

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2018

OF THE CONDITION AND AFFAIRS OF THE

		<u>6 4908</u> NA ml) (Prior)	AIC Company Code	5055 Employer's ID Ni	umber05-0420799
Organized under the Lav Country of Domicile	vsof	Rhode Island	, State of Amer	Domicile or Port of Eritry ica	RI
Incorporated/Organized	05/14	4/1974	Con	menced Business	
Statutory Home Office	10 Je	affareon Blud			Warwick, RI, US 02888
Claudory Home Onde		t and Number)			wn, State, Country and Zip Code)
Main Administrative Offic	-		55 W 46th Street	•••	
			(Street and Numbe		
	New York, NY, US 10				646-356-8101
(0	City or Town, State, Country au	nd Zip Gode)		(Area	Code) (Telephone Number)
Mail Address	55 W 46t			N	ew York, NY, US 10036
	(Street and Numb	er or P.O. Box)		(City or To	wn, State, Country and Zip Code)
Primary Location of Bool	ks and Records		55 W 46th Street		
	M. M.J. MICHIGAN		(Street and Numbe	7)	
	New York, NY, US 100 Dity or Town, State, Country ar			(Area	646-356-8101 Code) (Telephone Number)
				נייסם	
Internet Website Addres	ŝ		www.ascotgroup.co	m	
Statutory Statement Con	tact	Stephen Grant Nol	et		646-956-1574
		(Name)		6	Area Code) (Telephone Number)
	steve.nolet@ascotgroup (E-mail Address)).com			(FAX Number)
	· · · · · · · · · · · · · · · · · · ·				(·····)
President & C	hief		OFFICERS		
		ory Wolyniec #			Peter Michael Grayston #
Chief Einencial Offi	car Joseph	William Boberts #	Ge	neral Counsel and Secretary	Brian Jeffrey Green #
		Trinkarr rioborto ir		Occidenty	
Emily Charlotte	Gilde #, Chief Risk Officer	Str	OTHER	Controller	
Enny One lote			spheri drant Nolet #, 0.5	Gontroller	
	ates Tarras #	D	IRECTORS OR TRU		
Susan	erry Tegan # Jane Sutherland #		John Robert Berge Gregory Wolyniec		Joseph William Roberts #
State of	New York	SS:			
County of	New York	55			
The officers of this repor	ting entity being duly aworn, e	ach depose and say	/ that they are the descrit	ed officers of said reportin	ng entity, and that on the reporting period stated ab
all of the herein describe statement together with	id assets were the absolute ; related exhibits ischedules ar	property of the said	reporting entity, free an elo contained, annexed o	d clear from any liens or i referred to is a full and t	claims thereon, except as herein stated, and that true statement of all the assets and liabilities and o
condition and affairs of th	ne said reporting entity as of th	he reporting period a	stated above, and of its ir	come and deductions the	refrom for the period ended, and have been comple
					e extent that: (1) state law may differ; or, (2) that s the best of their information, knowledge and be
espectively. Furthermol	re, the scope of this attestatio	on by the described	officers also includes the	related corresponding ele	ectronic filing with the NAIC, when required, that is
o the enclosed statemen		ectronic tiling) of the	e enclosed statement. I n	e electronic ming may be i	requested by various regulators in lieu of or in add
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MARIA	4 WAMALL	27	el M	1	malia
1009	1000000-	6 11 1	7.0.00	<i>P</i>	
	Wolyniec		Stephen Grant Note	t	Brlan Jeffrey Green
resident & Chie	Executive Officer		US Controller		General Counsel and Secretary
11. 07 OX	10225			is this an original filing?	Yes [X] Na []
Subscribed and sworn to	before me this ay of Anuany	2019		If no, 1. State the amendment r	num ber
	1 milary			 State the amenoment r Date filed 	
	and St			3. Number of pages attac	
0					



	ASS	SETS			
		1	Current Year 2	3	Prior Year 4
			_	Net Admitted Assets	Net Admitted
	Devide (Ochoekula D)	Assets 45,030,133	Nonadmitted Assets		Assets
1.	Bonds (Schedule D)	40,030,133	0		0
2.	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks		0	0	0
3.	Mortgage loans on real estate (Schedule B):	0	0		
0.	3.1 First liens	0	0	0	0
	3.2 Other than first liens		0	0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0				
	encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less				
	\$9 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5.	Cash (\$1,816,571 , Schedule E - Part 1), cash equivalents				
	(\$634,087 , Schedule E - Part 2) and short-term				
	investments (\$4,034,186 , Schedule DA)				1,926,623
	Contract loans (including \$0 premium notes)				0
	Derivatives (Schedule DB)				0
	Other invested assets (Schedule BA)				0
9.	Receivable for securities				0
10.	Securities lending reinvested collateral assets (Schedule DL)				
	Aggregate write-ins for invested assets				
	Subtotals, cash and invested assets (Lines 1 to 11)	51,514,976	0	51,514,9/6	1,926,623
	Title plants less \$0 charged off (for Title insurers	0	0	0	0
14.	only) Investment income due and accrued		0	0 	0
14.	Premiums and considerations:		0		0
15.	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0	0
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$0) and				
	contracts subject to redetermination (\$0)	0	0	0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
	Amounts receivable relating to uninsured plans				0
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				0
20.	Electronic data processing equipment and software	0	0	0	0
21.	Furniture and equipment, including health care delivery assets				
00	(\$0)				0
	Receivables from parent, subsidiaries and affiliates				0 0
23. 24.	Heceivables from parent, subsidiaries and attiliates				0
24. 25.	Aggregate write-ins for other than invested assets				
	Total assets excluding Separate Accounts Segregated Accounts and				,
20.	Protected Cell Accounts (Lines 12 to 25)			51,938,601	1,944,127
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	<u></u>	0	0	^
28.	Total (Lines 26 and 27)	51,988,601	50,000	51,938,601	1,944,127
20.	DETAILS OF WRITE-INS	51,500,001	30,000	01,000,001	1,044,127
1101.					
1101.					
1102.					
1198.	Summary of remaining write-ins for Line 11 from overflow page		0	0	
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Intangible Asset	-		0	0
	Rhode Island premium tax recoverable	-			
2502.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	50,892	50,000	892	1,292
		. , .=	- ,		,=+.

ASSETS

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Year	2 Prior Year
1.	Losses (Part 2A, Line 35, Column 8)	0	0
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	0	0
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)	0	0
4.	Commissions payable, contingent commissions and other similar charges	0	0
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$0 on realized capital gains (losses))		
7.2			
8.	Borrowed money \$0 and interest thereon \$0		0
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of		
9.	\$		
	health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health	0	0
	Service Act)		0
10.	Advance premium	0	0
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)		0
14.	Amounts withheld or retained by company for account of others	0	0
15.	Remittances and items not allocated	0	0
16.	Provision for reinsurance (including \$	0	0
17.	Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		
20.	Derivatives		
21.	Payable for securities		
	Payable for securities lending		
22.			
23.	Liability for amounts held under uninsured plans		
24.	Capital notes \$0 and interest thereon \$0		
25.	Aggregate write-ins for liabilities	0	0
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
27.	Protected cell liabilities	0	0
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds	0	0
30.	Common capital stock		
31.	Preferred capital stock	0	0
32.	Aggregate write-ins for other than special surplus funds	0	0
33.	Surplus notes	0	0
34.	Gross paid in and contributed surplus		1,525,000
35.	Unassigned funds (surplus)		
36.	Less treasury stock, at cost:		
•••	36.1	0	0
	36.20 shares preferred (value included in Line 31 \$		
07	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)		
37.		51,938,601	1,944,127
38.	TOTALS (Page 2, Line 28, Col. 3)	51,930,001	1,944,127
	DETAILS OF WRITE-INS		
2501.			
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	0
2901.			
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0
2999.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0
3201.			
3202.			
3202. 3203.			
	Summary of remaining write-ins for Line 32 from overflow page		0
3298. 3299.		0	U
10.77	Totals (Lines 3201 thru 3203 plus 3298)(Line 32 above)	0	0

STATEMENT OF INCOME

		1 Current Year	2 Prior Year
	UNDERWRITING INCOME		0
1.	Premiums earned (Part 1, Line 35, Column 4) DEDUCTIONS:	0	0
2.	Losses incurred (Part 2, Line 35, Column 7)	0	0
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		0
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)		0
5.	Aggregate write-ins for underwriting deductions	0	0
6.	Total underwriting deductions (Lines 2 through 5)	490,343	0
7.	Net income of protected cells		0
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7)	(490,343)	0
9.	INVESTMENT INCOME Net investment income earned (Exhibit of Net Investment Income, Line 17)	109 568	(43, 339)
10.	Net realized capital gains or (losses) less capital gains tax of \$0 (Exhibit of Capital		
-	Gains (Losses))	0	62,773
11.	Net investment gain (loss) (Lines 9 + 10)		
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered		
	\$0 amount charged off \$0)		0
13.	Finance and service charges not included in premiums		0
14.	Aggregate write-ins for miscellaneous income	0	0
15.	Total other income (Lines 12 through 14)	0	0
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	(380,775)	
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	(000 775)	10 404
19.	(Line 16 minus Line 17) Federal and foreign income taxes incurred	(380,775)	19,434
20.	Net income (Line 18 minus Line 19)(to Line 22)	(380,775)	19,434
20.	CAPITAL AND SURPLUS ACCOUNT	(300,773)	13,404
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	1 895 432	1 822 507
22.	Net income (from Line 20)		
23.	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$0	0	0
25.	Change in net unrealized foreign exchange capital gain (loss)	0	0
26.	Change in net deferred income tax		
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)		
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29. 30.		0	0
31.	Surplus (contributed to) withdrawn from protected cells Cumulative effect of changes in accounting principles	0	0
32.	Capital changes:		
	32.1 Paid in	0	0
	32.2 Transferred from surplus (Stock Dividend)	0	0
	32.3 Transferred to surplus	0	0
33.	Surplus adjustments:		
	33.1 Paid in		0
	33.2 Transferred to capital (Stock Dividend)		0
	33.3 Transferred from capital		0
34.	Net remittances from or (to) Home Office		0
35. 36.	Dividends to stockholders Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		0 0
30.	Aggregate write-ins for gains and losses in surplus	0	38,841
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37)	49,604,573	72,925
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	51,500,005	1,895,432
	DETAILS OF WRITE-INS		· · ·
0501.			
0502.			
0503.			
0598.	Summary of remaining write-ins for Line 5 from overflow page		0
0599.	Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above)	0	0
1401. 1402.			
1402. 1403.			
1403.			
1499.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0
3701.			
3702.			
3703.			
3798.	Summary of remaining write-ins for Line 37 from overflow page	0	0
3799.	Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above)	0	38,841

CASH FLOW

		1	2
		Current Year	Prior Year
	Orach from Oracutions	Current real	Filor fear
	Cash from Operations	0	0
1.	Premiums collected net of reinsurance		0
2.	Net investment income		
3.	Miscellaneous income		0
4.	Total (Lines 1 through 3)		26,047
5.	Benefit and loss related payments		0
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0
7.	Commissions, expenses paid and aggregate write-ins for deductions		0
8.	Dividends paid to policyholders	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	0	0
10.	Total (Lines 5 through 9)		0
11.	Net cash from operations (Line 4 minus Line 10)	(619,799)	26,047
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	0	0
	12.2 Stocks	0	3,063,536
	12.3 Mortgage loans	0	0
	12.4 Real estate	0	0
	12.5 Other invested assets	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0
	12.7 Miscellaneous proceeds		0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13.	Cost of investments acquired (long-term only):		
10.	13.1 Bonds		0
	13.2 Stocks	,	1,889,019
	13.3 Mortgage loans		
			0
	13.4 Real estate		0
	13.5 Other invested assets		0
	13.6 Miscellaneous applications		0
	13.7 Total investments acquired (Lines 13.1 to 13.6)		1,889,019
14.	Net increase (decrease) in contract loans and premium notes	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(45,014,415)	1,174,517
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		0
	16.2 Capital and paid in surplus, less treasury stock		0
	16.3 Borrowed funds	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)	142,435	712,499
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		712,499
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	4,558,220	1,913,063
19.	Cash, cash equivalents and short-term investments:	.,,	.,,
	19.1 Beginning of year		
	19.2 End of period (Line 18 plus Line 19.1)	6,484,843	1,926,623
		5,101,010	.,020,020
Note: Si	upplemental disclosures of cash flow information for non-cash transactions:		

Underwriting and Investment Exhibit - Part 1 - Premiums Earned **NONE**

Underwriting and Investment Exhibit - Part 1A - Recapitulation of all Premiums **NONE**

Underwriting and Investment Exhibit - Part 1B - Premiums Written **NONE**

Underwriting and Investment Exhibit - Part 2 - Losses Paid and Incurred ${\color{black} N \ O \ N \ E}$

Underwriting and Investment Exhibit - Part 2A - Unpaid Losses and Loss Adjustment Expenses **NONE**

UNDERWRITING AND INVESTMENT EXHIBIT

		1	2	3	4
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1.	Claim adjustment services:	·		L. L	
	1.1 Direct	0	0	0	
	1.2 Reinsurance assumed	0	0	0	
	1.3 Reinsurance ceded	0	0	0	
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	0	0	0	
2.	Commission and brokerage:				
	2.1 Direct excluding contingent	0	0	0	
	2.2 Reinsurance assumed, excluding contingent	0	0	0	
	2.3 Reinsurance ceded, excluding contingent		0	0	
	2.4 Contingent - direct			0	
	2.5 Contingent - reinsurance assumed		0	0	
	2.6 Contingent - reinsurance ceded		0	0	
	2.7 Policy and membership fees	0	0	0	
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)	0	0	0	
0			0	0	
3.	Allowances to managers and agents		0		
4.	Advertising			0	
5.	Boards, bureaus and associations		40	0	
6.	Surveys and underwriting reports		0	0	
7.		0	0	0	
8.	Salary and related items:				
	8.1 Salaries			0	,
	8.2 Payroll taxes			0	
9.	Employee relations and welfare	0		0	
10.	Insurance	0	0	0	
11.	Directors' fees	0	0	0	
12.	Travel and travel items	0		0	
13.	Rent and rent items	0		0	
14.	Equipment	0	0	0	
15.	Cost or depreciation of EDP equipment and software	0	0	0	
16.	Printing and stationery			0	9:
17.	Postage, telephone and telegraph, exchange and express			0	1,84
18.	Legal and auditing		59,612	0	59,6
19.	Totals (Lines 3 to 18)	-		0	
	Taxes, licenses and fees:		020,000	0	
20.	,				
	20.1 State and local insurance taxes deducting guaranty association	0		0	
	credits of \$0			0	
	20.2 Insurance department licenses and fees			0	
	20.3 Gross guaranty association assessments		0	0	
	20.4 All other (excluding federal and foreign income and real estate)	0	0	0	
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0		0	
21.	Real estate expenses		0	0	
22.	Real estate taxes	0	0	0	
23.	Reimbursements by uninsured plans	0	0	0	
24.	Aggregate write-ins for miscellaneous expenses	0			
25.	Total expenses incurred	0			(a)500,4
26.	Less unpaid expenses - current year	0			
27.	Add unpaid expenses - prior year		0		
28.	Amounts receivable relating to uninsured plans, prior year			0	
29.	Amounts receivable relating to uninsured plans, prior your	0	0	0	
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	0	334,593	25,953	360,5
50.		0	004,000	23,300	500,5
·	DETAILS OF WRITE-INS	-	00.050	-	
	Annual Rating Fee		,	0	
402.	Bank & OD Charges				8
403.	Miscellaneous			0	
	Summary of remaining write-ins for Line 24 from overflow page				

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Ascot Specialty Insurance Company EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a)0	
1.1	Bonds exempt from U.S. tax	(a)0	0
1.2	Other bonds (unaffiliated))
	Bonds of affiliates	(a)0	
2.1	Preferred stocks (unaffiliated)	(b)0	0
2.11	Preferred stocks of affiliates		
2.2	Common stocks (unaffiliated)	0	0
2.21	Common stocks of affiliates	0	0
3.	Mortgage loans	(c)0	0
4.	Real estate	(d)0	0
5	Contract loans	0	0
6	Cash, cash equivalents and short-term investments	(e)(26,513	8,249
7	Derivative instruments		
8.	Other invested assets	0	0
9.	Aggregate write-ins for investment income	0	0
10.	Total gross investment income	(243,536	
11.	Investment expenses		(g)10,061
12.	Investment taxes, licenses and fees, excluding federal income taxes		
13.	Interest expense		(h)0
14.	Depreciation on real estate and other invested assets		(i)0
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		109,568
	DETAILS OF WRITE-INS		
0901.			
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

(a) Includes \$		accrual of discount less \$1,737	amortization of premium and less \$253,640	paid for accrued interest on purchases.
(b) Includes \$	0	accrual of discount less \$0	amortization of premium and less \$0	paid for accrued dividends on purchases.
(c) Includes \$	0	accrual of discount less \$0	amortization of premium and less \$0	paid for accrued interest on purchases.
(d) Includes \$	0	for company's occupancy of its own building	s; and excludes \$0 interest on encur	nbrances.
(e) Includes \$	1,937	accrual of discount less \$0	amortization of premium and less \$28,500	paid for accrued interest on purchases.
(f) Includes \$	0	accrual of discount less \$0	amortization of premium.	
	0 I and Separate Acc		0 investment taxes, licenses and fees, excluding fede	ral income taxes, attributable to
(h) Includes \$	0	interest on surplus notes and \$	0 interest on capital notes.	
(i) Includes \$	0	depreciation on real estate and \$	0 depreciation on other invested assets.	

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
				Total Realized Capital	Change in	Change in Unrealized
		Realized Gain (Loss)	Other Realized	Gain (Loss)	Unrealized Capital	Foreign Exchange
		On Sales or Maturity	Adjustments	(Columns 1 + 2)	Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds		-1			
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)					
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)					
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investme					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)					
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)					

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Ascot Specialty Insurance Company EXHIBIT OF NON-ADMITTED ASSETS

	EXHIBIT OF NON-ADMITTE	1 Current Year Total	2 Prior Year Total	3 Change in Total Nonadmitted Assets
		Nonadmitted Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks	0	0	0
	2.2 Common stocks	0	0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	0	0	
	3.2 Other than first liens	0	0	0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company	0	0	
	4.2 Properties held for the production of income		0	
	4.3 Properties held for sale	0	0	
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)		0	0
6.	Contract loans	0	0	
7.	Derivatives (Schedule DB)	0	0	
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets		0	
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and accrued		0	0
15.	Premiums and considerations:			
15.	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	ſ
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due		0	
			0	
10	15.3 Accrued retrospective premiums and contracts subject to redetermination		0	
16.	Reinsurance:	0	0	a
	16.1 Amounts recoverable from reinsurers		0	
	16.2 Funds held by or deposited with reinsured companies			
	16.3 Other amounts receivable under reinsurance contracts		0	
	Amounts receivable relating to uninsured plans		0	
	Current federal and foreign income tax recoverable and interest thereon		0	
18.2	Net deferred tax asset			
19.	Guaranty funds receivable or on deposit		0	
20.	Electronic data processing equipment and software		0	
21.	Furniture and equipment, including health care delivery assets		0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates		0	
23.	Receivables from parent, subsidiaries and affiliates		0	
24.	Health care and other amounts receivable		0	
25.	Aggregate write-ins for other than invested assets		0	(50,000
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			13,702
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	
28.	Total (Lines 26 and 27)	50,000	63,702	13,702
101.	DETAILS OF WRITE-INS			
102.				
102.				
103. 198.	Summary of remaining write-ins for Line 11 from overflow page		0	
		U	0	
199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	U		(50.00)
501.	Intangible Asset		0	
502.				
503.				
598.	Summary of remaining write-ins for Line 25 from overflow page		0	
599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	50,000	0	(50,00

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Ascot Specialty Insurance Company (the "Company") have been prepared in conformity with accounting practices prescribed or permitted by the National Association of Insurance Commissioners ("NAIC") and the State of Rhode Island.

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Rhode Island. The State of Rhode Island requires insurance companies domiciled in the state of Rhode Island to prepare their statutory financial statements in accordance with the NAIC's Accounting Practices and Procedures Manual subject to any deviations prescribed or permitted by the State of Rhode Island Department of Business Regulation Insurance Division (the "Department"). The Company has no differences between accounting practices prescribed or permitted by the State of Rhode Island and the NAIC.

	SSAP #	F/S Page	F/S Line #	 2018	 2017
NET INCOME (1) State basis (Page 4, Line 20, Columns 1 & 2)	00	4	20	\$ (380,775)	\$ 19,434
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	00	4	20	\$ (380,775)	\$ 19,434
SURPLUS (5) State basis (Page 3, Line 37, Columns 1 & 2)	00	3	37	\$ 51,500,005	\$ 1,895,432
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	00	3	37	\$ 51,500,005	\$ 1,895,432

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with NAIC SAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of contingent revenues and expenses during the period, if any. Actual results could differ from those estimates.

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct and ceded business.

Expenses incurred in connection with acquiring new insurance business, including commissions, are charged to operations, as incurred. Expenses incurred are reduced for ceding allowances received or receivable to the extent such amounts do not exceed the costs incurred to acquire the related business. Excess ceding allowances are recorded as unearned income to be recognized as the related premiums are earned.

In addition, the Company uses the following accounting policies:

1. Short-term investments are stated at amortized cost, which approximates fair value.

2. Investment grade bonds not backed by other loans are stated at amortized cost using the scientific interest method. The Company has no non-investment grade bonds.

- 3. The Company does not have common stock.
- 4. The Company does not have preferred stock.
- 5. The Company does not have mortgage loans.
- 6. The Company does not have loan-backed securities.
- 7. The Company does not have any investments in any subsidiaries or controlled or affiliated entities.
- 8. The Company does not have any interests in joint ventures, partnerships or limited liability companies.
- 9. The Company does not have any derivative instruments.

10. The Company does not anticipate investment income as a factor in any premium deficiency calculation.
11. Loss and loss adjustment expenses are charged to expense as incurred. The reserve for unpaid loss and loss adjustment expenses is based upon claim adjusters' evaluations and other estimates, including those for incurred but not reported losses (IBNR) and for reinsurance. Overall reserve levels are impacted primarily by the types and amounts of insurance coverage written, trends developing from newly reported claims and claims that have been paid and closed. The determination of estimates for losses and loss expenses and the establishment of the related reserves are periodically reviewed and updated during the year. Adjustments are made to reserves in the period they can be reasonably estimated to reflect evolving changes in loss development patterns and various other factors, such as social and economic trends and judicial interpretation of legal liability. While management believes that the amount carried as reserves for unpaid loss and loss adjustment expense is adequate, the ultimate liability may be in excess of or less than the amount provided.

12. The Company has a written capitalization policy for prepaid expenses and purchases of items such as electronic data processing equipment, software, furniture, other equipment and leasehold improvements. The predefined capitalization thresholds under this policy have not changed from those of the prior year. 13. The Company does not have any pharmaceutical rebate receivables.

D. Going Concern

Based upon its evaluation of relevant conditions and events, management does not have substantial doubt about the Company's ability to continue as a going concern.

NOTE 2 Accounting Changes and Corrections of Errors

There have been no material changes during the statement period.

NOTE 3 Business Combinations and Goodwill

A. Statutory Purchase Method

On October 4, 2018, Ascot US Holding Corporation acquired Ascot Insurance Company ("Parent", formerly known as "Greyhawk Insurance Company"). Ascot Insurance Company is the beneficial and owner of record of all the issued and outstanding capital stock of Ascot Specialty Insurance Company ("Company"). On October 8, 2018, the Department approved the name change from Greyhawk Specialty Insurance Company to Ascot Specialty Insurance Company.

The Company received a cash capital contribution from Ascot Insurance Company of \$50 million on December 7, 2018.

- B. Statutory Merger
- There were no statutory mergers during the period ended December 31, 2018.
- C. Assumption Reinsurance
- The Company has no assumption reinsurance.
- D. Impairment Loss The Company has no impairment loss relating to business combinations or goodwill.

NOTE 4 Discontinued Operations

Discontinued Operation Disposed of or Classified as Held for Sale The Company did not have any discontinued operations in 2018.

NOTE 5 Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans The Company does not have mortgage loans.
- B. Debt Restructuring The Company did not engage in any debt restructuring.
- C. Reverse Mortgages The Company does not have reverse mortgages.
- D. Loan-Backed Securities The Company does not have loan-backed securities.
- E. Dollar Repurchase Agreements The Company does not have dollar repurchase agreements and/or securities lending transactions.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing The Company does not have any repurchase agreements.
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing The Company does not have any reverse repurchase agreements accounted for as secured borrowing.
- H. Repurchase Agreements Transactions Accounted for as a Sale The Company does not have any repurchase agreements accounted for as a sale.
- Reverse Repurchase Agreements Transactions Accounted for as a Sale The Company does not have any reverse repurchase agreements accounted for as a sale.
- J. Real Estate The Company does not have any investments in real estate.
- K. Low Income Housing tax Credits (LIHTC) The Company does not have any investment in low income housing.
- L. Restricted Assets The Company does not have any restricted assets.
- M. Working Capital Finance Investments The Company does not have any working capital finance investments.
- N. Offsetting and Netting of Assets and Liabilities The Company does not have any offsetting and netting of assets and liabilities.
- O. Structured Notes The Company does not have any structured notes.
- P. 5GI Securities The Company does not have any investments subject to this disclosure.
- Q. Short Sales The Company did not have short sales.
- Prepayment Penalty and Acceleration Fees
 The Company did not have prepayment penalties or acceleration fees.

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company has no investment in Joint Ventures, Partnerships or Limited Liability Companies that exceeds 10% of its admitted assets.
- B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Corporations during the statement period.

NOTE 7 Investment Income

- A. The Company non-admits any investment income due and accrued that is over 90 days past due.
- B. The Company has no non-admitted investment income due or accrued amounts.

NOTE 8 Derivative Instruments

The Company does not have any derivative instruments or leased securities.

NOTE 9 Income Taxes

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows: 1.

		As of E	nd (of Curren	t Pe	riod	od 12/31/2017						Change					
				(3)		(3)					(6)		(7)		(8)		(9)	
		(1)		(2)	(Co	ol. 1 + 2)		(4)		(5)	(C	ol. 4 + 5)	(C	ol. 1 - 4)	(C	ol. 2 - 5)	(C	ol. 7 + 8)
	С	Ordinary	(Capital		Total	C	Ordinary		Capital		Total	C	Ordinary		Capital		Total
(a) Gross Deferred Tax Assets	\$	98,133	\$	47,017	\$	145,150	\$	14,652	\$	63,702	\$	78,354	\$	83,481	\$	(16,685)	\$	66,796
(b) Statutory Valuation Allowance	\$	94,615	\$	47,017	\$	141,632	\$	-	\$	-	\$	-	\$	94,615	\$	47,017	\$	141,632
(c) Adjusted Gross Deferred Tax																		
Assets (1a - 1b)	\$	3,518	\$	0	\$	3,518	\$	14,652	\$	63,702	\$	78,354	\$	(11, 135)	\$	(63,702)	\$	(74,836)
(d) Deferred Tax Assets Nonadmitted (e) Subtotal Net Admitted Deferred	\$	-	\$	-	\$	-	\$	-	\$	63,702	\$	63,702	\$	-	\$	(63,702)	\$	(63,702
Tax Asset (1c - 1d)	\$	3,518	\$	0	\$	3,518	\$	14,652	\$	0	\$	14,652	\$	(11, 135)	\$	0	\$	(11,134
(f) Deferred Tax Liabilities	\$	3,518	\$	-	\$	3,518	\$	-	\$	-	\$	-	\$	3,518	\$	-	\$	3,518
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e -																		
1f)	\$	(0)	\$	0	\$	(0)	\$	14,652	\$	0	\$	14,652	\$	(14, 652)	\$	0	\$	(14,652

2.

	As of E	nd of Curren	t Period		12/31/2017			Change	
			(3)			(6)	(7)	(8)	(9)
	(1)	(2)	(Col. 1 + 2)	(4)	(5)	(Col. 4 + 5)	(Col. 1 - 4)	(Col. 2 - 5)	(Col. 7 + 8)
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
Admission Calculation Components									
SSAP No. 101									
(a) Federal Income Taxes Paid In Prior	\$ -	\$ -	\$ -	\$ -	\$-	\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax	\$ -	\$ -	\$ -	\$ 14,652	\$-	\$ 14,652	\$ (14,652)	\$ -	\$ (14,652)
1. Adjusted Gross Deferred Tax									
Assets Expected to be Realized									
Following the Balance Sheet Date.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Adjusted Gross Deferred Tax									
Assets Allowed per Limitation									
Threshold.	XXX	XXX	\$ 7,725,001	XXX	XXX	\$ 282,117	XXX	XXX	\$ 7,442,884
(c) Adjusted Gross Deferred Tax									
Assets (Excluding The Amount Of									
Deferred Tax Assets From 2(a) and									
2(b) above) Offset by Gross Deferred									
Tax Liabilities.	\$ 3,518	\$ -	\$ 3,518	\$ -	\$ -	\$ -	\$ 3,518	\$ -	\$ 3,518
(d) Deferred Tax Assets Admitted as									
the result of application of SSAP No.									
101. Total (2(a) + 2(b) + 2(c))	\$ 3,518	\$ -	\$ 3,518	\$ 14,652	\$ -	\$ 14,652	\$ (11,134)	\$ -	\$ (11,134)

3.

a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.

2018		2017
28,380.28	8%	836.000%
• - - - - - - - - - -	- •	1 005 100

\$ 51,500,005 \$ 1,895,432

	As	s of End of C	Curr	ent Period	12/31	/201	17		Cha	hange		
		(1)		(2)	(3)		(4)	(C	(5) Col. 1 - 3)	(0	(6) Col. 2 - 4)	
	C	Ordinary		Capital	Ordinary		Capital	Ò	Drdinary	``	Capital	
Impact of Tax Planning Strategies:												
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks												
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$	3,518	\$	0	\$ 14,652	\$	63,702	\$	(11,135)	\$	(63,702	
 Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies 		0.000%		0.000%	0.000%		0.000%		0.000%		0.000	
 Net Admitted Adjusted Gross DTAs amount from Note 9A1(e) 	\$	3,518	\$	0	\$ 14,652	\$	0	\$	(11,135)	\$		
 Percentage of net admitted adjusted gross DTAs by tax character admitted because of the 												
impact of tax planning strategies		0.000%		0.000%	0.000%		0.000%		0.000%		0.000	

b. Do the Company's tax-planning strategies include the use of reinsurance?

Yes[]No[X]

B. Not applicable

C. Current income taxes incurred consist of the following major components:

			(1)		(2)		(3)
		As	of End of				(Col. 1 - 2)
1.	Current Income Tax	Curr	ent Period		12/31/2017		Change
	(a) Federal	\$	-	\$	-	\$	-
	(b) Foreign	\$	-	\$	-	\$	-
	(c) Subtotal	\$	-	\$	-	\$	-
	(d) Federal income tax on net capital gains	\$	-	\$	-	\$	-
	(e) Utilization of capital loss carry-forwards	\$	-	\$	-	\$	-
	(f) Other	\$	-	\$	172	\$	(172)
	(g) Federal and foreign income taxes incurred	\$	-	\$	172	\$	(172)
2.	Deferred Tax Assets:						
	(a) Ordinary:						
	(1) Discounting of unpaid losses	\$	_	\$	-	\$	_
	(2) Unearned premium reserve	\$	_	\$	-	\$	_
	(3) Policyholder reserves	\$	-	\$	-	\$	_
	(4) Investments	\$	-	\$	-	\$	_
	(5) Deferred acquisition costs	\$	-	\$	-	\$	_
	(6) Policyholder dividends accrual	\$	-	\$	-	\$	_
	(7) Fixed Assets	\$	_	\$	_	\$	_
	(8) Compensation and benefits accrual	\$	_	\$	_	\$	_
	(9) Pension accrual	\$	_	\$	_	\$	_
	(10) Receivables - nonadmitted	\$	_	\$	_	\$	_
	(11) Net operating loss carry-forward	\$	91,518	\$	14,652	\$	76,866
	(12) Tax credit carry-forward	\$	31,510	\$	14,052	\$ \$	70,000
	(12) Tax clean carly-forward (12) Tax clean carly forward (13) Other (including items <5% of total ordinary tax assets)	\$	6,615	\$	-	φ \$	6,615
	(13) Other (including items <3 % of total ordinary tax assets)	\$	98,133	\$ \$	14,652	գ Տ	83,481
		э \$	96,133 94,615	э \$	14,052	э \$	03,401 94,615
	(b) Statutory valuation allowance adjustment	э \$	94,615	э \$	-	э \$	94,015
	(c) Nonadmitted	ծ Տ	2 5 4 0	э \$	-	э \$	-
	(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	Ф	3,518	Ф	14,652	Ф	(11,135)
	(e) Capital:	¢		¢		¢	
	(1) Investments	\$	-	\$	-	\$	-
	(2) Net capital loss carry-forward	\$	47,017	\$	63,702	\$	(16,685)
	(3) Real estate	\$	-	\$	-	\$	-
	(4) Other (including items <5% of total ordinary tax assets)	\$	-	\$	-	\$	-
	(99) Subtotal	\$	47,017	\$	63,702	\$	(16,685)
	(f) Statutory valuation allowance adjustment	\$	47,017	\$	-	\$	47,017
	(g) Nonadmitted	\$	-	\$	63,702	\$	(63,702)
	(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$	0	\$	0	\$	0
	(i) Admitted deferred tax assets (2d + 2h)	\$	3,518	\$	14,652	\$	(11,134)
3.	Deferred Tax Liabilities:						
	(a) Ordinary:		a - <i>i</i> -				~ = / -
	(1) Investments	\$	3,518	\$	-	\$	3,518
	(2) Fixed Assets	\$	-	\$	-	\$	-
	(3) Deferred and uncollected premium	\$	-	\$	-	\$	-
	(4) Policyholder reserves	\$	-	\$	-	\$	-
	(5) Other (including items <5% of total ordinary tax liabilities)	\$	-	\$	-	\$	-
	(99) Subtotal	\$	3,518	\$	-	\$	3,518
	(b) Capital:	Ι.					
	(1) Investments	\$	-	\$	-	\$	-
	(2) Real estate	\$	-	\$	-	\$	-
	(3) Other (including items <5% of total capital tax liabilities)	\$	-	\$	-	\$	-
	(99) Subtotal	\$	-	\$	-	\$	-
	(c) Deferred tax liabilities (3a99 + 3b99)	\$	3,518	\$	-	\$	3,518
4. N	let deferred tax assets/liabilities (2i - 3c)	\$	(0)	\$	14,652	\$	(14,652)

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

Total deferred tax assets Total deferred tax liabilities Net deferred tax assets/liabilities Statutory valuation allowance adjustment (*see explanation below) Net deferred tax assets/liabilities after SVA

Tax effect of unrealized gains/(losses) Statutory valuation allowance adjustment allocated to unrealized (+) Other intraperiod allocation of deferred tax movement

Change in net deferred income tax [(charge)/benefit]

\$	145,150	\$ 78,354	\$ 66,796
\$	(3,518)	\$ -	\$ (3,518)
\$	141,632	\$ 78,354	\$ 63,278
\$	(141,632)	\$ -	\$ (141,632)
\$	-	\$ 78,354	\$ (78,354)
\$	-	\$ -	\$ -
\$	-	\$ -	\$ -
\$	-	\$ -	\$ -
\$	-	\$ 78,354	\$ (78,354)

*Statutory valuation allowance

Valuation allowances are provided when the Company estimates that it is more likely than not that a deferred tax asset will not be realized. A statutory valuation allowance of \$152,132 and \$0 as of December 31, 2018 and 2017, respectively have been recorded based on the Company's estimate of future realization of deferred tax assets primarily based on historical taxable income and existing deferred tax liabilities.

D. The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes including realized capital gains / losses.

The significant items causing this difference are as follows:

Description	Amount
Income Before Taxes (including all realized capital gains / (losses))	\$ (380
Tax-Exempt Interest	\$
Dividends Received Deduction	\$
Proration - Non-life Companies	\$
Proration - Life Companies	\$
IMR Amortization	\$
Meals & Entertainment, Lobbying Expenses, Etc.	\$
Statutory Valuation Allowance Adjustment	\$ 674
Foreign tax rate differential	\$
Other, Including Prior Year True-Up	\$ 79
Total	\$ 373
Federal income taxed incurred [expense/(benefit)]	

Change in net deferred income tax [charge/(benefit)] Total statutory income taxes

		Statutory Rate	
		21%	Effective Tax
	Amount	Tax Effect	rate
^			
\$	(380,775)	\$ (79,963)	21.00%
\$	-	\$ -	0.00%
\$	-	\$ -	0.00%
\$	-	\$ -	0.00%
\$	-	\$ -	0.00%
\$	-	\$ -	0.00%
\$	-	\$ -	0.00%
\$	674,439	\$ 141,632	-37.20%
\$	-	\$ -	0.00%
\$	79,451	\$ 16,685	-4.38%
\$	373,115	\$ 78,354	-20.58%
		\$ (0)	0.00%
		\$ 78,354	-20.58%
		\$ 78,354	-20.58%

arryforwards, recoverable taxes, and IRC §6603 deposits:	
At December 31, 2018, the Company had net operating loss carryforwards expiring through the year 2038 of:	\$435,799
At December 31, 2018, the Company had capital loss carryforwards expiring through the year 2021 of:	\$223,892
At December 31, 2018, the Company had an AMT credit carryforwards, which does not expire, in the amount of:	\$0
Income taxes, ordinary and capital, available for recomment in the event	t of future losses include:

<u>Year</u> 2016	Ordinary	Capital	Total
2016	\$ -	\$ -	\$ -
2017	\$ 0	\$ -	\$ 0
<u>2018</u> Total	\$ -	\$ -	\$ -
Total	\$ 0	\$ -	\$ 0

There were no deposits admitted under IRC § 6603.

- F. The Company has filed a tax sharing agreement with the Department. The Company participates in federal income tax allocations with its U.S. affiliates according to the agreement.
- G. The Company does not expect a significant increase within 12 months of the reporting date for any federal or foreign income tax loss contingencies as determined in accordance with SSAP No. 5R, Liabilities, Contingencies and Impairments of Assets, with the modifications provided in SSAP No. 101, Income Taxes – A Replacement of SSAP No. 10R and SSAP No. 10.
- Repatriation Transition Tax (RTT) The company does have any repatriation transition tax.
- I. Alternative Minimum Tax (AMT) Credit The Company does not have an alternative minimum tax credit.

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

- A. The Company is a wholly-owned subsidiary of Ascot Insurance Company (previously Greyhawk Insurance Company) (Parent), a Colorado corporation and insurance company. Parent is owned by Ascot Holding Company, LLC (previously Greyhawk Holdings Company, LLC).
- B. Not applicable

E. C

- C. Not applicable
- D. At December 31, 2018, the Company reported \$40 due to Parent, Ascot Insurance Company, a Colorado corporation and insurance company, \$273,619 due to other affiliates and \$58,008 due from other affiliates. These amounts represent arms-length transactions and are recorded as admitted assets and in accordance with SSAP No. 25 "Accounting for and Disclosures about Transactions with Affiliates and Other Related Parties".
- E. The Company does not have any guarantees or undertakings, written or otherwise, for the benefit of an affiliate or related party that result in a material contingent exposure of the reporting entity's or any related party's assets or liabilities.
- F. The Company is party to an Intercompany Services and Cost Allocation Agreement (Services Agreement) with an affiliate, Ascot US Services Company LLC ("AUSC"). Under the terms of this agreement, shared costs are incurred and paid for by the Company. Primarily, these shared costs include overhead allocations of operating expenses.
- G. All outstanding shares are owned by Ascot Insurance Company, a Colorado corporation and insurance company.
- H. Not applicable
- I. Not applicable
- J. Not applicable
- K. Not applicable
- L. Not applicable
- M. Not applicable
- N. Not applicable
- O. Not applicable

NOTE 11 Debt

- A. The Company does not have any outstanding debt.
- B. FHLB (Federal Home Loan Bank) Agreements The Company does not have any Federal Home Loan Bank Agreements.

- NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans
 - A. Defined Benefit Plan The Company has no employees and thus has no benefit plans.
 - B. The Company has no employees and thus has no benefit plans.
 - C. The fair value of each class of plan assets The Company has no employees and thus has no benefit plans.
 - D. The Company has no employees and thus has no benefit plans.
 - E. Defined Contribution Plan The Company has no employees and thus has no benefit plans.
 - F. Multiemployer Plans The Company has no employees and thus has no benefit plans.
 - G. Consolidated/Holding Company Plans The Company has no employees and thus has no benefit plans.
 - H. Postemployment Benefits and Compensated Absences The Company has no employees and thus has no benefit plans.
 - Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) The Company has no employees and thus has no benefit plans.

NOTE 13 Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

- (1) The Company has 500 shares of \$1 par value common stock authorized, issued and outstanding.
- (2) The Company has no preferred stock authorized, issued or outstanding.
- (3) Under Rhode Island law, the Company may not pay any dividend or make any distribution of cash or other property, the fair market value of which, together with that of any other dividends or distributions made within the 12 consecutive months ending on the date on which the proposed dividend or distribution is scheduled to be made, exceeds the lesser of (1) 10% of its surplus as of the 31st day of December of the last preceding year, or (2) its net income for the 12 month period ending on the 31st day of December of the last preceding year, or (2) its net income for the 12 disapprove such payment within 30 days after receiving notice of such payment. An additional limitation is that Rhode Island does not permit a domestic insurer to declare or pay a dividend except out of earned surplus unless otherwise approved by the commissioner before the dividend is paid.

The maximum amount of dividends which can be paid by state of Rhode Island insurance companies to shareholders without prior approval of the Insurance Commissioner is subject to restrictions relating to net income and statutory surplus. Statutory surplus at December 31, 2017 was \$1,895,432. The maximum dividend payout which may have been made without prior approval in 2018 was \$19,434. Dividends are approved by the Board of Directors.

- (4) The Company made no dividend payments during the reporting period.
- (5) There are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.
- (6) There were no restrictions placed on the Company's unassigned funds (surplus), including for whom the surplus is being held.
- (7) Not applicable
- (8) Not applicable
- (9) The Company has no special surplus funds.

(10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized \$0

- (11) Not applicable
- (12) Not applicable
- (13) Not applicable

NOTE 14 Liabilities, Contingencies and Assessments

- A. Contingent Commitments The Company has no contingent commitments.
- B. Assessments

The Company has no guaranty funds and other assessments.

C. Gain Contingencies The Company has no gain contingencies.

- D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits Not applicable
- E. Product Warranties Not applicable
- F. Joint and Several Liabilities
- Not applicable
- G. All Other Contingencies Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the financial position of the Company.

NOTE 15 Leases

- A. Lessee Operating Lease:(1) The Company does not have any operating leases.
- B. Lessor Leases(1) Not applicable

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not applicable

NOTE 17	Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities	
---------	---	--

- A. Not applicable
- B. Not applicable
- C. Not applicable

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

Not applicable

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

Not applicable

NOTE 20 Fair Value Measurements

A. (1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value		× /	· · · ·		
Cash Equivalents					
Other Money Market Mutual Funds	\$ 634,087	\$ -	\$ -	\$ -	\$ 634,087
Short Terms	· ·				
Special Revenue & Special Assessment	-	4,035,667	-	-	4,035,667
Bonds					-
Industrial & Miscellaneous (Unaffiliated)	-	25,815,695	-	-	25,815,695
Political Subdivisions	-	2,236,125	-	-	2,236,125
Special Revenue & Special Assessment	-	16,250,937	-	-	16,250,937
States, Territories & Possessions	-	1,136,530	-	-	1,136,530
Total assets at fair value/NAV	\$ 634,087	\$ 49,474,954	\$ -	\$ -	\$ 50,109,041
	<u>.</u>				
Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value	Total
 b. Liabilities at fair value 					
Derivative Liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	\$ -	\$ -	\$ -	\$	\$ -

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy

The Company has no assets or liabilities measured at fair values in Level 3 category.

Description	Beginning Balance at 01/01/2018	Transfers into Level 3	Transfers out of Level 3	and (losses)	Total gains and (losses) included in Surplus		Issuances	Sales	Settlement s	Ending Balance at 12/31/2018
a. Assets										
Total Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
			1	T . (.]	T	1	-	-	1	
				i otal gains	Total gains					
	Beginning	Transfers	Transfers	and	and					Ending
	Balance at	into	out of	(losses)	(losses)				Settlement	Balance at
Description	01/01/2018	Level 3	Level 3	included in	included in	Purchases	Issuances	Sales	s	12/31/2018
a. Liabilities										
Total Liabilities	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

B. Fair Value Measurements

SSAP 100 establishes a fair value hierarchy which prioritizes and ranks the level of market price observability used in measuring investments at fair value. Market price observability is impacted by a number of factors, including the type of investment, the characteristics specific to the investment, and the state of the marketplace (including the existence and transparency of transactions between market participants). Investments with readily-available actively quoted prices or for which fair value can be measured from actively-quoted prices in an orderly market will generally have a higher degree of market price observability and a lesser degree of judgment used in measuring fair value.

Investments disclosed at fair value are classified and disclosed in one of the following categories based on inputs:

Level 1 - Fair value measurements that are quoted prices (unadjusted) in active markets that the Company has the ability to access for identical assets or liabilities. Market price data generally is obtained from exchange or dealer markets. The Company does not adjust the quoted price for such instruments.

Level 2 - Fair value measurements based on inputs other than quoted prices included in Level 1 that are observable for the asset, either directly or indirectly. Level 2 inputs include quoted prices for similar assets in active markets, quoted prices for identical or similar assets in markets that are not active, and inputs other than quoted prices that are observable for the asset, such as interest rates and yield curves that are observable at commonly quoted intervals.

Level 3 - Fair value measurements based on valuation techniques that use significant inputs that are unobservable. In certain cases, the inputs used to measure fair value may fall into different levels of the fair value hierarchy. In such cases, the determination of which category within the fair value hierarchy is appropriate for any given investment is based on the lowest level of input that is significant to the fair value measurement. The Company's assessment of the significance of a particular input to the fair value measurement in its entirety requires judgment, and considers factors specific to the investment.

For the Company's investment portfolio, the Company obtains quoted prices in active markets, when available, for identical or similar assets at the balance sheet date. Market price data is generally obtained from dealer markets.

The carrying amounts for the following financial instruments approximate their fair values at December 31, 2018 and December 31, 2017 because of their shortterm nature: cash, cash equivalents and short term investments, and investment income due and accrued, accounts payable and accrued expenses and other liabilities.

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

							Not
						Net Asset	Practicable
	Aggregate	Admitted				Value	(Carrying
Type of Financial Instrument	Fair Value	Assets	(Level 1)	(Level 2)	(Level 3)	(NAV)	Value)
Bonds	\$ 45,439,286	\$ 45,030,133	\$ -	\$ 45,439,286	\$ -	\$ -	\$ -
Short Terms	\$ 4,035,667	\$ 4,034,186	\$ -	\$ 4,035,667	\$ -	\$ -	\$ -
Cash Equivalents	\$ 634,087	\$ 634,087	\$ 634,087	\$ -	\$ -	\$ -	\$ -

D. Not Practicable to Estimate Fair Value

The Company had no financial instruments where it was not practicable to estimate fair value.

NOTE 21 Other Items

- A. Unusual or Infrequent Items
- The Company had no extraordinary, unusual or infrequent events or transactions during the statement period.
- B. Troubled Debt Restructuring: Debtors The Company had no troubled debt restructuring.
- C. Other Disclosures
 - (1) Start-up activities: During 2018, the Company has incurred \$273,619 for direct costs associated with building and implementing the various operating systems. This includes internal and external costs incurred during the developmental stages and costs relating to upgrades and modifications to include new functionalities within existing applications. All other costs, including any training and maintenance related costs incurred pre- and post-implementation, have
- D. Business Interruption Insurance Recoveries The Company did not experience any business interruption
- E. State Transferable and Non-transferable Tax Credits Not applicable
- F. Subprime Mortgage Related Risk Exposure
 - (1) The Company does not engage in direct subprime residential mortgage lending. The Company had no exposure as of December 31, 2018 to subprime mortgage related risks. The Company has no investments within the fixed income investment portfolio which contain securities collateralized by mortgages that have characteristics of subprime lending. Such characteristics include an interest rate above prime to borrowers who do not qualify for prime rate loans, borrowers with low credit ratings (FICO scores), unconventionally high initial loan-to-value ratios, and borrowers with less than conventional documentation of their income and/or net assets.
- G. Insurance-Linked Securities (ILS) Contracts Not applicable

NOTE 22 Events Subsequent

Subsequent events have been considered through February 19, 2019 for the statutory financial statements issued as of December 31, 2018 and determined there were none that required disclosure.

NOTE 23 Reinsurance

- A. Unsecured Reinsurance Recoverables The Company had no reinsurance recoverable.
- B. Reinsurance Recoverable in Dispute Not applicable
- C. Reinsurance Assumed and Ceded Not applicable
- D. Uncollectible Reinsurance Not applicable
- E. Commutation of Reinsurance Reflected in Income and Expenses. Not applicable
- F. Retroactive Reinsurance Not applicable
- G. Reinsurance Accounted for as a Deposit Not applicable
- I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation Not applicable
- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation Not applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

The Company did not have any retrospectively rated contracts or contracts subject to redetermination.

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

The Company does not retain any losses. Therefore, its net reserves at December 31, 2018 and 2017 were both \$0.

NOTE 26 Intercompany Pooling Arrangements

Not applicable

NOTE 27 Structured Settlements

The Company did not have any structured settlements.

NOTE 28 Health Care Receivables

- A. Pharmaceutical Rebate Receivables Not applicable
- B. Risk-Sharing Receivables
- Not applicable

NOTE 29 Participating Policies

Not applicable

NOTE 30 Premium Deficiency Reserves

Not applicable

NOTE 31 High Deductibles

Not applicable

	Not applicable
NOTE 33	Asbestos/Environmental Reserves
	The Company does not have asbestos reserves.
NOTE 34	Subscriber Savings Accounts
	Not applicable
NOTE 35	Multiple Peril Crop Insurance
	Not applicable
NOTE 36	Financial Guaranty Insurance
	Not applicable

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

	1 2			
	 7.21 State the percentage of foreign control; 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact). 	<u>-</u>	100.0	%
7.1 7.2	Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?		Yes [X] No []
6.2	If yes, give full information:			
6.1	Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspendence by any governmental entity during the reporting period?		Yes [] No [X]]
	1 2 3 Name of Entity NAIC Company Code State of Domicile			
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that he ceased to exist as a result of the merger or consolidation.	as		
5.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC.		Yes [] No [X]]
	4.21 sales of new business? 4.22 renewals?		Yes [] No [X] Yes [] No [X]	
4.2	During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an aff receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:	iliate,		-
4.1	During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: 4.11 sales of new business? 4.12 renewals?	control	Yes [] No [X] Yes [] No [X]	
3.6	Have all of the recommendations within the latest financial examination report been complied with?	Yes [] No [] N/A []	X]
3.5	Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?	Yes [] No [] N/A []	X]
3.4	By what department or departments? Rhode Island			
3.3	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).		11/20/1989	
3.2	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.		09/30/1989	
3.1	State as of what date the latest financial examination of the reporting entity was made or is being made.		09/30/1989	
2.2	If yes, date of change:		10/04/2018	
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	ie	Yes [X] No []]
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.			
1.4	Is the reporting entity publicly traded or a member of a publicly traded group?]
1.3	State Regulating?		Rhode Island	,
1.2	If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?	Yes [X	1 No [] N/A [1
1.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of vis an insurer? If yes, complete Schedule Y, Parts 1, 1A and 2		Yes [X] No []

1	2
Nationality	Type of Entity
Bermuda	Corporation

GENERAL INTERROGATORIES

8.1 8.2] No) [X]	
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities fi If response to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commission	irms? n (city and state of the main office) of any affiliates re Office of the Comptroller of the Currency (OCC), th	egulated by a fea le Federal Depo	deral	Yes [] No) [X]	
		2 Location (City, State)	3 4 FRB OCC	5 FDIC	6 SEC			
				+				
9.	What is the name and address of the independent certified public accord Deloitte and Touche LLP, 500 College Road East Third Floor Princeton, NJ 08540	ountant or accounting firm retained to conduct the a	nnual audit?					
10.1	USA Has the insurer been granted any exemptions to the prohibited non-au requirements as allowed in Section 7H of the Annual Financial Report law or regulation?	ing Model Regulation (Model Audit Rule), or substan	ntially similar sta	ate	Yes [1 No	1 X 1	
10.2	If the response to 10.1 is yes, provide information related to this exemption	ption:						
10.3	Has the insurer been granted any exemptions related to the other requ	uirements of the Annual Financial Reporting Model F	Regulation as					
10.4	allowed for in Section 18A of the Model Regulation, or substantially sin If the response to 10.3 is yes, provide information related to this exemp	ption:			Yes [X] No)[]	
10.5	Exemption for the Annual Actuarial Opinion Has the reporting entity established an Audit Committee in compliance	e with the domiciliary state insurance laws?		······	1 N. T	1 1	1/4 Г 1	1
10.6	If the response to 10.5 is no or n/a, please explain				, NO [] r	N/A[]	
11.	What is the name, address and affiliation (officer/employee of the repo firm) of the individual providing the statement of actuarial opinion/certif N/A as the Company received an exemption from providing the annual	orting entity or actuary/consultant associated with an fication?	n actuarial consu	ulting				
12.1	Does the reporting entity own any securities of a real estate holding co				Yes [1 No	. [X]	
		estate holding company			100 [1 110		
		rcels involved			0			
		justed carrying value					C)
12.2	If, yes provide explanation:							
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITI	IES ONLY:						
13.1	What changes have been made during the year in the United States m		• •					
13.2	Does this statement contain all business transacted for the reporting e	entity through its United States Branch on risks wher	ever located?		Yes [] No)[]	
13.3	, , ,				Yes [] No)[]	
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the] No [] N	N/A []	l
14.1	Are the senior officers (principal executive officer, principal financial of similar functions) of the reporting entity subject to a code of ethics, whi (a) Honest and ethical conduct, including the ethical handling of actual relationships;	ich includes the following standards? I or apparent conflicts of interest between personal a	and professiona		Yes [X] No)[]	
	 (b) Full, fair, accurate, timely and understandable disclosure in the per (c) Compliance with applicable governmental laws, rules and regulatio (d) The promot internal reporting of violations to an appropriate person 	ons;	.ity;					
	(d) The prompt internal reporting of violations to an appropriate person(e) Accountability for adherence to the code.							
14.11	If the response to 14.1 is No, please explain:							
14.2	Has the code of ethics for senior managers been amended?				Yes [X] No)[]	
14.21	If the response to 14.2 is yes, provide information related to amendme New Ownership				-		-	
	Have any provisions of the code of ethics been waived for any of the s				Yes [] No	[X]	
14.31	If the response to 14.3 is yes, provide the nature of any waiver(s).							

GENERAL INTERROGATORIES

	If the response to 1	5.1 is yes, indicate the American Bankers Associat f Credit and describe the circumstances in which th	tion (ABA) Routing Number and the name of the issuing or confirming ne Letter of Credit is triggered.		-
	1	2	3	4	
	American	2	3	4	
	Bankers				
	Association (ABA) Routing				
	Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amou	unt
		BOAF	RD OF DIRECTORS		
			d upon either by the board of directors or a subordinate committee		
	thereof?			Yes []	No [X
			oceedings of its board of directors and all subordinate committees	Yes [X]	No [
	Has the reporting er	ntity an established procedure for disclosure to its b	board of directors or trustees of any material interest or affiliation on the		-
	part of any of its offi	cers, directors, trustees or responsible employees	that is in conflict with the official duties of such person?	Yes [X]	No [
			FINANCIAL		
	Has this statement	been prepared using a basis of accounting other th	an Statutory Accounting Principles (e.g., Generally Accepted		
	Accounting Principle	es)?	exclusive of policy loans): 20.11 To directors or other officers	Yes []	NO [X
	i olai amouni ioane	d during the year (inclusive of Separate Accounts, i	20.11 To directors or other officers		
			20.13 Trustees, supreme or grand	φ	
			(Fraternal Only)	\$	
		ns outstanding at the end of year (inclusive of Sepa	arate Accounts, exclusive of	•	
	policy loans):		20.21 To directors or other officers	\$`	
			20.22 To stockholders not onicers	⊅	
			(Fraternal Only)	\$	
	Were any assets re	ported in this statement subject to a contractual ob orted in the statement?	ligation to transfer to another party without the liability for such		
	If yes, state the amo	bunt thereof at December 31 of the current year:	21.21 Rented from others	\$	[A
	, ,	,	21.22 Borrowed from others		
			21.23 Leased from others		
			21.24 Other	\$	
	Does this statement	t include payments for assessments as described in assessments?	n the Annual Statement Instructions other than guaranty fund or	Vac []	No[X
	If answer is yes:		22.21 Amount paid as losses or risk adjustmer		
			22.22 Amount paid as expenses		
			22.23 Other amounts paid	\$	
	Does the reporting e	entity report any amounts due from parent, subsidia	aries or affiliates on Page 2 of this statement?	Yes [X]	No [
			ge 2 amount:		
			INVESTMENT		
			of current year, over which the reporting entity has exclusive control, in securities lending programs addressed in 24.03)	Yes [X]	No [
2		omplete information relating thereto			
	whether collateral is	carried on or off-balance sheet. (an alternative is t	cluding value for collateral and amount of loaned securities, and to reference Note 17 where this information is also provided)		
	Does the Company	's security lending program meet the requirements	for a conforming program as outlined in the Risk-Based Capital	1 No [1 N/A F
4			Yes [
	If answer to 24.04 is	s yes, report amount of collateral for conforming pro	ograms	\$	
		no, report amount of collateral for other programs	•	\$	
5	If answer to 24.04 is				
5 6 7	Does your securities	s lending program require 102% (domestic securitie ct?	es) and 105% (foreign securities) from the counterparty at the Yes [] No [] N/A [
5	Does your securities outset of the contra-	ct?	es) and 105% (foreign securities) from the counterparty at the Yes [the counterparty falls below 100%? Yes [

GENERAL INTERROGATORIES

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

	24.102 Total book adjusted/carrying value of reinvested co	rted on Schedule DL, Parts 1 and 2 ollateral assets reported on Schedule DL, Parts 1 and 2 e liability page.	\$0
25.1	Were any of the stocks, bonds or other assets of the reporting entity owner control of the reporting entity, or has the reporting entity sold or transferred force? (Exclude securities subject to Interrogatory 21.1 and 24.03).	any assets subject to a put option contract that is currently in	Yes [] No [X]
25.2	If yes, state the amount thereof at December 31 of the current year:	 25.21 Subject to repurchase agreements	\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 0

25.3 For category (25.26) provide the following:

	1 Nature of Restriction	2 Description	Am	3 ount
				0
26.1	Does the reporting entity have any hedging transactions reported on Sc	hedule DB?	Yes [] No [X]
26.2	If yes, has a comprehensive description of the hedging program been m If no, attach a description with this statement.	hade available to the domiciliary state? Yes [] No [] N/A [X]
27.1	Were any preferred stocks or bonds owned as of December 31 of the clissuer, convertible into equity?		Yes [] No [X]
27.2	If yes, state the amount thereof at December 31 of the current year		\$	0
28.	Excluding items in Schedule E - Part 3 - Special Deposits, real estate, r offices, vaults or safety deposit boxes, were all stocks, bonds and other custodial agreement with a qualified bank or trust company in accordan Outsourcing of Critical Functions, Custodial or Safekeeping Agreement	securities, owned throughout the current year held pursuant to a ce with Section 1, III - General Examination Considerations, F.	Yes [)	(] No []

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

1	2
Name of Custodian(s)	Custodian's Address
The Bank of New York - Inst. Custody Ins. Division	One Wall Street, New York, NY 10286
,	

28.02 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)

.....Yes [] No [X] 28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?..... 28.04 If yes, give full and complete information relating thereto:

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

GENERAL INTERROGATORIES

28.05 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
New England Asset Management, Inc	U
	-

28.0597 For those firms/individuals listed in the table for Question 28.05, 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?..... Yes [X] No []

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?..... Yes [X] No []

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
				Investment
				Management
Central Registration				Agreement
Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed
105900	New England Asset Management, Inc.	KUR85E5PS4GQFZTFC130	SEC	NO

Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? 29.1

29.2 If yes, complete the following schedule:

		-
1	2	3
		Book/Adjusted
CUSIP #	Name of Mutual Fund	Carrying Value
		0
29.2999 - Total		0

Yes [] No [X]

29.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
		Amount of Mutual	
		Fund's Book/Adjusted	
		Carrying Value	
	Name of Significant Holding of the	Attributable to the	Date of
Name of Mutual Fund (from above table)	Mutual Fund	Holding	Valuation
		0	

Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value. 30

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
30.1 Bonds			
30.2 Preferred stocks	0	0	0
30.3 Totals	49,064,319	49,474,954	410,635

30.4 Describe the sources or methods utilized in determining the fair values:

Fair values are based on end of period prices provided by independent pricing services (vendor price) such as:

ICE Data Services, ICE BofAML indices, Reuters, Bloomberg, Markit, Markit iBoxx, or PricingDirect.

	Under certain circumstances, if a vendor price is unavailable, a price may be obtained from a broker. Short term securities are valued at amortized cost. Cash Equivalents are valued at amortized cost, including Government (exempt) money market mutual funds. Non-Government money market mutual funds are valued at net present value (NPV).				
31.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Yes []	No [X]
31.2	If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Yes []	No []
31.3	If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:				
32 1	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	Yes [¥ 1	No [1

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

GENERAL INTERROGATORIES

33.	 By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5 a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit security is not available. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal. Has the reporting entity self-designated 5GI securities? 		No [X]			
34.	 By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a on a current private letter rating held by the insurer and available for examination by state insurance regulated d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO. Has the reporting entity self-designated PLGI securities? 		No [X]			
	OTHER					
35.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?		\$	0		
35.2	15.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade association service organizations and statistical or rating bureaus during the period covered by this statement.					
	1 Name	0				
36.1	Amount of payments for legal expenses, if any?		\$	0		
36.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments during the period covered by this statement.	for legal expenses				
	1 Name	2 Amount Paid				
37.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments	of government, if ar	יאַרs	0		
37.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment of connection with matters before legislative bodies, officers or departments of government during the period covered					
	1 Name	2 Amount Paid				

0

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

	FAIL 2	PROPERTY AND CASUALLY INTERIOGRATORIES	
1.1	Does the reporting entity have any direct Medicare Sup	pplement Insurance in force?	Yes [] No [X]
1.2	If yes, indicate premium earned on U.S. business only		\$
1.3	1.31 Reason for excluding	are Supplement Insurance Experience Exhibit?	\$
1.4	Indicate amount of earned premium attributable to Car	nadian and/or Other Alien not included in Item (1.2) above.	\$
1.5	Indicate total incurred claims on all Medicare Supplement	ent Insurance.	\$
1.6	Individual policies:	Most current three years:	
	F	1.61 Total premium earned	\$
		1.62 Total incurred claims	
		1.63 Number of covered lives	
		All years prior to most current three years	
		1.64 Total premium earned	\$
		1.65 Total incurred claims	
		1.66 Number of covered lives	
1.7	Group policies:	Most current three years:	
1.7	Croup policies.		•
		1.71 Total premium earned	\$
		1.72 Total incurred claims	
		1.73 Number of covered lives	
		All years prior to most current three years 1.74 Total premium earned 1.75 Total incurred claims 1.76 Number of covered lives	\$
2.	Health Test:		
		1 2 Current Year Prior Year	
	0.1 Dramium Numerator		
		0	
		0	
	2.4 Reserve Numerator	00	
		0	
	2.6 Reserve Ratio (2.4/2.5)		
3.1	Does the reporting entity issue both participating and n	on-participating policies?	Yes [] No [X]
3.2	If yes, state the amount of calendar year premiums wri	tten on:	
		3.21 Participating policies	\$
		3.22 Non-participating policies	\$
4.	For mutual reporting Entities and Reciprocal Exchange	es Only:	
4.1			Yes [] No []
4.1		s?	
4.2 4.3	If accordable policies are issued what is the extent of	s /	res [] No [] .% 0.
4.3 4.4		id during the year on deposit notes or contingent premiums.	
7.7			Ψ
5.	For Reciprocal Exchanges Only:		
5.1			Yes [] No []
5.2	If yes, is the commission paid:		1 N F 1 N
		21 Out of Attorney's-in-fact compensation	
		0.22 As a direct expense of the exchange] No [] N/A [
5.3	What expenses of the Exchange are not paid out of the	e compensation of the Attorney-in-fact?	
5.4	Has any Attorney-in-fact compensation, contingent on	fulfillment of certain conditions, been deferred?	Yes [] No []
5.5	If yes, give full information		

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

6.1	What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss? N/A			
6.2	Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process. N/A			
6.3	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss? N/A			
6.4	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes [] No	[X]
6.5	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss. N/A, as the Company has not written any premiums.			
7.1	Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)?	Yes [] No	[X]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions:			0
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes [] No	[]
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes [] No	o [X]
8.2	If yes, give full information			
9.1	 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to 	Yes [1 1	
9.2	the ceding entity	103 [j ne	, [,]
	and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes [] No) [X]
9.3	 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved. 			
9.4	 Except for transactions meeting the requirements of paragraph 32 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? 	Yes [] No	o [X]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.			
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria: (a) The entity does not utilize reinsurance; or,	Yes [] No	o [X]
10.	attestation supplement If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?		-	

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1	1 Has the reporting entity guaranteed policies issued by any other entity and now in force?					Yes [] No [X]
11.2	If yes, give full information						
12.1	If the reporting entity recorded accrued retrospective amount of corresponding liabilities recorded for:				-		
			oaid losses				
		12.12 Unp	baid underwriting expension	ses (including loss adjus	stment expenses)	\$	0
12.2	Of the amount on Line 15.3, Page 2, state the amou	nt which is secured by le	etters of credit, collatera	I, and other funds		.\$	0
12.3	If the reporting entity underwrites commercial insurat accepted from its insureds covering unpaid premium	nce risks, such as worke is and/or unpaid losses?	ers' compensation, are p	premium notes or promi	ssory notes Yes [] No [] N/A [X]
12.4	If yes, provide the range of interest rates charged un	der such notes during th	ne period covered by thi	s statement:			
			m				
		12.42 To					0.0 %
12.5	Are letters of credit or collateral and other funds rece promissory notes taken by a reporting entity, or to se losses under loss deductible features of commercial	cure any of the reporting	g entity's reported direct	unpaid loss reserves ,	including unpaid	Yes [] No [X]
12.6	If yes, state the amount thereof at December 31 of the	ne current year:					
			ers of credit				
		12.62 Col	lateral and other funds			.\$	0
13.1	Largest net aggregate amount insured in any one ris	k (excluding workers' co	ompensation):			\$	0
13.2	2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?					Yes [] No [X]
13.3	State the number of reinsurance contracts (excluding facilities or facultative obligatory contracts) considered	g individual facultative ri ed in the calculation of th	sk certificates, but inclu ne amount.	ding facultative program	ns, automatic		0
14.1	Is the company a cedant in a multiple cedant reinsur	ance contract?				Yes [] No [X]
14.2	If yes, please describe the method of allocating and						
14.3	If the answer to 14.1 is yes, are the methods describ contracts?					Yes [] No []
14.4	If the answer to 14.3 is no, are all the methods descr	ribed in 14.2 entirely cor	ntained in written agreer	nents?		Yes [] No []
14.5	If the answer to 14.4 is no, please explain:						
15.1	.1 Has the reporting entity guaranteed any financed premium accounts?					Yes [] No [X]
15.2	If yes, give full information						
16.1	Does the reporting entity write any warranty business If yes, disclose the following information for each of t					Yes [] No [X]
		1	2	3	4		5
		Direct Losses Incurred	Direct Losses Unpaid	Direct Written Premium	Direct Premium Unearned	Dir	ect Premium Earned
		incurreu	Oripaiu	i ieniiuni	Uneameu	. 	Lameu

	Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premium
	Incurred	Unpaid	Premium	Unearned	Earned
16.11 Home	0	0	0	0	0
16.12 Products	0	0	0	0	0
16.13 Automobile	0	0	0	0	0
16.14 Other*	0	0	0	0	0
* Disclose type of coverage:					

16.2

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

17.1	Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance?	Yes [] No [X]	
	Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:				
	17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance	\$			0
	17.12 Unfunded portion of Interrogatory 17.11	\$!	0
	17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11				
	17.14 Case reserves portion of Interrogatory 17.11				
	17.15 Incurred but not reported portion of Interrogatory 17.11	\$!	0
	17.16 Unearned premium portion of Interrogatory 17.11				
	17.17 Contingent commission portion of Interrogatory 17.11	\$!	0
18.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]	
18.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$		(0
18.3	Do you act as an administrator for health savings accounts?	-		-	
18.4	If yes, please provide the balance of funds administered as of the reporting date.	\$		(0
19.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X] No []	
19.1	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 []	

FIVE-YEAR HISTORICAL DATA

	Show amounts in whole do	1	2	3	4	5
		2018	2017	2016	2015	2014
(Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. 1	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3,					
			0	0	0	0
	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
3. I	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	0
4	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28,					
	29, 30 & 34)	0	0	0	0	0
5. I	Nonproportional reinsurance lines (Lines 31, 32 &					0
	33)	0	0	0	0	0
		0		0		0
	Net Premiums Written (Page 8, Part 1B, Col. 6) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3,					
7. 1	18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	0	0	0	0	0
8. I	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	0
9. I	Property and liability combined lines (Lines 3, 4, 5,					
		0	0	0	0	0
10. /	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
11 1	Nonproportional reinsurance lines (Lines 31, 32 &					
	33)	0	0	0	0	0
12.	Total (Line 35)	0	0	0	0	0
	Statement of Income (Page 4)					
13 I	Net underwriting gain (loss) (Line 8)	(490,343)	0			0
14. I	Net investment gain or (loss) (Line 11)	109,568			, , ,	
15.	Total other income (Line 15)	0	0			0
16. I	Dividends to policyholders (Line 17)	0	0	0		
17. I	Federal and foreign income taxes incurred (Line 19)	0	•	1,388	4,385	14,659
	Net income (Line 20)	(380,775)	19,434		(163,221)	
	Balance Sheet Lines (Pages 2 and 3)					
19.	Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	51,938,601	1.944 127	1.824 007	1.683 933	
20. I	Premiums and considerations (Page 2, Col. 3)					
	20.1 In course of collection (Line 15.1)	0	0			0
-	20.2 Deferred and not yet due (Line 15.2)	0	0	0	0	0
	20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
	Total liabilities excluding protected cell business					
	(Page 3, Line 26)					
22. I	Losses (Page 3, Line 1)	0	0	0	0	0
23. I	Loss adjustment expenses (Page 3, Line 3)	0	0	0		0
24. 1	Unearned premiums (Page 3, Line 9)	0	0	0		0
25. (Capital paid up (Page 3, Lines 30 & 31)					
	Surplus as regards policyholders (Page 3, Line 37)	51,500,005	1,895,432	1,822,507	1,657,433	1,589,700
(Cash Flow (Page 5)					
	Net cash from operations (Line 11)	(619,799)		40,839		158,516
	Risk-Based Capital Analysis Total adjusted capital	F4 F00 00F	4 005 400	4 000 507	4 057 400	4 000 700
	Authorized control level risk-based capital	181,404	2,890			
1	Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col.					
	3) (Line divided by Page 2, Line 12, Col. 3)					
	x100.0					
30. I	Bonds (Line 1)		0.0	0.0		0.0
31. 3	Stocks (Lines 2.1 & 2.2)	0.0	0.0			
32. I	Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0		0.0
	Real estate (Lines 4.1, 4.2 & 4.3)	0.0	0.0	0.0	0.0	0.0
34. (Cash, cash equivalents and short-term investments (Line 5)	10 6	100.0	0.7	1 0	0.0
35. ((Line 5) Contract loans (Line 6)	ı2.0 	iuu.u n n			0.3
35. 0 36. 1	Derivatives (Line 7)	0.0 				0.0
36. I 37. (Other invested assets (Line 8)		n n	0.0		
37. 0 38. 1	Receivables for securities (Line 9)		0.0	0.0		
	Securities landing reinvested collatoral accets (Line					
	10)	0.0	0.0	0.0	0.0	0.0
40.	Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
	Cash_cash equivalents and invested assets (Line					
		100.0		0.0.		
I	Investments in Parent, Subsidiaries and Affiliates					
42.	Affiliated bonds (Schedule D. Summany Line 12					
т <u>с</u> . /	Col. 1)	0	0	0	0	0
43.	Affiliated professed atealse (Cabadula D. Cummany					
	Line 18, Col. 1)	0	0	0	0	0
44.	Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	_	_	_	_	^
A E	Affiliated short form investments (subtotals included					
45.	Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)		0	0	0	
46.	Affiliated mortgage loans on real estate	0	ő	0		0
47.	All other affiliated	0	0	0	0	0
48.	Total of above Lines 42 to 47					
	Total Investment in Parent included in Lines 42 to					
	47 above	0	0	0	0	0
50. I	Percentage of investments in parent, subsidiaries					
	and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37					
			1	1	1	

FIVE-YEAR HISTORICAL DATA

		1 2018	2 2017	3 2016	4 2015	5 2014
	Capital and Surplus Accounts (Page 4)	2010	2017	2010	2010	2011
51.	Net unrealized capital gains (losses) (Line 24)	0	(11, 228)	32 994	(725,866)	(95.06
52.	Dividends to stockholders (Line 35)					
53.	Change in surplus as regards policyholders for the year (Line 38)					
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.		0	0	0	0	
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)			0	0	
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)			0	0	
57.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	
58.	Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	
59.	Total (Line 35)		0	0	0	
	Net Losses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	0	0	0	0	
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	0	0	
63.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	
64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	
65.	Total (Line 35)	0	0	0	0	
	Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66.	Premiums earned (Line 1)					
67.	Losses incurred (Line 2)	0.0	0.0	0.0	0.0	0
8.	Loss expenses incurred (Line 3)	0.0	0.0	0.0	0.0	0
9.	Other underwriting expenses incurred (Line 4)	0.0	0.0	0.0	0.0	0
0.	Net underwriting gain (loss) (Line 8)	0.0	0.0	0.0	0.0	0
	Other Percentages					
'1.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	0.0	0.0	0.0	0.0	0
72.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	0.0	0.0	0.0	0.0	0
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)					0
	One Year Loss Development (\$000 omitted)					
74.	Development in estimated losses and loss expenses incurred prior to current year (Schedule				0	
75.	Percent of development of losses and loss expenses incurred to policyholders' surplus of prior					
	year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	0.0	0.0	0.0	0.0	0
	Two Year Loss Development (\$000 omitted)					
'6.	Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	0	0	0	0	
7.	Percent of development of losses and loss					
<i>'</i> .	expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	0.0	0.0	0.0	0.0	0
	airided by Lage 7, Lille 21, OUL 2 X 100.0)		due to a merger in cor	0.0	0.0	L L

Schedule P - Part 1 - Summary NONE

Schedule P - Part 2 - Summary

Schedule P - Part 3 - Summary NONE

Schedule P - Part 4 - Summary NONE

ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Ascot Specialty Insurance Company **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

		4	Groce Browin	Allocated by	V States and T		c	7	0	0
		I	Gross Premiu Policy and Men	nbership Fees,	4	5	6	/	8	9 Direct
			Less Return P Premiums on Tak	Policies Not	Dividends Paid or	Direct			Finance and	Premiums Written for Federal
			2	3	Credited to	Losses			Service	Purchasing
		Active Status	Direct Premiums	Direct Premiums	Policyholders on Direct	Paid (Deducting	Direct Losses	Direct Losses	Charges Not Included in	Groups (Included in
	States, Etc.	(a)	Written	Earned	Business	Salvage)	Incurred	Unpaid	Premiums	Column 2)
	AlabamaAL AlaskaAK	E	0	0	0	0 0	0 0	0	0	0
	ArizonaAK	NNN	0	0	0	0	0	0	0	0
	ArkansasAR	NN	0	0	0	0	0	0	0	0
	CaliforniaCA	N	0	0	0	0	0	0	0	0
	ColoradoCO	N		0	0			0	0	0
7.	ConnecticutCT	N	0	0	0	0	0	0	0	0
	DelawareDE	E	0	0	0	0	0	0	0	0
9.	District of Columbia DC	E	0	0	0	0	0	0	0	0
10.	FloridaFL	N	0	0	0	0	0	0	0	0
	GeorgiaGA	E	0	0	0	0	0	0	0	0
	HawaiiHI	E	0	0	0	0	0	0	0	0
-	IdahoID	N	0	0	0	0	0	0	0	0
	IllinoisIL	È	0	0	0	0	0 0	0	0	0
	IndianaIN IowaIA	È N	0	0	0	0	0	0	0	0
	KansasKS	IN N	Ū	0	U	U	0	0 ^	U	ںں ^
	KentuckyKS	NN.		0		0 N	0	0 ^		ںں ^
	LouisianaLA	N		0	0	0 N	0 0	0 N	0	0 N
	Maine ME	N		0	0	0	0	0		0 0
	MarylandMD	N	0	0	0	0	0		0	0
	MassachusettsMA	N	0		0	0		0		0
	MichiganMI	N	0	0	0	0	0	0	0	0
24.	MinnesotaMN	N	0	0	0	0	0	0	0	0
25.	MississippiMS	N	0	0	0	0	0	0	0	0
26.	MissouriMO	N	0	0	0	0	0	0	0	0
	MontanaMT	N	0	0	0	0	0	0	0	0
	NebraskaNE	E	0	0	0	0	0	0	0	0
	NevadaNV	E	0	0	0	0	0	0	0	0
	New Hampshire NH	N	0	0	0	0	0	0	0	0
	New JerseyNJ	N	0	0	0	0	0	0	0	0
	New MexicoNM	N	0	0	0	0	0	0	0	0
	New YorkNY North CarolinaNC	N	0	0	0	0	0	0	0	0
	North DakotaND	NN	0	0	0	0	0	0	0	0
	OhioOH	NN	0	0	0	0	0	0	0	0 0
	OklahomaOK	N	0	0	0	0	0	0	0	0
	OregonOR	N	0	0	0	0	0	0	0	0
	PennsylvaniaPA	N	0	0	0	0	0	0	0	0
	Rhode IslandRI	L	0	0	0	0	0	0	0	0
41.	South CarolinaSC	N	0	0	0	0	0	0	0	0
	South DakotaSD	E	0	0	0	0	0	0	0	0
	TennesseeTN	E	0	0	0	0	0	0	0	0
	TexasTX	N	0	0	0	0	0	0	0	0
	UtahUT	N	0	0	0	0	0	0	0	0
	VermontVT	E	0	0	0	0	0	0	0	0
	VirginiaVA	N F	0	0	0	0	0	0	0	0
	WashingtonWA West VirginiaWV	È N	0 0	0 0	0 0	0 0	0 0	0 0	0 0	0
	WisconsinWI	N F	0	0 0	0	0	0 0	0	0	0 ^
	WyomingWY	E F	0	0	0	0	0	0	0	0 ∩
	American SamoaAS	N		0	0	0 0	0	00	0	0 N
	Guam	N	0	0	0	0	0	0	0	0 0
	Puerto RicoPR	N.	.0	0	0		0	0	0	0
	U.S. Virgin IslandsVI	N.	0	0	0	0	0	0	0	0
	Northern Mariana									-
	IslandsMP	N	0	0	0	0	0	0	0	0
	CanadaCAN	N	0	0	0	0	0	0	0	0
	Aggregate other alien OT	XXX	0	0	0	0	0	0	0	0
	Totals DETAILS OF WRITE-INS	XXX	0	0	0	0	0	0	0	0
58001.										
58001. 58002.										
58002. 58003.		XXX XXX								
	Summary of remaining									
	write-ins for Line 58 from overflow page	XXX	0	.0	0	.0	.0	0	0	
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58									
	above)	XXX	0	0	0	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).

R - Registered - Non-domiciled RRGs....

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Q - Qualified - Qualified or accredited reinsurer. N - None of the above - Not allowed to write

business in the state41

D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus (b) Explanation of basis of allocation of premiums by states, etc.

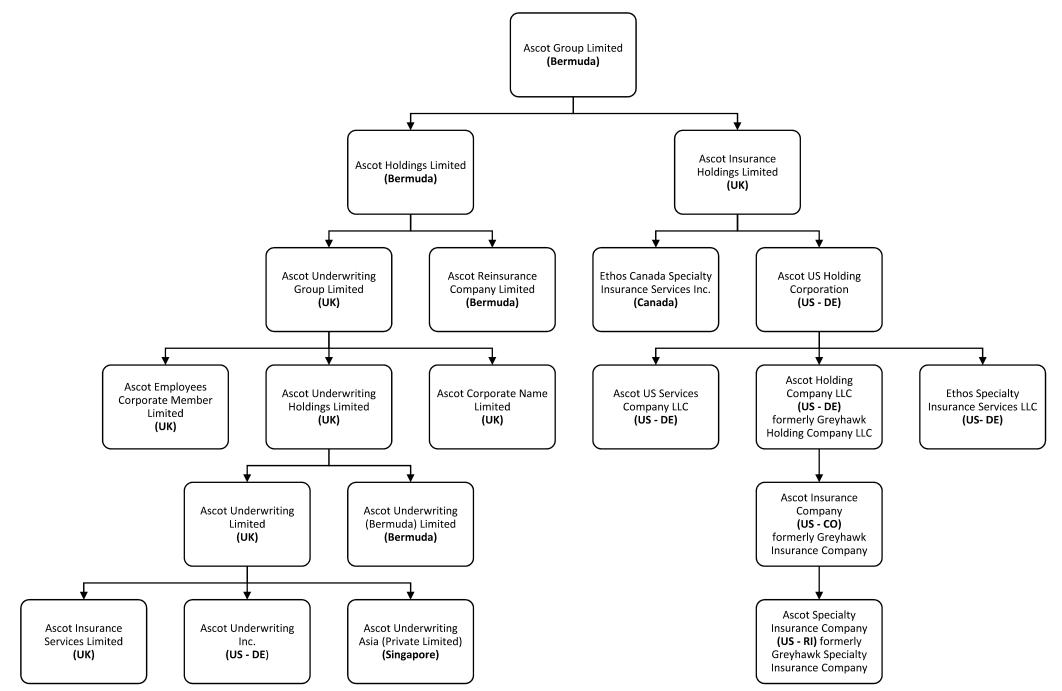
Premiums are allocated to those states where the Insured's risks are located.

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ANNUAL STATEMENT FOR THE YEAR 2018 OF THE Ascot Specialty Insurance Company OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 24							
		1	2	3	4		
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total		
2404.	Outside Investment Management Services	0	0				
2497.	Summary of remaining write-ins for Line 24 from overflow page	0	0	9,187	9,187		

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