

QUARTERLY STATEMENT

AS OF SEPTEMBER 30. 2017 OF THE CONDITION AND AFFAIRS OF THE

....

		American	Country In	sura	nce Com	pany	
NAIC Group Code	04795 (Current Period)	, 04795 (Prior Period)	_ NAIC Company	Code	38237	_ Employer's ID Nu	mber <u>36-4168532</u>
Organized under the I	Laws of	Illinois		, State	of Domicile or P	ort of Entry	Illinois
Country of Domicile				United	d States		
Incorporated/Organize	ed	12/07/1978		_ Comm	enced Business		12/31/1979
Statutory Home Office		953 American La			,	Schaumburg, I	
Main Administrative C	Office 95	(Street and I 3 American Lane, 3	rd Floor		Schaumburg, IL,	(City or Town, State, Co US 60173	847-472-6700
Mail Address		(Street and Number nerican Lane, 3rd Fl	oor	(City		Schaumburg, IL, U	S 60173
Primary Location of B			Lane, 3rd Floor and Number)		Schaumburg	y or Town, State, Country , IL, US 60173 Country and Zip Code)	847-700-8603
Internet Web Site Add	lress			www.a	atlas-fin.com		
Statutory Statement C	Contact	Paul A	nthony Romano			847-700	-8603
(Name) promano@atlas-fin.com			(Name)			(Area Code) (Telephone 847-264-2716	Number) (Extension)
	(E-Mail Addre	ss)				(Fax Number)	
			OFFIC	ERS			
Name		Title			Name		Title
Scott David V Leslie Patterson		President, Secretary, VP Ope		Pa	ul Anthony Rom	ano,VF	P Finance, CFO, Treasurer
	<u></u> ,,			FICE	रऽ	,	
Bruce Wayne	e Giles,	VP Product Deve Underwri	•	Jose	ph Raymond Sh	ugrue,	VP Claims
		DIR			STEES		
Leslie Patterson Scott David V		Bruce Wayn		_	ul Anthony Rom	ano Jo	oseph Raymond Shugrue
State of	IL						
County of	Cook	SS					
				Alexa alexa da 19	and officiency of the last		

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

Scott David Wollney President, CEO

Paul Anthony Romano VP Finance, CFO, Treasurer

Leslie Patterson DiMaggio Secretary, VP Operations & IT

Yes [X] No []

a. Is this an original filing?

Subscribed and sworn to before me this 10th _day of November, 2017 b If no. 1. State the amendment number

2 Date filed

3. Number of pages attached

Louis Charouhis, Sr. Staff Accountant March 1, 2009

	ASSETS						
			Current Statement Date		4		
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets		
1.	Bonds						
	Stocks:			20, 102,010			
	2.1 Preferred stocks						
	2.2 Common stocks						
3.	Mortgage loans on real estate:						
	3.1 First liens						
	3.2 Other than first liens						
4.	Real estate:						
	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 (\$1,944,829),						
	cash equivalents (\$)						
	and short-term investments (\$).						
	Contract loans (including \$ premium notes)		1				
	Derivatives						
	Other invested assets			6 , 964 , 182 .	5,591,639		
	Receivables for securities		1	I I			
	Securities lending reinvested collateral assets						
	Aggregate write-ins for invested assets						
	Subtotals, cash and invested assets (Lines 1 to 11)						
13.	Title plants less \$ charged off (for Title insurers						
	only)						
	Investment income due and accrued						
15.	Premiums and considerations:						
	15.1 Uncollected premiums and agents' balances in the course of	44 050 000	5 040 504	0.040.540	40,070,400		
	collection		5,812,581				
	15.2 Deferred premiums, agents' balances and installments booked but						
	deferred and not yet due (including \$earned	00,404,000		20,404,200	47 700 000		
	but unbilled premiums)						
	15.3 Accrued retrospective premiums (\$						
10	contracts subject to redetermination (\$)						
16.	Reinsurance:	11 170 000		11 170 000	0 740 040		
	16.1 Amounts recoverable from reinsurers		1				
	16.2 Funds held by or deposited with reinsured companies						
17	16.3 Other amounts receivable under reinsurance contracts						
	Amounts receivable relating to uninsured plans I Current federal and foreign income tax recoverable and interest thereon						
	2 Net deferred tax asset						
	Guaranty funds receivable or on deposit						
	Electronic data processing equipment and software			1 1			
	Furniture and equipment, including health care delivery assets						
21.	(\$)						
22	Net adjustment in assets and liabilities due to foreign exchange rates						
	Receivables from parent, subsidiaries and affiliates						
	Health care (\$						
	Aggregate write-ins for other-than-invested assets						
	Total assets excluding Separate Accounts, Segregated Accounts and						
	Protected Cell Accounts (Lines 12 to 25)	106,480,352	8,362,340	98,118,013	86,963,420		
27.	From Separate Accounts, Segregated Accounts and Protected	,,	.,,.		,,		
	Cell Accounts.						
28.	Total (Lines 26 and 27)	106,480,352	8,362,340	98,118,013	86,963,420		
_0.	DETAILS OF WRITE-INS	,	2,002,010				
1101	Deposits in pools and assciations						
	Summary of remaining write-ins for Line 11 from overflow page						
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)						
	Deposits in pools and associations	357 673					
	Receivable from pools						
	Prepaid expenses.						
	Summary of remaining write-ins for Line 25 from overflow page		.,				
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	620,814		464,964	365,320		
2000.	1000 (LINE 20 duougi 2000 pius 2000) (LINE 20 duove)	020,014	100,000	-0-1,304	JUJ , JZL		

ASSETS

LIABILITIES, SURPLUS AND OTHER FUNDS

	LIADILITILS, SURFLUS AND UTTER I		
		1 Current	2 December 31,
		Statement Date	Prior Year
	Losses (current accident year \$10,277,701)		
	Reinsurance payable on paid losses and loss adjustment expenses		2,859,645
	Loss adjustment expenses		6,346,356
	Commissions payable, contingent commissions and other similar charges		2,415,424
	Other expenses (excluding taxes, licenses and fees)		
	Taxes, licenses and fees (excluding federal and foreign income taxes)		
	1 Current federal and foreign income taxes (including \$		
	2 Net deferred tax liability		
	Borrowed money \$		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
	including warranty reserves of \$	22 204 700	04 040 000
40	including \$ for medical loss ratio rebate per the Public Health Service Act)		
	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
	Ceded reinsurance premiums payable (net of ceding commissions)		
	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)		
	Net adjustments in assets and liabilities due to foreign exchange rates		
	Drafts outstanding		
	Payable to parent, subsidiaries and affiliates		
	Derivatives		
	Payable for securities		
	Payable for securities lending		
	Liability for amounts held under uninsured plans		
	Capital notes \$and interest thereon \$		
	Aggregate write-ins for liabilities		
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
		74 050 540	
	Total liabilities (Lines 26 and 27)		
	Aggregate write-ins for special surplus funds		
	Common capital stock		
	Preferred capital stock		
	Aggregate write-ins for other than special surplus funds		
	Surplus notes		
	Gross paid in and contributed surplus		
	Unassigned funds (surplus)		
30.	Less treasury stock, at cost:		
	36.1		
37	36.2		25 061 460
	Surplus as regards policyholders (Lines 29 to 35, less 36)		25,061,460
30.	Totals (Page 2, Line 28, Col. 3) DETAILS OF WRITE-INS	98,118,013	86,963,420
2501	Unearned ceded commissions	331 /06	
	Other liability - premium deficiency reserve		
	Escheatables		
	Summary of remaining write-ins for Line 25 from overflow page		100,211
		587.784	601,668
		, .	
	Summary of remaining write-ins for Line 29 from overflow page		390,709
	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		,
	Summary of remaining write-ins for Line 32 from overflow page		
	Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		
5233.	יטנמוט ובוווכט טבט ד נוווטעצוו טבטט אונט טבטט (בוווב טב מטטעב)		

STATEMENT OF INCOME

		1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	UNDERWRITING INCOME			
1.	Premiums earned: 1.1 Direct (written \$	57 104 282		
	1.2 Assumed (written \$		29.892.999	
	1.3 Ceded (written \$			
	1.4 Net (written \$			40 , 105 , 630
	DEDUCTIONS:			
2.	Losses incurred (current accident year \$15,361,444):	20, 240, 240	16 000 605	10 000 605
	2.1 Direct			42 , 889 , 625
	2.3 Ceded			
	2.4 Net			
	Loss adjustment expenses incurred		5,432,031	7 , 989 , 495
	Other underwriting expenses incurred			
5.	Aggregate write-ins for underwriting deductions			
6. 7	Total underwriting deductions (Lines 2 through 5)			
7. 8	Net income of protected cells Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	5 313 7/0		
0.	Net underwhung gain (loss) (Line 1 minus Line 6 + Line 7)			
•			202.074	540, 400
	Net investment income earned			519 , 132 199 ,269
	Net investment gain (loss) (Lines 9 + 10)			
	Net investment gain (ioss) (Lines 9 + 10)			
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off	(040,000)	(400,000)	(0.17, 0.05
10	(amount recovered \$			(247,605) 118,917.
	Finance and service charges not included in premiums			
	Total other income (Lines 12 through 14)	(,)	(48,037)	212,046
	Net income before dividends to policyholders, after capital gains tax and before all other federal		(40,007)	212,040
	and foreign income taxes (Lines 8 + 11 + 15)			
	Dividends to policyholders			
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal	5 654 200		
10	and foreign income taxes (Line 16 minus Line 17) Federal and foreign income taxes incurred		1,039,272	(882,561) (2,105,700
	Net income (Line 18 minus Line 19)(to Line 22)		2,818,657	(1,283,199
20.		0,000,221	2,010,007	(1,200,100
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year			
22.	Net income (from Line 20)		2,818,657	(1,283,199)
	Net transfers (to) from Protected Cell accounts			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of	40,000	(50,045)	(00.040
25.	\$		(30,043)	
	Change in net unrealized foreign exchange capital gain (loss) Change in net deferred income tax	782 189	(247-235)	852 765
	Change in nonadmitted assets			
	Change in provision for reinsurance			
	Change in surplus notes			
	Surplus (contributed to) withdrawn from protected cells			
	Cumulative effect of changes in accounting principles			
32.	Capital changes:			
	32.1 Paid in			
	32.3 Transferred to surplus (Stock Dividend)			
33.	Surplus adjustments:			
	33.1 Paid in			
	33.2 Transferred to capital (Stock Dividend)			
	33.3 Transferred from capital			
	Net remittances from or (to) Home Office			
	Dividends to stockholders			
	Change in treasury stock Aggregate write-ins for gains and losses in surplus			390,709
	Change in surplus as regards policyholders (Lines 22 through 37)		2,893,632	(2,991,496
	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	27,065,470	30,946,588	25,061,460
	DETAILS OF WRITE-INS	,,	,,	.,, 100
	CLAD fees			
	Premium deficiency expense			
	Summary of remaining write-ins for Line 5 from overflow page		35,162	51 700
	TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) Retroactive reinsurance income	20,851		51,703 323,402
	Miscellaneous income			
	Fines and penalties			
	Summary of remaining write-ins for Line 14 from overflow page			
		(8,536)	53,083	340,734
498.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	(0,000)	,	
498. 499.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above) Other surplus adjustments		,	
498. 499. 701. 702.	Other surplus adjustments		,	
498. 499. 701. 702. 703.	Other surplus adjustments			

CASH FLOW

		I	-	
		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	34,364,728		
	Net investment income		.495,933	.644,975
	Miscellaneous income	(223,949)	(48,037)	212,046
	Total (Lines 1 to 3)	34,513,227	36,972,412	46,222,209
	Benefit and loss related payments			
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.		,,	
	Commissions, expenses paid and aggregate write-ins for deductions			
	Dividends paid to policyholders			
	Federal and foreign income taxes paid (recovered) net of \$			
	gains (losses)		1,382,500	1,907,500
10.	Total (Lines 5 through 9)	35,594,928	37,724,300	48,430,854
	Net cash from operations (Line 4 minus Line 10)	(1,081,701)	(751,888)	(2,208,645)
	Cash from Investments		· · · /	· · · · · /
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	13,641,012		
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds			
	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			
	13.3 Mortgage loans			2,600,000
	13.4 Real estate			
	13.5 Other invested assets		,,	4 ,026 ,606
	13.6 Miscellaneous applications		391,460	1
	13.7 Total investments acquired (Lines 13.1 to 13.6)	. 13,214,968	16,281,197	18,847,722
14.	Net increase (or decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	. 654,910	734,378	1,379,019
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes			
	16.2 Capital and paid in surplus, less treasury stock			
	16.3 Borrowed funds			
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
	16.5 Dividends to stockholders			(4, 000, 404)
	16.6 Other cash provided (applied)	. (702,808)	179,879	(1,290,164)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(702,808)	179,879	(1,290,164)
	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)			(2, 119, 790)
19.	Cash, cash equivalents and short-term investments:		F 101 015	E 101 C.C
	19.1 Beginning of year			
	19.2 End of period (Line 18 plus Line 19.1)	1,944,829	5,356,588	3,074,429

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern:

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.

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:

		SSAP #	F/S Page	F/S Line #	<u>2017</u>	<u>2016</u>
NET	INCOME					
(1)	Illinois Company state basis (page 4, line 20, columns 1 & 3)				\$ 3,906,221	\$ (1,283,199)
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP:					_
(3)	State Permitted Practices that increase/(decrease) NAIC SAP:					
	Unapproved surplus note interest	00	4	09	 72,466	63,596
(4)	NAIC SAP (1-2-3=4)				\$ 3,833,755	\$ (1,346,795)
SUR	PLUS					
(5)	Illinois Company state basis (page 3, line 37, columns 1 & 2)				\$ 27,065,470	\$ 25,061,460
(6)	State Prescribed Practices that increase/(decrease) NAIC SAP:					_
(7)	State Permitted Practices that increase/(decrease) NAIC SAP:					
	Unapproved surplus note interest	00	3	35	 72,466	63,596
(8)	NAIC SAP (5-6-7=8)				\$ 26,993,004	\$ 24,997,864

C. Accounting Policy

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

No significant changes to the remainder of the note.

2. Accounting Changes and Corrections of Errors:

No significant changes.

3. Business Combinations and Goodwill:

No significant changes.

4. Discontinued Operations:

No significant changes.

5. Investments:

- D. Loan-Backed Securities
 - 1. Prepayment assumptions for fixed rate agency mortgage backed securities are determined using Mortgage Industry Advisory Corporations (MAIC) Mortgage Industry Medians (MIMs). MIMs are derived from a semi-monthly dealer consensus survey of long-term prepayment projections. Prepayment assumptions for other loan-backed and structured securities are obtained from an outside vendor using a model/scenario based on the current interest rate and economic environment.
 - 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.

NOTES TO FINANCIAL STATEMENTS

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:	
--	--

The aggregate rel

with unrealized lo

	1.	Less than 12 Months	\$ 99,898
	2.	12 Months or Longer	\$ 53,976
lated fair value of securities osses:			
	1.	Less than 12 Months	\$ 7,867,000
	2.	12 Months or Longer	\$ 2,057,960

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

(b)

The Company does not have any repurchase agreements.

I. Working Capital Finance Investments

The Company does not have any working capital finance investments.

Offsetting and Netting of Assets and Liabilities

The Company does not have offsetting or netting to report.

No significant changes to the remainder of the note.

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

No significant changes.

7. Investment Income:

J.

No significant changes.

8. Derivative Investments:

No significant changes.

9. Income Taxes:

No significant changes.

10. Information Concerning Parent, Subsidiaries and Affiliates:

No significant changes.

11. Debt:

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

- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans:
 - A. Defined Benefit Plan

The Company does not participate in a defined benefit plan.

No significant changes to the remainder of the note.

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

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

On May 1, 2015, a surplus note in the amount of \$4,600,000 was issued to American Insurance Acquisition, Inc., the Company's parent, in exchange for cash. Interest in the amount of \$197,626 was paid on this note during the year.

No significant changes to the remainder of the note.

NOTES TO FINANCIAL STATEMENTS

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	Leve	11	Level 2	Level 3	Total
a. Assets at fair value Bond					
Industrial and Misc.	\$	— \$	285,000 \$	— \$	285,000

- 2) The Company does not have any fair value measurements categorized within Level 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). The Company does not have any fair value measurements categorized within Level 3.
- 5) The Company does not have derivative assets and liabilities.

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying <u>Value)</u>
Long Term Bonds	\$ 28,371,699	\$ 28,492,877 \$	\$ 3,346,082 \$	25,025,617		

D. The Company does not have any assets that are not practicable to estimate fair value as of September 30, 2017.

21. Other Items:

No significant changes.

22. Events Subsequent:

There are no material subsequent events.

23. Reinsurance:

No significant changes.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination:

F. The Company does not transact any accident and health business.

No significant changes to the remainder of the note.

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE AMERICAN COUNTRY INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

25. Change in Incurred Losses and Loss Adjustment Expenses:

Reserves as of December 31, 2016 were \$25.0 million. As of September 30, 2017, \$19.2 million has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior accident years. Reserves remaining for prior years are now \$5.9 million as a result of re-estimation of unpaid claims and claim adjustment expenses principally on commercial auto lines of insurance. Therefore, there has been unfavorable prior-year development of \$101,000 from December 31, 2016 to September 30, 2017. Any change is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements:

No significant changes.

27. Structured Settlements:

No significant changes.

28. Health Care Receivables:

No significant changes.

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

		ULINAL						
1.1		ansactions requiring the filing of Disclosure of Mate				Yes	[]	No [X]
1.2		ry state?				Yes	[]	No []
2.1	Has any change been made during the year of th reporting entity?	is statement in the charter, by-laws, articles of inco	poration, or d	eed of settlem	ient of the	Yes	[]	No [X]
2.2	If yes, date of change:							
3.1		Holding Company System consisting of two or more				Yes	[X]	No []
	If yes, complete Schedule Y, Parts 1 and 1A.							
3.2	Have there been any substantial changes in the o	organizational chart since the prior quarter end?				Yes	[X]	No []
3.3	If the response to 3.2 is yes, provide a brief descr The Companies parent formed two new non-insu	iption of those changes . rance legal entities in September 2017						
4.1	Has the reporting entity been a party to a merger	or consolidation during the period covered by this s	statement?			Yes	[]	No [X]
4.2	If yes, provide the name of entity, NAIC Company ceased to exist as a result of the merger or conso	/ Code, and state of domicile (use two letter state a lidation.	bbreviation) fo	or any entity th	at has			
		1 Name of Entity NAIC C	2 Company Code	e State of I				
5. 6.1 6.2 6.3	fact, or similar agreement, have there been any s If yes, attach an explanation. State as of what date the latest financial examina State the as of date that the latest financial exam This date should be the date of the examined bal State as of what date the latest financial examina or the reporting entity. This is the release date or	agreement, including third-party administrator(s), n ignificant changes regarding the terms of the agree tion of the reporting entity was made or is being ma ination report became available from either the stat ance sheet and not the date the report was comple tion report became available to other states or the completion date of the examination report and not	ment or princ de e of domicile of ted or release public from eit	ipals involved or the reportin d. her the state of examination	? g entity. of domicile (balance		12/3	1/2015
6.4	By what department or departments?							
6.5	Have all financial statement adjustments within th	e latest financial examination report been accounte	ed for in a sub	sequent finan	cial	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		uthority, licenses or registrations (including corpora y during the reporting period?				Yes	[]	No [X]
7.2	If yes, give full information:							
8.1		mpany regulated by the Federal Reserve Board?				Yes	[]	No [X]
8.2	If response to 8.1 is yes, please identify the name	e of the bank holding company.						
8.3		thrifts or securities firms?				Yes	[]	No [X]
8.4	federal regulatory services agency [i.e. the Feder	e names and location (city and state of the main off al Reserve Board (FRB), the Office of the Comptrol ccurities Exchange Commission (SEC)] and identify	ler of the Curi	rency (OČC), t	the Federal			
	1	2 Logation	3	4	5	6		
	Affiliate Name	Location (City, State)	FRB	occ	FDIC	SEC		

GENERAL INTERROGATORIES

9.1	1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?								
	(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relation								
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic report								
	(c) Compliance with applicable governmental laws, rules and regulations;								
	(d) The prompt internal reporting of violations to an appropriate person or persons	s identifie	ed 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 offi				Yes []	No [X]			
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).								
	FINA	ANCI							
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affili	iates on	Page 2 of this statement?		Yes []	No [X]			
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amoun			\$					
	INVE	STM	ENT						
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, place for use by another person? (Exclude securities under securities lending agreement				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 B/					639,702			
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 affiliat	tes?			Yes [X	(] No []			
14.2	If yes, please complete the following:								
		¢	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value					
	14.21 Bonds 14.22 Preferred Stock			\$ \$					
	14.23 Common Stock	\$		\$					
	14.24 Short-Term Investments		2 600 000	\$					
	14.25 Mortgage Loans on Real Estate		2,600,000	\$2,600,000 \$					
	14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	·		\$2,600,000					
	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?

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

.....

Yes [] No [X]

If no, attach a description with this statement.

GENERAL INTERROGATORIES

- 16 For the reporting entity's security lending program, state the amount of the following as of the current statement date:
 - 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2
 - 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2
 - 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 1M0B2J, Cincinnati,							
Fifth Third Bank	.0H 45227							

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

1	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 quarter? ...

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
5 <i>3</i> /	

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

Yes [X] No [] 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? 18.2 If no, list exceptions:

S \$

Yes [X] No []

Yes [] No [X]

Yes [X] No []

Yes [] No [X]

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE American Country Insurance Company

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 D	ISCOUNT		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									

5.	Operating Percentages:	
	5.1 A&H loss percent	%
	5.2 A&H cost containment percent	%
	5.3 A&H expense percent excluding cost containment expenses	%
6.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]
6.2	If yes, please provide the amount of custodial funds held as of the reporting date	§
6.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]
6.4	If yes, please provide the balance of the funds administered as of the reporting date	6

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE American Country Insurance Company

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

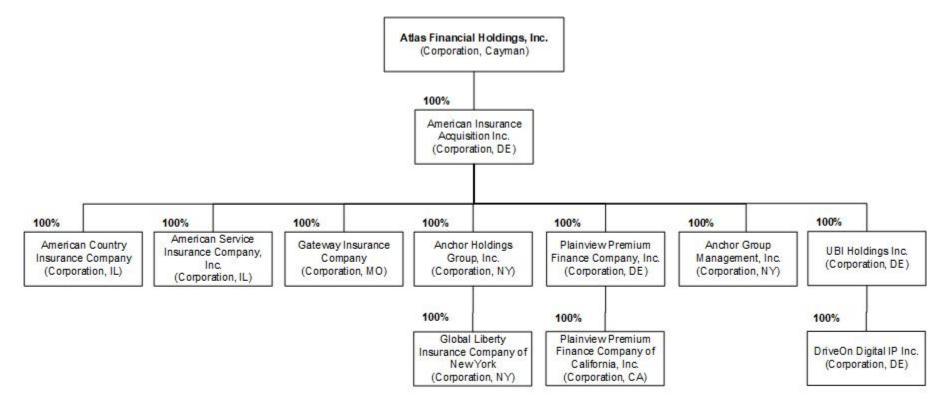
		Showing All New Reinsurers - Current Year to Date												
1	2	3	4	5	6	7								
					6 Certified	Effective Date								
NAIC Company Code					Reinsurer Rating (1 through 6)	of Certified Reinsurer Rating								
Company Codo	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	(1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

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

					o Date – Allocated b		Direct Losses Unpaid			
			1	2	ums Written 3	Direct Losses Paid	5	Direct Losse	es Unpaid7	
	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	
		AL	N							
		AK	N							
		AZ AR	N N							
	Arkansas		NNN.							
	Colorado		N							
		СТ	L							
	Delaware I	DE	N							
9.	Dist. Columbia I	DC	L		145,652		2,135			
	FloridaI		N							
	Georgia		N							
	HawaiiI		N							
	IdahoI		E	0 477 454		0 504 055	0.005.450	4 004 044	0 074 70	
	Illinois I Indiana I	IL	L	6 , 177 , 154 	6,256,036 1,143,440	2,531,255 			3 , 371 , 707 539 , 994	
	lowa l		∟ I		1, 143,440			,		
	Kansas		F			04,091			120,010	
	Kentucky		L					(101,499)		
	Louisiana		<u>n</u>							
	Maine		N							
	Maryland		N							
22.	Massachusetts	MA	L						(3,127	
	Michigan I		L		4, 101, 336	11,712,048	8,591,863 .		(1,342,879	
	MinnesotaI		L		1,856,297		2,300,637 .			
	MississippiI		L							
	Missouri I		N							
	Montana I		N N							
	Nebraska I Nevada I		N	86.386	(339.577)		442.490	(456.633)	200 026	
	New Hampshire		∟ 		(339,377)	1,029,390				
	New Jersey I		NN.							
	New Mexico I		NN.							
	New York		L				11,323,950	16,617,206		
	No. Carolina I		N			-, - , - , -				
	No. Dakota I		E							
36.	Ohio	ОН	L							
	Oklahoma		L		678,613	172,851				
	Oregon		E							
	PennsylvaniaI			1,815,885	1,762,688	736,620				
	Rhode IslandI		1 1							
	So. Carolina		1							
	So. Dakota		L E							
	Texas		L						1 002 237	
	Utah		······			1,393,010				
	Vermont		N							
	Virginia		N							
	Washington		N							
	West Virginia		E							
50.	Wisconsin	WI	L			1 ,028 , 149			400 , 307	
	Wyoming									
	American Samoa		N							
	Guam		N							
	Puerto Rico		N							
	U.S. Virgin Islands		N							
	Northern Mariana Islands I Canada		NNNNNN							
	Aggregate Other Alien									
	Totals	U I	(a) 19	73,215,325	46 , 157 , 324	35,988,997	29,768,076	21,751,783	25,736,231	
	DETAILS OF WRITE-INS		10	10,210,020	10,101,024	00,000,007	20,100,010	21,701,700	20,700,20	
58001.			ХХХ							
58002.			ХХХ							
58003.			ХХХ							
58998.	Summary of remaining write									
	ins for Line 58 from overflow page.	w								
58999.	TOTALS (Lines 58001 thro	ugh								
	58003 plus 58998) (Line 58		vvv							
	above)		XXX	ior or Dominilod BBC						

(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 (other than their state of domicile – see DSLI); (D) DSLI – 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 business in the state. (a) Insert the number of D and 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



Atlas Ownership Percentages	
Public Shareholders Holding Less Than 10% Each	100%
Total	100%

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	16
						Name of					Type of Control				
						Securities					(Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company		Federal		Traded (U.S. or		Domiciliary		Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling		
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				
							American Insurance Acquisition,						Atlas Financial		
00000		00000	27 - 3539769				Inc	DE	UDP	Atlas Financial Holdings, Inc	Ownership		Holdings Inc		
							American Country Insurance			American Insurance			Atlas Financial		
04795	Atlas Financial Holdings Group.	38237	. 36-4168532				Company	IL		Acquisition, Inc	Ownership		Holdings Inc		
							American Service Insurance			American Insurance			Atlas Financial		
04795	Atlas Financial Holdings Group.	42897	. 36-3223936				Company, Inc	IL	I A	Acquisition, Inc	Ownership		Holdings Inc		
										American Insurance			Atlas Financial		
04795	Atlas Financial Holdings Group	28339	43-0762309				Gateway Insurance Company	МО	IA	Acquisition, Inc	Ownership		Holdings Inc		
										American Insurance			Atlas Financial		
00000		00000	06-1623351				Anchor Holdings Group, Inc	NY	NIA	Acquisition, Inc	Ownership		Holdings Inc		
							Global Liberty Insurance						Atlas Financial		
04795	Atlas Financial Holdings Group.	11092	22-3733783				Company of New York	NY	I A	Anchor Holdings Group, Inc	Ownership		Holdings Inc		
										American Insurance			Atlas Financial		
00000		00000	06-1628915				Anchor Group Management, Inc	NY	NIA	Acquisition, Inc	Ownership		Holdings Inc		
							Plainview Premium Finance			American Insurance			Atlas Financial		
00000		00000	20-3149956				Company, Inc	DE	NIA	Acquisition, Inc	Ownership		Holdings Inc		
							Plainview Premium Finance			Plainview Premium Finance			Atlas Financial		
00000		00000	45-5343449				Company of California, Inc	CA	NIA	Company, Inc	Ownership		Holdings Inc		
										American Insurance			Atlas Financial		
00000		00000	82-2797749				UBI Holdings, Inc	DE	NIA	Acquisition, Inc	Ownership		Holdings Inc		
													Atlas Financial		
00000		00000	82-2941857				DriveOn Digital IP, Inc	DE	NIA	UBI Holdings, Inc	Ownership		Holdings Inc		
						l				I			<u>I</u>		

Asterisk	Explanation

PART 1 - LOSS EXPERIENCE

				4	
	Line of Business	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage
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				.0.35
17.1	Other liability occurrence.	879 037			
17.2	Other liability-claims made				
17.3	Excess Workers' Compensation				
18.1	Products liability-occurrence.				
18.2	Products liability-claims made				
	2 Private passenger auto liability				
10.3.10	4 Commercial auto liability	53 158 352			35.1
21.	Auto physical damage	2 261 427	1,261,401		50 5
21.					
22.	Aircraft (all perils)				
	Fidelity				
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
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	ХХХ	ХХХ
34.	Aggregate write-ins for other lines of business				
35.	TOTALS	57,104,282	20,249,348	35.5	36.3
	TAILS OF WRITE-INS				
3401					
	m. of remaining write-ins for Line 34 from overflow page				
3499. Tota	als (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	Quarter		Tear to Date
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	.5.892	929.326	1.028.026
17.1	Other liability occurrence	324,333	944,165	784.952
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 			
193194	Commercial auto liability	19 380 889	68 490 099	42 280 641
21.	Auto physical damage		2 851 735	2 063 705
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety			
26.	Burglary and theft			
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Warranty			
31.	Reinsurance - Nonproportional Assumed Property			ΧΧΧ
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	ΧΧΧ
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business			
35.	TOTALS	20,600,102	73,215,325	46,157,324
	AILS OF WRITE-INS	20,000,102	10,210,020	40,107,024
3498. Sum	n. of remaining write-ins for Line 34 from overflow page			
	als (Lines 3401 through 3403 plus 3498) (Line 34)			

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)	2017 Loss and LAE Payments on Claims Reported as of Prior Year-End	2017 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2017 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. 2014 + Prior		1,495	4,778	6,196		6,884	1,793		(4,107)	(2,115)	4,706	(4,715)	(9)
2. 2015	2,182	2,241	4,423	5,011		5,568	1,397		(2,695)	(1,143)	4,226	(4,224)	2
3. Subtotals 2015 + prior	5,465	3,736		11,207	1,245		3,190		(6,802)	(3,258)	8,932	(8,939)	(7)
4. 2016		10,716		6,110		6,789	1,959	218		9,121	2,983	(2,875)	
5. Subtotals 2016 + prior	10,551	14,452		17,317	1,924	19,241	5,149		142	5,863	11,915	(11,814)	101
6. 2017	xxx	XXX	xxx	XXX		6,897	XXX				xxx	XXX	xxx
7. Totals	. 10,551	14,452	25,003	17,317	8,821	26,138	5,149	7,630	9,133	21,912	11,915	(11,814)	101
Prior Year-End 8. Surplus As Regards Policy- holders	- 25,061										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. 112.9	2. (81.7)	
													Col. 13, Line 7 Line 8
													4. 0.4

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. *ASSETS

	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				
2505.				
2597. Summary of remaining write-ins for Line 25 from Page 02	45,496	45,496		7,646

SCHEDULE A – VERIFICATION

Real Estate

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
	Total foreign exchange change in book/adjusted carrying value		
7.	Deduct current year's other-than-temporary impairment recognized		
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)		
	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	2,600,000	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
Capitalized deferred interest and other. Accrual of discount.		
4. Accrual of discount		
 Unrealized valuation increase (decrease) Total gain (loss) on disposals		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
 Beduct 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. 		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other-than-temporary impairment recognized		
 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		
 Total valuation allowance		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)	2,600,000	2,600,000

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

		1	2
		Year To Date	Prior Year Ended December 31
		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	1,248,300	3,998,088
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Total gain (loss) on disposals Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other-than-temporary impairment recognized		
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		
13.	Statement value at end of current period (Line 11 minus Line 12)	6,964,182	5,591,639

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
		Prior Year Ended
	Year To Date	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		6,154
4. Unrealized valuation increase (decrease)		60,412
5. Total gain (loss) on disposals		
6. Deduct consideration for bonds and stocks disposed of		
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. 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)		
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	28,492,878	30,563,238

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE American Country Insurance Company

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)					25,497,445			
2. NAIC 2 (a)	4 , 039 , 069			(103,995)		4 ,039 ,069	4 , 859 , 658	2,761,910
3. NAIC 3 (a)				1,425				
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	22,999,090	6,403,252	876,768	(32,696)	29,177,521	22,999,090	28,492,878	30,563,238
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	22,999,090	6,403,252	876,768	(32,696)	29,177,521	22,999,090	28,492,878	30,563,238

(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 \$

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

Schedule DB - Verification

SCHEDULE E - VERIFICATION

(Cash Equivalents)

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
	Cost of cash equivalents acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value		
9.	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)		
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)		

Schedule A - Part 2

Schedule A - Part 3

Schedule B - Part 2

Schedule B - Part 3

Schedule BA - Part 2

Schedule BA - Part 3

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE American Country Insurance Company

SCHEDULE D - PART 3

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

		-	3110W	All Long-Term Bonds and Stock Acquired During the Currer				-	1
1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation or
CUSIP					Number of	Actual		Paid for Accrued	Market
Identification	Description	Foreign	Date Acquired	Name of Vendor	Shares of Stock	Cost	Par Value	Interest and Dividends	Indicator (a)
Bonds - U.S. Gover	rnments					·		•	
				BOENNING & SCATTERGOOD.		.366.500	.400.000		1
	ds - U.S. Governments					366.500	400.000	833	ХХХ
Bonds - U.S. Specia							,		
	FH 17SC02 2A1 - CM0		.07/19/2017	MERRILL LYNCH FIXED INCOME.		.255,361	.250,000	583	1 1
74442P-DX-0	PUBLIC FIN AUTH WIS REV		07/18/2017	CITIBANK.		300,000	300,000		1FE
	TEXAS A & M UNIV REVS.			MESIROW & CO.			250.000		
		d all Non-Guarantee		pencies and Authorities of Governments and Their Political Subdiv	isions	809.399	800,000	1.741	
	and Miscellaneous (Unaffiliated)	Buarantee				000,000	000,000	ı	1 .000
	AMAZON.COM INC			VARIOUS					2FE
	BAT CAPITAL CORP	C		DEUTSCHE BANC SECURITIES INC.		.220,000			2FE
06406H-CV-9	BANK OF NEW YORK MELLON CORP.		07/18/2017	MORGAN STANLEY & CO LLC		1.554.585	1.500.000		1FE
30231G-AT-9	EXXON MOBIL CORP.		07/07/2017	FIRST TENN FIXED		200,958	.200.000	2.215	1FE.
33850B-AC-1	FSMT 171 1A3 - CMO/RMBS			JP MORGAN SECURITIES INC.				1.094	1FE
49446R - AU - 3	KIMCO REALTY CORP		08/01/2017	MERRILL LYNCH FIXED INCOME		199,686	.200,000		2FE
	MSDB 17712F A - CMBS			MORGAN STANLEY & CO INC. NY.					1FE
760759-AQ-3	REPUBLIC SERVICES INC.			PNC BANK		.404,692	.400,000	4,409	2FE
	SUNCOR ENERGY INC.			JP MORGAN SECURITIES INC.		770,513		3,450	1FE
	VIRGINIA ELECTRIC AND POWER CO.			DEUTSCHE BANC SECURITIES INC.					1FE
97652P-AB-7	WIN 141 A2 - CMO/RMBS		09/25/2017	JP MORGAN SECURITIES INC					1FM
3899999 - Bond	ds - Industrial and Miscellaneous (Unaffiliated)					5,227,353	5,122,633	25,083	XXX
8399997 - Subt	totals - Bonds - Part 3					6,403,252	6,322,633	27,658	ХХХ
8399999 - Subt	totals - Bonds					6,403,252	6,322,633	27.658	XXX
						.,, .	.,,.	,	
						I			
9999999 Totals						6,403,252	XXX	27,658	XXX
	stock bearing the NAIC market indicator "I I" provide: the	· · · · · · · · · · · · · · · · · · ·						•	

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

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE American Country Insurance Company

SCHEDULE D - PART 4

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

					0110	W Fail Long 1						r During the C	and gaante							
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
																				1
									11	12	13	14	15							1
		F																		NAIC
																				Desia-
											Current Year's			Book/				Bond		nation
								Drive Verse	Lines allowed				Total Familian		E a serie se				04-4-4	
		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			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.Č.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	(a)
Bonds - U.S	Governments																			
	G2 002998 - RMBS		Paydown		277		334			(50)		(50)		277				12	11/20/2030	1
	GNR 1127 B - CMBS		Pavdown		155.827					(290)		(290)		155.827					09/16/2034	1
	GNR 11161 A - CMBS		Pavdown				3 239			(6)		(200)		3,223					01/16/2034	1
	GNR 1217B KG - CMO/RMBS	09/01/2017	Pavdown		28,696	28,696		29.395		(700)		(700)		28,696				431	07/20/2039	1
			1 dydown		188.023			189.069		(1.046)										VVV
	Bonds - U.S. Governmen					188,023	198,219	,		(1,046)		(1,046)		188,023				3,877	XXX	XXX
			nt and all Non-Guaranteed	Obligations of A	Agencies and Au	uthorities of Gov	vernments and	I heir Political S	ubdivisions											
	FH C01078 - RMBS											(5)							10/01/2030	·····1
3136A7 -FL - 1	FNR 1270D HP - CMO/RMBS		Paydown	.								(237)							01/25/2041	J1
	FNR 145E LB - CMO/RMBS		Paydown	.												l			07/25/2043	J1
	FNR 13119E VA - CMO/RMBS.		Paydown									(618)							10/25/2033	J1
	FNR 1547C GA - CMO/RMBS		Paydown									(1,309)							06/25/2044	1
3137G1-BW-6	FH 17SC02 2A1 - CM0		Paydown									(291)							05/25/2047	1
	FN AP1651 - RMBS		Paydown							(418)		(418)		11,073					08/01/2042	1
31403C-6L-0	FN 745275 - RMBS		Paydown.									(136)		1.573					02/01/2036	1
31417A-QE-2	FN AB4052 - RMBS		Paydown		29,150					(2,428)	l	(2,428)		29,150		l		.640		11
31418A-JV-1	FN MA1175 - RMBS		Pavdown.															449	09/01/2042	1
31419J-TQ-1	FN AE7758 - RMBS	09/01/2017	Pavdown		11,214	11.214	11,909	11.788		(575)		(575)		11,214				232		1
1	LOUISIANA LOC GOVT					· · · · · · · · · · · · · · · · · · ·	,	,				[,				1				1
54627R-AJ-9	ENVIRONMENTAL FACS &		VARIOUS											16.740		2	2	167	02/01/2022	1FE
			al Assessment and all Non-	Guaranteed																
0100000			of Governments and Their																	1
	Subdivisions	s and Authonnes	of Governments and men	FUILICAI	197, 179	197, 179	004 000	190.358		(7.049)		(7.049)		197.177		0		0.400	VVV	VVV
					197,179	197,179	204,806	190,358		(7,049)		(7,049)		197,177		2	2	3,160	XXX	XXX
	ustrial and Miscellaneous (
00842C-AF-2	. ABMT 157 A6 - CMO/RMBS		Paydown							(191)		(191)							11/27/2045	1FM
	CBASS 05CB5 AF4 -											l , , ,								1
12489W-MY-7			Paydown				4,149	4,175											01/25/2033	1FM
	FSMT 171 1A3 - CM0/RMBS		Paydown		9,110	9,111						(134)		9,110		l			03/25/2047	1FE
	JPMMT 153 A3 - CMO/RMBS		Paydown																05/25/2045	1FE
477877-AD-6	JDOT 14B A3 - ABS		Paydown			73,684				3		3	L	73,684		l	l		11/15/2018	1FE
	KCOT 141 A4 - ABS		Paydown.																07/15/2020	1FE
64829E-AA-2_	NRZT 152 A1 - CMO/RMBS		Paydown		10,738					(286)		(286)	L	10,738					08/25/2055	1FM
	PRICOA GLOBAL FUNDING I		Maturity @ 100.0		240,000		239,832	239.965								L	l	3.240	08/18/2017	1FE
	SEMT 143 A8 - CM0/RMBS																		10/25/2044	1FM
3899990	Bonds - Industrial and Mis	scellaneous (Ling	affiliated)		491.567	491,567	492,972	483,719		(1.397)		(1,397)		491.567	1		1	6.351	XXX	XXX
	Subtotals - Bonds - Part 4				876,770	876.770	895,998	863,147		(9,493)		(9,493)		876.768		0		13.388	XXX	ХХХ
		+				, .				(.,)		(2	4			
8399999 -	Subtotals - Bonds				876,770	876,770	895,998	863,147		(9,493)		(9,493)		876,768		2	2	13,388	XXX	XXX
																				L
																				L
		.		<u> </u>								<u> </u>	<u> </u>							1
												l	l							1
	I									1		L	L	1		1	l			1
9999999	Totals		-		876.770	XXX	895.998	863.147		(9,493)		(9,493)		876.768		2	2	13.388	XXX	ХХХ
	mmon atook boaring the		ator "III" provide: the num			ллл	035,330	000,147		(3,433)		(0,400)	1	010,700		1 2	2	10,000	ллл	ллл

(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

Image: state in the state interface into the state into the stat		Mont	th End Dep	oository Balance	S				
Amount of Interest Amount of Depository Code (new set Depositor) Amount of Depository Rate Depositor Depository Amount of Depository Rate Depository Amount of Depository Amount of Depository <	1	2	3	4	5	Book E	Balance at End of	Each	9
Open Experiences Control (14) 6,771 1,667 3,34,253 5,994,970 (,544,82) 079986 Departing in the participant of the domain of the doma	Dopository	Codo	of	Interest Received During Current	Interest Accrued at Current Statement	6	7	8	-
Filth Third Bank Drivego, IL 6.771 3.683 5.388, 502 1.944.82 099980 Registion depositions that do main depositions xxx xxx <t< th=""><th>Open Depositories</th><th></th><th>Interest</th><th>Quarter</th><th>Dale</th><th></th><th>Second Month</th><th>THILD MOTULE</th><th><u> </u></th></t<>	Open Depositories		Interest	Quarter	Dale		Second Month	THILD MOTULE	<u> </u>
0100000 Departing in in mode positions in a departement in any one departe	Fifth Third BankChicago, IL						5, 369, 512	1,944,829	XXX
	0199998 Deposits in depositories that do not exceed the allowable limit in any one depository (See Instructions) - Onen Depositories	XXX	XXX						xxx
AndAn	0199999 Total Open Depositories	XXX		6,771	1,665	3,334,253	5,369,512	1,944,829	
AndAn									
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U399999 IOTAL CASH ON DEPOSIT XXX XXX 0,771 1,005 3,334,233 5,309,512 1,944,829	0399999 Total Cash on Deposit	ХХХ	ХХХ	6,771	1,665	3,334,253	5,369,512	1,944,829	XXX
0499999 Cash in Company's Office XXX XXX XXX XXX XXX XXX	0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
O599999 Total XXX XXX 6,771 1,665 3,334,253 5,369,512 1,944,824	0599999 Total	XXX	ХХХ	6,771	1,665	3,334,253	5,369,512	1,944,829	XXX

STATEMENT AS OF SEPTEMBER 30, 2017 OF THE American Country Insurance Company

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
			NON				
				· · · · · · · · · · · · · · · · · · ·			
				F			
		l					
		l					
		.		•			
		+		+			
		.					
		<u> </u>		•	+		·
		+		+			+
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		ļ					
699999 Total Cash Equivalents							