, Inc	Ownership		Holdings Inc		0
										American Insurance			Atlas Financial		
04795	Atlas Financial Holdings Group	28339	43-0762309				Gateway Insurance Company	MO	IA	Acquisition, Inc	Ownership		Holdings Inc		0
00000		00000	00 4000054				Anahan Haldinga Chaus Inc	NY	NIA	American Insurance	Ownershin	100.0	Atlas Financial		0
00000		00000	. 06 - 1623351				Anchor Holdings Group, Inc Global Liberty Insurance	IN Y	NTA	Acquisition, Inc	Ownership		Holdings Inc Atlas Financial		0
04795	Atlas Financial Holdings Group.	11092	22-3733783				Company of New York	NY	IA	Anchor Holdings Group, Inc	Ownership	100 0	Holdings Inc		0
04700	intras i manorar norarngs croup.	11002	. 22 0100100							American Insurance	ownoronnp		Atlas Financial		
00000		00000	06-1628915				Anchor Group Management, Inc	NY	NIA	Acquisition, Inc	Ownership		Holdings Inc		0
							Plainview Premium Finance			American Insurance	'		Atlas Financial		
00000		00000	20-3149956				Company, Inc	DE	NIA	Acquisition, Inc	Ownership		Holdings Inc		0
00000		00000	00 0707740					55		American Insurance	o 1.:	100.0	Atlas Financial		0
00000		00000	. 82 - 2797749				UBI Holdings, Inc	DE	NIA	Acquisition, Inc	Ownership		Holdings Inc Atlas Financial		0
00000		00000	82-2941857				DriveOn Digital IP, Inc	DE	NIA	UBI Holdings, Inc.	Ownership.		Holdings Inc		0
00000		00000	. 02-2341037					DL		obi norumga, me	owner antp		Atlas Financial		
00000		00000	83-1805529				optOn Insurance Agency, Inc	DE	NIA	UBI Holdings, Inc	Ownership		Holdings Inc.		0

Asterisk	Explanation

PART 1 - LOSS EXPERIENCE

			Current Year to Date					
	Line of Business	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage			
1.	Fire			.0.0	0.0			
2.	Allied lines							
3.	Farmowners multiple peril			0.0				
4.	Homeowners multiple peril			0.0				
5.	Commercial multiple peril							
6.	Mortgage guaranty			0.0				
8.	Ocean marine				0.0			
9.	Inland marine				0.0			
10.	Financial guaranty				0.0			
11.1	Medical professional liability -occurrence.			0.0	0.0			
11.2	Medical professional liability -claims made				.0.0			
12.	Earthquake				.0.0			
13.	Group accident and health			0.0	.0.0			
14.	Credit accident and health			0.0	0.0			
15.	Other accident and health			0.0	0.0			
16.	Workers' compensation							
17.1	Other liability occurrence.	1 001 462						
17.1								
	Other liability-claims made			0.0				
17.3	Excess Workers' Compensation			0.0				
18.1	Products liability-occurrence				0.0			
18.2	Products liability-claims made			0.0	0.0			
	9.2 Private passenger auto liability							
19.3,1								
21.	Auto physical damage		1,516,768					
22.	Aircraft (all perils)							
23.	Fidelity							
24.	Surety							
26.	Burglary and theft			0.0				
27.	Boiler and machinery			0.0				
28.	Credit							
29.	International			0.0				
30.	Warranty			0.0				
31.	Reinsurance - Nonproportional Assumed Property	ХХХ	ХХХ	ХХХ	ХХХ.			
32.	Reinsurance - Nonproportional Assumed Liability	ХХХ	ХХХ	ХХХ	ХХХ			
33.	Reinsurance - Nonproportional Assumed Financial Lines	ХХХ	ХХХ	ХХХ	XXX			
34.	Aggregate write-ins for other lines of business	0	0	0.0	0.0			
35.	TOTALS	63,981,093	38.741.966	60.6	35.5			
	ETAILS OF WRITE-INS	03,301,033	30,741,300	00.0	00.0			
	ETAILS OF WRITE-INS				0.0			
					0.0			
3402.				0.0	0.0			
			~ ~ ~	0.0	0.0			
	um. of remaining write-ins for Line 34 from overflow page	Ò	Ó		0.0			
3499. T	otals (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0.0	0.0			

PART 2 - DIRECT PREMIUMS WRITTEN

15. Other accident and health 16. Workers' compensation 17.1 Other liability occurrence 17.2 Other liability-claims made	0	Current Year to Date	Prior Year 0 Year to Date 0 0 0 0 0 0 0 0 0 0 0 0 0 0
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. 17.2 Other liability-claims made.	00000000 .		
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 17.2 Other liability-occurrence	0		0 0 0 0 0
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 17.2 Other liability occurrence	0 0 0 0		0 0 0
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	0 0 0 0		0 0
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 17.2 Other liability-claims made	0 0 0 0		
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-claims made 17.2 Other liability-claims made	0 0 0 0		0
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 17.2 Other liability-claims made	0		
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 17.2 Other liability-claims made	0		0
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-claims made			0
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-claims made 17.2 Other liability-claims made	0.		0
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. 17.2 Other liability-claims made.	0		0
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. 17.2 Other liability-claims made.			0
13. Group accident and health 14. Credit accident and health 15. Other accident and health 16. Workers' compensation 17.1 Other liability occurrence. 17.2 Other liability-claims made.	0		0
14. Credit accident and health 15. Other accident and health 16. Workers' compensation 17.1 Other liability occurrence 17.2 Other liability-claims made	0		0
15. Other accident and health 16. Workers' compensation 17.1 Other liability occurrence 17.2 Other liability-claims made			0
16. Workers' compensation 17.1 Other liability occurrence 17.2 Other liability-claims made	0		0
17.1 Other liability occurrence	0		.929.326
17.2 Other liability-claims made	263 646	966.379	944 165
			0,100
1/3 Excess Workers' Compensation			0
18.1 Products liability-occurrence			0
19.1,19.2 Private passenger auto liability			0
19.3,19.4 Commercial auto liability	27 101 082	74 497 367	68 490 090
21. Auto physical damage	6 410 026	8 509 280	2 851 735
22. Aircraft (all perils)			
23. Fidelity	0		0
24. Surety	0		0
			0
27. Boiler and machinery			
28. Credit			L
29. International	0		
31. Reinsurance - Nonproportional Assumed Property		YYY	
32. Reinsurance - Nonproportional Assumed Liability		¥¥¥	
 Reinsurance - Nonproportional Assumed Financial Lines Reinsurance - Nonproportional Assumed Financial Lines 			
34. Aggregate write-ins for other lines of business			
35. TOTALS	33,774,754	83,973,026	73,215,325
DETAILS OF WRITE-INS	33,774,734	03,973,020	10,210,020
3401.	0		0
3498. Sum. of remaining write-ins for Line 34 from overflow page	0		U
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34)	0		0 0 0

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2018 Loss and LAE Payments on Claims Reported as of Prior Year-End	2018 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2018 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. 2015 + Prior	3, 150		11,056	8,104					(324)	2,014	7 ,058 .	(7,096)	(38)
2. 2016		5 , 156	8,457	4,668		5,187	2,199			3,276	3,566	(3,560)	6
3. Subtotals 2016 + prior	6,451	13,062		12,772	1,419	14,191	4,303				10,624	(10,656)	(32)
4. 2017				7,710		8,567	5,275		5,327	11,188	6,239	(6,013)	
5. Subtotals 2017 + prior		25,845		20 , 482	2,276	22,758	9,578	1,064	5,836	16,478	16,863	(16,669)	194
6. 2018	xxx		xxx	XXX		8,133	XXX	5 , 140	11,157		xxx	XXX	
7. Totals	13,197	25,845	39,042	20,482	10,409	30,891	9,578	6,204	16,993	32,775	16,863	(16,669)	194
Prior Year-End 8. Surplus As Regards Policy- holders	18,254										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. 127.8	2. (64.5)	
													Col. 13, Line 7 Line 8
													4. 1.1

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

Explanation:

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

Bar Code:

OVERFLOW PAGE FOR WRITE-INS

PQ002 Additional Aggregate Lines for Page 02 Line 25.
<u>*ASSETS</u>_____

7.66216				
	1	2	3	4
				December 31 Prior
			Net Admitted Assets	Year Net Admitted
	Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets
2504. Other assets - other deposits			0	0
2505			0	0
2597. Summary of remaining write-ins for Line 25 from Page 02	41,549	41,549	0	0

SCHEDULE A – VERIFICATION

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

SCHEDULE B – VERIFICATION Mortgage Loans

	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		0
	2.1 Actual cost at time of acquisition		0
3.	Capitalized deferred interest and other		0
4.	Accrual of discount		0
5.	Unrealized valuation increase (decrease). Total gain (loss) on disposals. Deduct amounts received on disposals.		0
6.	Total gain (loss) on disposals		0
7.	Deduct amounts received on disposals		0
8.	Deduct amortization of premium and mortgage interest points and commitment fees		0
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		0
10.	Deduct amortization of premium and mortgage interest points and commitment fees. Total foreign exchange change in book value/recorded investment excluding accrued interest Deduct current year's other-than-temporary impairment recognized.		0
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-		
	8+9-10)	2,515,581	
12.	Total valuation allowance	0.545.504	0
13.	Subtotal (Line 11 plus Line 12)	2,515,581	
14.	Deduct total nonadmitted amounts		0
15.	Statement value at end of current period (Line 13 minus Line 14)	2,515,581	2,600,000

SCHEDULE BA – VERIFICATION

2 Prior Year Ended December 31

Other Long-Term Invested Assets		
	1	
	Year To Date	
Book/adjusted carrying value, December 31 of prior year Cost of acquired: 2.1 Actual cost at time of acquisition	7 ,016 ,285	
2.2 Additional investment made after acquisition		

1. Book/adjusted carrying

2. Cost of acquired:

Z.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		0
4.	Accrual of discount		0
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		0
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		0
9.	Total foreign exchange change in book/adjusted carrying value		0
10.	Deduct current year's other-than-temporary impairment recognized		0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	7,115,609	7,016,285

SCHEDULE D – VERIFICATION

Bonds and Stocks

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year		
2.	Cost of bonds and stocks acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		1,787
5.	Total gain (loss) on disposals		4,715
	Deduct consideration for bonds and stocks disposed of		
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other-than-temporary impairment recognized		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)		
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	33.094.055	28.063.871

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

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation 1 2 3 4 5 6 7 During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation 6 7													
	1 Book/Adjusted Carrying Value Beginning of	2 Acquisitions During	3 Dispositions During	4 Non-Trading Activity During	5 Book/Adjusted Carrying Value End of	6 Book/Adjusted Carrying Value End of	7 Book/Adjusted Carrying Value End of	8 Book/Adjusted Carrying Value December 31					
NAIC Designation	Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year					
BONDS													
1. NAIC 1 (a)				(19,653)									
2. NAIC 2 (a)					10,510,072			5,060,447					
3. NAIC 3 (a)	0				0	0	0						
4. NAIC 4 (a)					0	0	0	0					
5. NAIC 5 (a)					0	0	0	0					
6. NAIC 6 (a)	0				0	0	0	0					
7. Total Bonds	36,629,226	505,412	4,018,908	(21,668)	40,680,051	36,629,226	33,094,062	28,063,869					
PREFERRED STOCK													
8. NAIC 1					0	0	0	0					
9. NAIC 2	0				0	0	0	0					
10. NAIC 3					0	0	0	0					
11. NAIC 4					0	0	0	0					
12. NAIC 5					0	0	0	0					
13. NAIC 6	0				0	0	0	0					
14. Total Preferred Stock	0	0	0	0	0	0	0	0					
15. Total Bonds & Preferred Stock	36,629,226	505,412	4,018,908	(21,668)	40,680,051	36,629,226	33,094,062	28,063,869					

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$

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

Schedule DA - Part 1

Schedule DA - Verification

Schedule DB - Part A - Verification

Schedule DB - Part B - Verification

Schedule DB - Part C - Section 1

Schedule DB - Part C - Section 2 NONE

Schedule DB - Verification

Schedule E - Part 2 - Verification

Schedule A - Part 2

Schedule A - Part 3

SCHEDULE B - PART 2

Showing All Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter

2 3 Actual Cost at Additional Investment Made	Snowing All mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter													
2 3 Loan Number City State Loan Type Date Acquired Rate of Interest Actual Cost at Time of Acquisition Additional Investment Made After Acquisition Value of Land and Buil	1	Location		4	5	6	7	8	9					
Loan Number City State Loan Type Date Acquired Rate of Interest Actual Cost at Time of Acquisition Additional Investment Made After Acquisition		2	3	1										
Loan Number City State Loan Type Date Acquired Rate of Interest Actual Cost at Time of Acquisition Additional Investment Made After Acquisition Value of Land and Bui Image: Acquired Image: Acquired Image: Acquisition Image: Acquisition Image: Acquisition Value of Land and Bui Image: Acquired Image: Acquired Image: Acquisition Image: Acquisition<		-	Ŭ											
Loan Number City State Loan Type Date Acquired Rate of Interest Actual Cost at Time of Acquisition Additional Investment Made After Acquisition Value of Land and Bui Image: State Image: State <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>														
Loan Number City State Loan Type Date Acquired Rate of Interest Time of Acquisition After Acquisition Value of Land and Bui Image: State I							Actual Cost at	Additional Investment Made						
NONE	Loan Number	Citv	State	Loan Type	Date Acquired	Rate of Interest	Time of Acquisition	After Acquisition	Value of Land and Buildings					
NONE		,		<i></i>	· · · · ·		· · · · ·		v					
NONE														
NONE														
NONE														
NONE														
NONE														
]										
			l											
339999 Totals 0 0	3399999 Totals						0	0	0					

SCHEDULE B - PART 3

Showing All Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter

1 Location				5	6	7		Change	in Book Valu	e/Recorded In	vestment		14	15	16	17	18
	2	3					8	9	10	11	12	13				'	
						Book							Book			'	
						Value/Re-							Value/Re-			'	· · · ·
						corded			Current			Tatal	corded				
						Investment Excluding	Unrealized	Quant	Year's	Capitalized	Total	Total Foreign	Excluding		Foreign		
						Accrued	Valuation	Current Year's	Temporary		Change in	Exchange	Accrued		Exchange	Realized	Total Gain
			Loan	Date	Disposal	Interest	Increase	(Amortization)/		Interest and	Book Value	Change in			Gain (Loss)	Gain (Loss)	(Loss) on
Loan Number	City	State	Туре	Acquired	Date	Prior Year	(Decrease)	Accretion	Recognized	Other	(8+9-10+11)	Book Value	Disposal	Consideration	on Disposal	on Disposal	Disposal
Mortgages with partial repaymen			Â				1				<u></u>		50.000	50.000			
	Schaumburg.	1L		11/10/2016		2,600,000					0						0
0299999 - Mortgages with parti	iai repayments					2,600,000	0	0	0	0	0	0	50,862	50,862	0		
										+							+
							.									ļ	. !
																'	· + /
																'	.µ/
										+							+
										1						1	+
							I			ļ							1
						.	.									······	.µ
										+							+
0599999 Totals				•		2,600,000	0	0	0	0	0	0	50,862	50,862	0	0	0

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter Location 12 5 8 10 11 13 1 6 7 9 3 4 Name Date Originally Acquired Percentage of Type and Actual Commitment Cost at Time of CUSIP for Additional NAIC Vendor or Additional Investment Amount of of Identification Name or Description City State General Partner Designation Strategy Acquisition Made After Acquisition Encumbrances Investment Ownership 4499999 – Subtotals - Unaffiliated 4599999 – Subtotals - Affiliated ХХХ ХХХ 0 0 0 0 4699999 Totals XXX Ω Ω Ω

SCHEDULE BA - PART 3

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

1	2	Loc	ation	5	6	7	8		Change	in Book/Adj	usted Carryin	g Value		15	16	17	18	19	20
		3	4					9	10	11	12	13	14						1
							Book/		Current	Current				Book/Adjusted					1
							Adjusted		Year's	Year's		Total	Total	Carrying		<u>-</u> .			1
					Data		Carrying	Unrealized	(Depreciation)	Other Than		Change	Foreign	Value		Foreign	Realized	Total	1
CUSIP	Nome or			Nome of Durchaser or	Date	Diamagal	Value Less	Valuation	or	Temporary	Deferred	in D (A O) (Exchange	Less		Exchange	Gain	Gain	Investment
Identification	Name or Description	Citv	State	Name of Purchaser or Nature of Disposal	Originally Acquired	Disposal Date	Encumbrances Prior Year	Increase (Decrease)		Impairment	Interest and Other	B./A.C.V. (9+10-11+12)		Encumbrances on Disposal	Consideration	Gain (Loss)	(Loss) on Disposal	(Loss) on Disposal	Investment Income
Identification	Description	Oity	Sidie	Nature of Disposal	Acquireu	Date	FIIOI Teal	(Decrease)	Accretion	Recognized		(9+10-11+12)	B./A.C.V.	UII Disposai	Consideration		Disposal	Disposai	income
								••••											
4499999 - Subtotal	s - Unaffiliated				· • · · · · · · · · · · · · · · · · · ·	·····													
4599999 – Subtotal																			<u> </u>
4699999 Totals																			
4033333 10(a)3														•••••					<u>لــــــا</u>

SCHEDULE BA - PART 2

SCHEDULE D - PART 3

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

Show All Long-Term Bonds and Stock Acquired During the Current Quarter												
1	2	3	4	5	6	7	8	9	10			
									NAIC			
									Designation o			
CUSIP					Number of	Actual		Paid for Accrued	Designation o Market			
Identification	Description	Foreign	Date Acquired	Name of Vendor	Shares of Stock	Cost	Par Value	Interest and Dividends	Indicator (a)			
Bonds - U.S. Govern												
912828-ON-3	UNITED STATES TREASURY		08/09/2018	MERRILL LYNCH FIXED INCOME.	XXX				1 1			
	Is - U.S. Governments					505,412	500,000	3,694				
	otals - Bonds - Part 3					505,412	500,000	3,694				
8399999 - Subto						505,412	500,000	3,694				
8399999 - Subto	otais - Bonds	-			1	505,412	500,000	3,094	<u>^^^</u>			
					+				+			
					+				+			
					1				+			
					1				1			
					1							
					+							
					1				1			
					I							
9999999 Totals						505,412	XXX	3,694	XXX			

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

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

					0110	W All Long-I	cim Donus	und Olock OC	Jiu, Redecine			t During the C	unioni Quunic	-						
1	2	3 4	5	6	7	8	9	10		Change in E	Book/Adjusted Ca	arrying Value		16	17	18	19	20	21	22
								[(
									11	12	13	14	15							(
		F																		NAIC
		0																		Desig-
		r									Current Year's			Book/				Bond		nation
		e						Prior Year	Unrealized		Other Than		Total Foreign	Adjusted	Foreign			Interest/Stock	Stated	or
CUSIP		i		Number of				Book/Adjusted	Valuation	Current Year's		Total Change in		Carrying Value	Exchange Gain	Realized Gain	Total Gain	Dividends	Contractual	Market
Identi-		g Disposal		Shares of				Carrying	Increase/	(Amortization)/	Impairment	B./A.C.V.	Change in	at	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Indicator
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.	. Governments																			
	G2 002998 - RMBS	08/01/2018.	VARIOUS	ХХХ			3,471			0		0				(230)	(230)		11/20/2030	1
	GNR 1217B KG - CM0/RMBS		Paydown	ХХХ						(406)		(406)					0		07/20/2039	·····1·····
	UNITED STATES TREASURY		. Maturity @ 100.00														0	7,500	08/31/2018	······1
	Bonds - U.S. Government				522,800	522,556	526,692	523,842	0	(811)	0	(811)	0	523,030	0	(230)	(230)	7,925	XXX	XXX
			nt and all Non-Guaranteed	Obligations of A	Agencies and Au	uthorities of Gov		Their Political S	ubdivisions											
31292H-FT-6	FH C01078 - RMBS	08/01/2018.	VAR10US	ХХХ		2,011		2,304		2		2		2,306		(216)	(216)		10/01/2030	·····1····
3136A7-FL-1	FNR 1270D HP - CMO/RMBS	09/01/2018	Paydown									(186)				l	0		01/25/2041	·····
	FNR 145E LB - CMO/RMBS FNR 13119E VA - CMO/RMBS.		Paydown														L0		07/25/2043	·····1·····
	FNR 13119E VA - CMU/RMBS FNR 1547C GA - CMU/RMBS		Paydown Paydown														0		10/25/2033 06/25/2044	·····l
	FWLS 17SC02 2A1 - CM0									(1,243)		(193)		8,743			0		05/25/2047	(
314030-61-0	FN 745275 - RMBS.			XXX	943	943				(84)		(84)		943			0	28	02/01/2036	1 1
	FN AB4052 - RMBS			ХХХ	16,817					(1,344)		(1,344)		16.817			0	415	12/01/2041	1
31418A-JV-1	FN MA1175 - RMBS		Paydown	ХХХ								(752) (409)					0		09/01/2042	11
31419J-TQ-1	FN AE7758 - RMBS	09/01/2018	Paydown	ХХХ													0		11/01/2025	í1
	LOUISIANA LOC GOVT																			i
	ENVIRONMENTAL FACS &		Call @ 100.00	XXX						0		0				1	1		02/01/2022	1FE
3199999 -			al Assessment and all Non-																	(
		s and Authoritie	s of Governments and Their	r Political																(
	Subdivisions				152,325	152,246	158,117	157,327	0	(4,787)	0	(4,787)	0	152,540	0	(215)	(215)	2,705	XXX	XXX
	strial and Miscellaneous (Unaffiliated)																		
00842C-AF-2	ABMT 157 A6 - CM0/RMBS		Paydown	ХХХ		17 ,941				(138)		(138)					0		11/27/2045	1FM
	ANHEUSER-BUSCH INBEV	00/05/00/0			000 505	700.000				700		700		000.000		(0, 100)	(0, 400)	15 050	00/04/0000	055
035242-AP-1		.C09/05/2018.														(3,403) (5,872)	(3,403)		02/01/2026	2FE
05547G-AA 1	APPLIED MATERIALS INC BBCMS 15STP A - CMBS			XXX												(3,0/2)	(5,872)	30,708 	04/01/2027	1FE 1FM
05565E-AW-5	BMW US CAPITAL LLC	09/05/2018.	MARKETAXESS.	XXX								(00) 8						2 139	04/12/2023	1FE
	CBASS 05CB5 AF4 - RMBS		Pavdown	XXX	1.791	1.791				22		22		1.791					01/25/2033	1FM
	CSMC 140AK1 1A1 -						,													1
12649G-AA-4				ХХХ								(42)					0	253	11/26/2029	1FM
	FSMT 171 1A3 - CMO/RMBS	09/01/2018	Paydown	ХХХ						(148)		(148)					0	214	03/25/2047	1FM
	GSMS 12SHOP A - CMBS	09/05/2018	MORGAN STANLEY & CO LLC	XXX		700,000		709,092				(4,410)				(4,135)	(4,135)		06/06/2031	1FM
	HART 18A A2A - ABS		WELLS FARGO BROKERAGE													(1,051)	(1,051)		04/15/2021	1FE
	JPMMT 153 A3 - CMO/RMBS JPMMT 174 A5 - CMO/RMBS		Paydown Paydown	XXX XXX															05/25/2045 11/25/2048	1FE 1FM
	JPMMT 174 A3 - CMO/RMBS		Paydown							(218)		(109)		20.530		0	U		11/25/2046	1Fm
	NRZT 152 A1 - CMO/RMBS		Pavdown	XXX						(103)		(103)					0		08/25/2055	1FM
	SEMT 143 A8 - CMO/RMBS		Paydown	XXX	7,540	7,540	7,764	7,766		(225)		(225)		7,540			0		10/25/2044	1FM
	WIN 141 A2 - CMO/RMBS	09/01/2018.		ХХХ						(517)		(517)					0	434	06/20/2044	1FM
3899999 -	Bonds - Industrial and Mis	scellaneous (Un	affiliated)		3,327,908	3,371,577	3,364,218	800,121	0	(4,571)	0	(4,571)	0	3,343,337	0	(15,429)	(15,429)	73,133	XXX	ХХХ
	Subtotals - Bonds - Part 4		,		4.003.033	4,046,379	4,049,027	1,481,290	0	(10,169)	0	(10,169)	0	4.018.907	0	(- 7 - 7	(15,874)	83.763	XXX	XXX
	Subtotals - Bonds				4,003,033	4,046,379	4.049.027	1,481,290	0	(10,169)	0	(10,169)	0	1.5 - 1.5 - 5	0		(15,874)	83,763	XXX	XXX
9999999 T					4,003,033	XXX	4,049,027	1,481,290	0	(10,169)	0	(10,169)	0	1.5	0	(. / . /	(15,874)	83,763	XXX	ХХХ
9999999	ulais				4,003,033	۸۸۸	4,049,027	1,401,290	0	(10,109)	U	(10,109)	0	4,010,907	U	(10,074)	(10,0/4)	00,703	۸۸۸	۸۸۸

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

Schedule DB - Part A - Section 1

Schedule DB - Part B - Section 1

Schedule DB - Part D - Section 1

Schedule DB - Part D - Section 2

Schedule DL - Part 1

Schedule DL - Part 2

SCHEDULE E - PART 1 - CASH Month End Depository Balances

Month End Depository Balances											
1	2	3	4	5	Book E		9				
Deperitory	Codo	Rate of	Amount of Interest Received During Current	Amount of Interest Accrued at Current Statement	6	7 7 Second Month	8	-			
Depository Open Depositories	Code	Interest	Quarter	Date	FIRST MONTH	Second Month	Third Month				
Fifth Third BankChicago, IL		1.200		1,451			3, 157, 285	XXX			
Key Bank								XXX			
0199998 Deposits in depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories	XXX	ХХХ						XXX			
0199999 Total Open Depositories	XXX	XXX	1,501	1,451	(87,098)	(3,081,049)	3,182,285	XXX			
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0399999 Total Cash on Deposit	ХХХ	ХХХ	1,501	1,451	(87,098)	(3,081,049)	3,182,285	 XXX			
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX			
0599999 Total	XXX	XXX	1,501	1,451	(87,098)	(3,081,049)	3,182,285	XXX			

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter												
1	2	3	4	5	6	7	8	9				
			Date	Rate of	Maturity	Book/Adjusted Carrying Value	Amount of Interest	Amount Received				
CUSIP	Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year				
					•••••							
		\										
		.										
								1				
	iaah Equivalanta					0						
8899999 Total C	ash Equivalents					0	0	0				