

# **QUARTERLY STATEMENT**

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

## NARRAGANSETT BAY INSURANCE COMPANY

NAIC Group Code 0497 (Current Period)	_ , NAIC Co	mpany Code	43001	_ Employer's ID Nu	mber	05-0394576
Organized under the Laws of	Rhode Island	, State	e of Domicile or P	ort of Entry	Rh	ode Island
Country of Domicile		Unite	d States			
Incorporated/Organized	06/10/1981	Comm	nenced Business		04/01/19	982
Statutory Home Office	25 Maple Street		.,	Pawtucket, RI, L		
Main Administrative Office	(Street and Number) 25 Maple Street	Р	awtucket, RI, US	(City or Town, State, Co 02860-2104	ountry and .	Zip Code) 401-725-5600
Mail Address	(Street and Number) P. O. Box 820	(Cit	y or Town, State, Cour P	ntry and Zip Code) awtucket, RI, US 02	`	Code) (Telephone Number)
(Str	eet and Number or P.O. Box)	/	(Cit	y or Town, State, Country	and Zip Co	ode)
Primary Location of Books and Record			Pawtucket RI	US 02860-2104		401-725-5600
Internet Web Site Address	(Street and Number)	\	, ,	Country and Zip Code)	(Area	Code) (Telephone Number
Statutory Statement Contact	Rosemarie Mullen D		w.nbic.com	401-495	-8070	
	(Name)	urelle		(Area Code) (Telephone		Extension)
rdurette@nb (E-Mail Add				401-495-8914 (Fax Number)		
Norma		FICERS	Nama			Title
Name	Title	т.	Name		-	Title
Bruce Thomas Lucas, Kirk Howard Lusk	Chief Executive Officer Chief Financial Officer		mothy Michael M Kirk Howard Lus			President Secretary
	OTHE	R OFFICE	RS	,		<b>,</b>
	DIRECTOR		ISTEES	,		
Bruce Thomas Lucas	Richard Alexander Widdicomb		annon Elizabeth I	ucas	Iri	ni Barlas
Trifon Houvardas	Vijay Shankarrao Walvekar		mes Alfred Masie			
State ofRhode Island County ofProvidence. The officers of this reporting entity being du above, all of the herein described assets we that this statement, together with related ex liabilities and of the condition and affairs of and have been completed in accordance wi law may differ; or, (2) that state rules or	ss server the absolute property of the said r chibits, schedules and explanations t the said reporting entity as of the rep	eporting entity, fre herein contained, orting period state	ee and clear from a annexed or referre d above, and of its	ny liens or claims then ed to, is a full and tru income and deduction	eon, exce e stateme ns therefre	ept as herein stated, ar ent of all the assets ar om for the period ende

the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Bruce Thomas Lucas Chief Executive Officer	Timothy Michael Moura President	Kirk How Chief Finar	ard Lusk ncial Officer
		a. Is this an original filing?	Yes [X] No [ ]
Subscribed and sworn to before me thisday of,	-	<ul> <li>b. If no:</li> <li>1. State the amendment number</li> <li>2. Date filed</li> <li>3. Number of pages attached</li> </ul>	

	A	SSEIS			
			Current Statement Date		4
		1	2	3	December 31
				Net Admitted Assets	Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds				
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks				
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less				
	\$ encumbrances)			0	0
	4.2 Properties held for the production of income				
	(less \$			0	0
	4.3 Properties held for sale (less				
	\$ encumbrances)			0	0
5	Cash (\$				
5.					
	cash equivalents (\$45,821,263 ) and short-term investments (\$0 )	01 204 107			16 070 604
	Contract loans (including \$ premium notes)			0	0
	Derivatives			0	0
	Other invested assets			0	0
	Receivables for securities				
	Securities lending reinvested collateral assets				0
	Aggregate write-ins for invested assets			0	0
	Subtotals, cash and invested assets (Lines 1 to 11)		0	178,465,941	
13.	Title plants less \$ charged off (for Title insurers				
	only)			0	
14.	Investment income due and accrued				
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of				
	collection			6,318,178	6 , 216 , 967
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$earned				
	but unbilled premiums)				
	15.3 Accrued retrospective premiums (\$) and			, ,	, ,
	contracts subject to redetermination (\$			0	0
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	68 024 746			24 014 970
	16.2 Funds held by or deposited with reinsured companies				0
	16.3 Other amounts receivable under reinsurance contracts				0
17	Amounts receivable relating to uninsured plans				0
	I Current federal and foreign income tax recoverable and interest thereon				
	2 Net deferred tax asset				
					0
1	Guaranty funds receivable or on deposit			0	0
	Electronic data processing equipment and software			0	
21.	Furniture and equipment, including health care delivery assets			0	0
	(\$)				0
	Net adjustment in assets and liabilities due to foreign exchange rates				0
	Receivables from parent, subsidiaries and affiliates				0
	Health care (\$				0
	Aggregate write-ins for other-than-invested assets	4,884,951		4 , 166 , 379	
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	290,169,671	964,704	289,204,967	227,267,575
27.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts			0	0
28.	Total (Lines 26 and 27)	290,169,671	964,704	289,204,967	227,267,575
	DETAILS OF WRITE-INS				
1101.				0	0
1102.					0
1103.					0
	Summary of remaining write-ins for Line 11 from overflow page		1	0	
1	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0		0	0
	PREPAID REINSURANCE			0	
	PREPAID OUTSIDE SERVICES COST				
	EQUITY FROM POOLS AND ASSOCIATIONS.		1		
		, ,	0		
	Summary of remaining write-ins for Line 25 from overflow page		710 570		
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	4,884,951	718,572	4,166,379	22,602,910

## ASSETS

## LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Statement Date	2 December 31, Prior Year
1.	Losses (current accident year \$	13,662,634	
	Reinsurance payable on paid losses and loss adjustment expenses		
	Loss adjustment expenses		
	Commissions payable, contingent commissions and other similar charges		
	Other expenses (excluding taxes, licenses and fees)		
	Taxes, licenses and fees (excluding federal and foreign income taxes)		
	Current federal and foreign income taxes (including \$		
	Net deferred tax liability		
	Borrowed money \$		
	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ and		
	ncluding warranty reserves of \$	04 405 074	44 040 04
	ncluding \$ for medical loss ratio rebate per the Public Health Service Act)		
10.	Advance premium		4,416,58
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		40,587,783
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16. I	Provision for reinsurance (including \$		
	Net adjustments in assets and liabilities due to foreign exchange rates		
	Drafts outstanding		
	Payable to parent, subsidiaries and affiliates		
	Payable to parent, subsidiaries and anniales		2,000,10
	Payable for securities		
	Payable for securities lending		
	Liability for amounts held under uninsured plans		
	Capital notes \$and interest thereon \$		
	Aggregate write-ins for liabilities		
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds	0	
30.	Common capital stock		
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds	0	
	Surplus notes		
	Gross paid in and contributed surplus		
	Unassigned funds (surplus)		
	Less treasury stock, at cost:		
	36.1 shares common (value included in Line 30 \$		
	36.2 shares preferred (value included in Line 31 \$		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	106,975,747	111,104,91
38.	Totals (Page 2, Line 28, Col. 3)	289,204,967	227, 267, 57
	DETAILS OF WRITE-INS		
2501.	AMOUNTS TO BE ESCHEATED	715,809 .	
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	715,809	645,83
2901.			
	Summary of remaining write-ins for Line 29 from overflow page		
	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	
3298.	Summary of remaining write-ins for Line 32 from overflow page	0	
3299	Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)	0	

## STATEMENT OF INCOME

		1 Current Year	2 Prior Year	3 Prior Year Ended
		to Date	to Date	December 31
	UNDERWRITING INCOME			
1.	Premiums earned:			
	1.1 Direct (written \$	, , ,		
	1.2 Assumed (written \$).			
	1.3 Ceded (written \$		2/ 780 180	
	DEDUCTIONS:			
2.	Losses incurred (current accident year \$			
	2.1 Direct		60,090,618	
	2.2 Assumed		0	0
	2.3 Ceded		· · ·	
	2.4 Net	· · · ·		14,041,591
	Loss adjustment expenses incurred			
4.	Other underwriting expenses incurred			
5. 6	Aggregate write-ins for underwriting deductions Total underwriting deductions (Lines 2 through 5)			0 26 ,757 ,684
	Net income of protected cells			20,757,004
8.	Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	(8 451 129)	÷	
0.				
	INVESTMENT INCOME			
9.	Net investment income earned		1,303,654	2,612,126
10.	Net realized capital gains (losses) less capital gains tax of \$		4,811	25,405
11.	Net investment gain (loss) (Lines 9 + 10)		1,308,465	2,637,531
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off	(0.10, 0.00)	(0.40, 505)	/700 001
40	(amount recovered \$			
	Finance and service charges not included in premiums		1,883,509	1,575,957 4,714,753
	Aggregate write-ins for miscellaneous income		2,295,629	5,562,079
	Total other income (Lines 12 through 14) Net income before dividends to policyholders, after capital gains tax and before all other federal		2,295,029	5,302,079
10.	and foreign income taxes (Lines 8 + 11 + 15)	(6,669,906)	15.635.606	28.543.057
17.	Dividends to policyholders		0	0
	Net income, after dividends to policyholders, after capital gains tax and before all other federal			
	and foreign income taxes (Line 16 minus Line 17)			
19.	Federal and foreign income taxes incurred	3,584,841	5,472,637	2,622,249
20.	Net income (Line 18 minus Line 19)(to Line 22)	(10,254,747)	10,162,969	25,920,808
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year			
22.	Net income (from Line 20)			
	Net transfers (to) from Protected Cell accounts		0	0
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$	1 170 510	64 220	1 000 444
25.			04,338	1,006,441 0
	Change in net unrealized foreign exchange capital gain (loss) Change in net deferred income tax	/ 992 661	0	
	Change in nonadmitted assets			
	Change in provision for reinsurance			
	Change in surplus notes		0	
	Surplus (contributed to) withdrawn from protected cells			0
	Cumulative effect of changes in accounting principles			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:		0	
	33.1 Paid in			0
	<ul> <li>33.2 Transferred to capital (Stock Dividend)</li> <li>33.3 Transferred from capital</li> </ul>		0	0 0
34	33.3 Transferred from capital			0
	Dividends to stockholders			0
	Change in treasury stock			0
	Aggregate write-ins for gains and losses in surplus		0	825,181
	Change in surplus as regards policyholders (Lines 22 through 37)		10,042,482	21,741,300
	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	106,975,747	99,406,101	111,104,919
	DETAILS OF WRITE-INS			
0501.			0	0
			0	0
			0	0
0598.	Summary of remaining write-ins for Line 5 from overflow page		0	0
0599.	TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0
1401.	FEE INCOME			
	OTHER INCOME		0	
			0	0
	Summary of remaining write-ins for Line 14 from overflow page		1 992 500	0
	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)	1,062	1,883,509	4,714,753
	PRIOR YEAR TAX ADJUSTMENT		0	
3702			0	0
			0	. ()
3703.	Summary of romaining write ins for Line 37 from overflow page	^		
3703. 3798.	Summary of remaining write-ins for Line 37 from overflow page TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)			0 825,181

# CASH FLOW

			0	2
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance.			
	Net investment income		1,527,582	
3.	Miscellaneous income	369,330	2,295,629	5,562,079
	Total (Lines 1 to 3)	99,940,464	32,403,009	41,445,158
	Benefit and loss related payments			4,974,127
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	0
	Commissions, expenses paid and aggregate write-ins for deductions			
	Dividends paid to policyholders		0	0
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	5,700,000	4,950,000	3,563,950
10.	Total (Lines 5 through 9)	88,604,902	26,465,715	23,869,642
11.	Net cash from operations (Line 4 minus Line 10)	11,335,562	5,937,294	17,575,516
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	4,175,833		
	12.2 Stocks		0	0
	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	(19)
	12.7 Miscellaneous proceeds	6,878	825,000	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	4,169,985		
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds			
	13.2 Stocks	0	0	0
	13.3 Mortgage loans		0	0
	13.4 Real estate		0	0
	13.5 Other invested assets		0	0
	13.6 Miscellaneous applications	100	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	499,750	10,727,054	17,936,009
14.	Net increase (or decrease) in contract loans and premium notes		0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	3,670,236	(105,866)	1,598,637
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock		0	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)	19,408,712	2,123,509	(20,557,758)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	19,408,712	2,123,509	(20,557,758)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)		7,954,937	(1,383,605)
19.	Cash, cash equivalents and short-term investments:		10,000,000	10,000,000
	19.1 Beginning of year			
	19.2 End of period (Line 18 plus Line 19.1)	81,294,197	56,218,230	46,879,688

#### 1. Summary of Significant Accounting Practices

#### A. Accounting Practices

The accompanying financial statements of Narragansett Bay Insurance Company (the "Company") are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Insurance Department.

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

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and the practice permitted by the Rhode Island Department is shown below:

	SSAP #	F/S Page	F/S Line #	2018	2017
NET INCOME (LOSS)					
<ol> <li>Narragansett Bay Insurance Company state basis (Page 4, Line 20, Columns 1 &amp; 2)</li> </ol>				\$ (10,254,747)	\$ 25,920,809
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:				-	-
<ul> <li>(3) State Prescribed Practices that increase/(decrease) NAIC SAP:</li> </ul>				\$ -	\$ -
(4) NAIC SAP (1-2-3=4)				\$ (10,254,747)	\$ 25,920,809
<u>SURPLUS</u>					
<ul><li>(5) Narragansett Bay Insurance Company state basis (Page 3, Line 37, Columns 1 &amp;2)</li></ul>				\$ 106,975,747	\$ 111,104,919
<ul> <li>(6) State Prescribed Practices that increase/(decrease) NAIC SAP:</li> </ul>				-	-
<ul> <li>(7) State Prescribed Practices that increase/(decrease) NAIC SAP:</li> </ul>				\$ 	
(8) NAIC SAP (5-6-7=8)				\$ 106,975,747	\$ 111,104,919

B. - D. No significant changes.

#### 2. - 4. No significant changes.

#### 5. Investments

- A. C. No significant changes.
- D. Loan-Backed Securities

(1) Prepayments assumptions for Mortgage-Backed Securities, Collateralized Mortgage Obligations and Other Structured Securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity including the time of year (seasonality), current levels or interest rates (refinancing incentive), economic activity (including housing turnover) and term and age of the underlying collateral (burnout, seasoning).

- (2) N/A
- (3) N/A

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss:

a. The aggregate amount of unrealized losses:

	Less than 12 Months 12 Months or Longer		( 675,484) ( 713,637)
b.	The aggregate related fair value of securities with unrealized loss	ses:	

1.	Less than 12 Months	\$ 33,744,916
2.	12 Months or Longer	\$ 13,018,765

(5) All impaired securities (fair value is less than cost or amortized cost) have been evaluated by management, based on specific criteria to determine if the impairments should be considered other than temporary. Factors

considered in determining that other than temporary impairment charges are warranted include: management's consideration of current and near term liquidity needs and retrospective review of length of loss over credit quality of investment and general market conditions. Management has concluded that the value of the investments for which it reports unrealized losses at June 30, 2018 are not other than temporarily impaired, as management has the intent and ability to hold these securities for a period of time sufficient to allow for any anticipated recovery in market value.

- E. K. No significant changes.
- 6. 16. No significant changes.
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishment of Liabilities

 $A_{\cdot}-C_{\cdot} \ N/A$ 

18. - 19. No significant changes.

#### 20. Fair Value Measurements

#### A. Asset and Liabilities Measured and Reported at Fair Value

Type of Financial Instrument	(Level 1)		(Level 2)	(Le	evel 3)	Total
Financial instruments – assets: Bonds Other money market mutual fund	\$ 45,822,476	\$ \$	91,228,660	\$ \$	-	\$ 91,228,660 \$ 45,822,476
Total assets at fair value	\$ 45,822,476	\$	91,228,660	\$	-	\$137,051,136

#### B. Other Fair Value Disclosures

N/A

#### C. Fair Values for All Financial Instruments

Type of Financial Instrument	A	ggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Pra (Ca	Not actical arrying alue)
Financial instruments – assets: Bonds	\$	91,228,660	\$ 91,228,660	\$ -	\$ 91,228,660	\$ -	\$	_
Common Stock - Affiliated Cash, cash equivalents and short-term investments		3,854,099 81,294,197	3,854,099 81,294,197	- 81,294,197	-	3,854,099		-
Total assets	\$	176,376,956	\$ 176,376,956	\$ 81,294,197 81,294,197	\$ 91,228,660	\$ 3,854,099	\$	-

D. N/A

- 21. No significant changes.
- 22. Events Subsequent
- 23. 24. No significant changes.
- 25. Changes in Incurred Losses and Loss Adjustment Expenses

Reserves for losses and loss adjustment expenses as of December 31, 2017 were \$16.7 million. For the period ended June 30, 2018, \$9.7 million had been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. As of June 30, 2018, reserves remaining for prior policy years are \$8.8 million as a result of re-estimation of unpaid claims and claim adjustment expenses principally on the homeowners' line of business. There has been approximately \$.9 million unfavorable prior-year development from December 31, 2017 to June 30, 2018, of which \$.4 million related to involuntary pool development. Original estimates are increased or decreased as additional information becomes available. The Company does not issue retrospectively rated policies.

26. - 36. No significant changes.

## **GENERAL INTERROGATORIES**

## **PART 1 - COMMON INTERROGATORIES** GENERAL

1.1	Did the reporting entity Domicile, as required b	Yes [ ] No [X]							
1.2	If yes, has the report b	Yes [ ] No [ ]							
2.1	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?								
2.2	If yes, date of change:								
3.1		member of an Insurance Holding Company System consisting o		ons, one or more of	Yes [X] No [ ]				
	If yes, complete Sched	ule Y, Parts 1 and 1A.							
3.2	Have there been any s	ubstantial changes in the organizational chart since the prior qua	rter end?		Yes [ ] No [X]				
3.3	If the response to 3.2 is	s yes, provide a brief description of those changes.							
3.4	Is the reporting entity p	ublicly traded or a member of a publicly traded group?			Yes [X] No [ ]				
3.5	If the response to 3.4 is	s yes, provide the CIK (Central Index Key) code issued by the SE	C for the entity/group						
4.1	4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?								
4.2		e of entity, NAIC Company Code, and state of domicile (use two sult of the merger or consolidation.	letter state abbreviation) for	any entity that has					
		1 Name of Entity	2 NAIC Company Code	3 State of Domicile					

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

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	000	FDIC	SEC
Anniate Name	(City, State)			TDIC	SEC

## **GENERAL INTERROGATORIES**

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

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

Yes [ ] No [X]

.....

If no, attach a description with this statement.

## GENERAL INTERROGATORIES

- For the reporting entity's security lending program, state the amount of the following as of the current statement date: 16
  - 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2
  - Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL. Parts 1 and 2 16.2 Total payable for securities lending reported on the liability page 16.3
- Excluding items in Schedule E Part 3 Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held 17 pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

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

1	2
Name of Custodian(s)	Custodian Address
BANK OF AMERICA	100 WESTMINSTER STREET, PROVIDENCE, RI 02903

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? .
- 17.4 If yes, give full and complete information relating thereto:

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

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

1	2
Name of Firm or Individual	Affiliation

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

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets?
- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

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

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

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

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

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

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

Yes [ ] No [X]

Yes [ ] No [X]

0

0

¢

\$

Yes [X] No [ ]

Yes [ ] No [ X ]

Yes [ ] No [ ]

## GENERAL INTERROGATORIES PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

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

Yes [ ] No [X]

#### 4.2 If yes, complete the following schedule:

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

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

## **SCHEDULE F - CEDED REINSURANCE**

Showing All New Reinsurers - Current Year to Date

1	Showing All New Reinsurers - Current Year to Date           1         2         3         4         5         6					
	-	·			6 Certified Reinsurer Rating (1 through 6)	7 Effective Date
NAIC Company Code					Reinsurer Rating	of Certified Reinsurer Rating
Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	(1 through 6)	Reinsurer Rating
		PROPERTY/CASUALTY – AFFILIATES PROPERTY/CASUALTY – U.S. INSURERS PROPERTY/CASUALTY – POOLS AND ASSOCIATIONS PROPERTY/CASUALTY – ALL OTHER INSURERS				
		PROPERTY/CASUALTY - POOLS AND ASSOCTATIONS				
		PROPERTY/CASUALTY - ALL OTHER INSURERS				
			1			
		······				
			1			
			1			
			]			

## **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

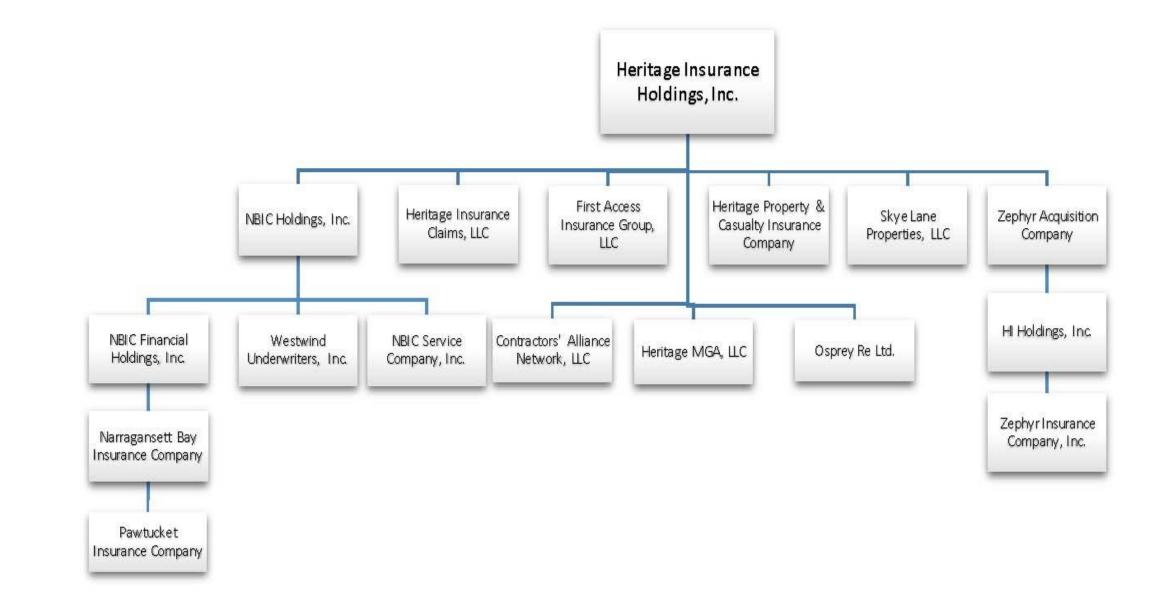
			1	Current Year to Direct Premi		by States and Territor		Direct Loss	es Unpaid
				2	3	4	5	6	7
	States, etc.		Active Status (a)	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date
1.	Alabama	. AL	N	10 200	.00		0		0
2.	Alaska	. AK	N		0		0		0
	Arizona		N		0		0		0
	Arkansas		N		0		0		0
	California		N		0		0		0
		CO	N	0.000.000	0	0 500 407		4 000 500	
	Connecticut		L N	2,966,029	1,672,240	2,588,187	45,376 0	1,822,538	
	Dist. Columbia		NNN.		0				0
	Florida		NN		0		0		0
	Georgia		N.						
	Hawaii		N		0		0		0
13.	Idaho	. ID	N		0		0		0
	Illinois		N		0		0		0
	Indiana		N		0		0		0
	lowa		N		0		0		0
	Kansas		N		0		0		0
	Kentucky		N N		0		······0		0
	Louisiana Maine		NN		U				U
	Maryland		N		0		0		U N
	Massachusetts		L						
1	Michigan		N	20,000,002			0		0
	Minnesota		N		0				0
	Mississippi		N		0		0		0
26.	Missouri	. MO	N		0		0		0
	Montana		N		0		0		0
	Nebraska		N		0		0		0
	Nevada		N		0		0		0
	New Hampshire		N	0.4, 0.00, 0.40	0	40, 470, 000		47.040.400	0
	New Jersey		L						
	New Mexico New York		N		0 		0. 		
	No. Carolina		L N	04,547,591					
1	No. Dakota		NN.		0		0		0
1			N		0		0		0
i	Oklahoma	. OK	N		0		0		0
38.	Oregon	OR	N		0		0		0
39.	Pennsylvania	PA	L		0		0		0
	Rhode Island		L	9,662,577		6,510,220	3,285,002		4,630,466
1	So. Carolina		N		0		0		0
	So. Dakota		N		0		0		0
	Tennessee		N		0		0		0
	Texas Utah		N N		0		0.		0
	Utah Vermont		N N		0				U
	Vermont		NNNNNN		U		U		U N
	Washington		NNNN				0		0 
	West Virginia		N				0		
	Wisconsin		N		0		0		0
51.	Wyoming	. WY	N		0		0		0
52.	American Samoa	AS	N		0		0		0
	Guam		N		0		0		0
	Puerto Rico		N		0		0		0
1	U.S. Virgin Islands		N		0		0		0
	Northern Mariana Islands.		N		0		0		0
	Canada		N	0	0 0	^	0	^	U
1	Aggregate Other Alien Totals	. 01	XXX XXX		0 159,070,964	0 96 , 166 , 860	0. 58,157,798	0 .92,256,965	
- 59.	DETAILS OF WRITE-INS	;	777	100,030,029	153,070,904	30,100,000	50,157,780	32,230,903	12,001,004
58001.			XXX						
58002. 58003.			XXX XXX						
	Summary of remaining wr	ite-							
58999.	ins for Line 58 from overfl page TOTALS (Lines 58001 thr		XXX	0	0	0	0	0	0
	58003 plus 58998) (Line 5 above) ve Status Counts		ХХХ	0	0	0	0	0	0

(a) Active Status Counts

.....0

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

......0 Q – Qualified – Qualified or accredited reinsurer ..... .0 ......0 N – None of the above – Not allowed to write business in the state ......51



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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
		-		-	_	Name of		-	-		Type of Control	-			
						Securities					(Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary		Directly Controlled by	Attorney-in-Fact,		Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)		Percentage	Entity(ies)/Person(s)	(Y/N)	*
							Heritage Insurance Holdings,				Board of				
			45-5338504		0001598665	NYSE	Inc	DE	UDP	Board of Directors	Directors	0.0		N	0
							Heritage Property & Casualty			Heritage Insurance Holdings,			Heritage Insurance		
04861	Heritage Ins Holdings Grp	14407	46-0694063				Insurance Company	FL	RE	Inc	Ownership		Holdings, Inc	N	0
										Heritage Insurance Holdings,			Heritage Insurance		
			46-0614061				Heritage MGA, LLC	FL	NIA	Inc	Ownership		Holdings, Inc	N	0
										Heritage Insurance Holdings,			Heritage Insurance		
			46-0711647				Heritage Insurance Claims, LLC	FL	NIA	Inc	Ownership		Holdings, Inc	N	0
							Contractors' Alliance Network,			Heritage Insurance Holdings,			Heritage Insurance		
			90-0917421				ILLC	FL	NIA	Inc	Ownership		Holdings, Inc	N	0
							First Access Insurance Group,			Heritage Insurance Holdings,	o		Heritage Insurance		
			80-0872052				LLC	FL	NIA	_ Inc	.Ownership		Holdings, Inc	N	0
								-		Heritage Insurance Holdings,	<b>a</b>		Heritage Insurance	I	
			98 <b>-</b> 1109773				Osprey Re LTD	BMU	NIA	. Inc	.Ownership		Holdings, Inc	N	0
			00.0004500					-		Heritage Insurance Holdings,	0	100.0	Heritage Insurance		0
			80-0904526				Skye Lane Properties, LLC	FL	NIA	. Inc	Ownership		Holdings, Inc	N	0
0.400.4		11000	00 0044544								0	100.0	Heritage Insurance		0
04861	Heritage Ins Holdings Grp	11026	99 <b>-</b> 0344514				Zephyr Insurance Company, Inc	НІ	IA	HI Holdins, Inc	.Ownership		Holdings, Inc	N	0
			04 0000555								0	100.0	Heritage Insurance		0
			94-3332555				HI Holdings, Inc	НІ	NIA	Zephyr Acquisition Company	Ownership		Holdings, Inc	N	0
			07.0040500				Zarland Armitetting Ormania	DE	NUA	Heritage Insurance Holdings,	Owner web in		Heritage Insurance		0
			27 <b>-</b> 0818506				Zephyr Acquisition Company	DE	NIA	linc	Ownership		Holdings, Inc	N	0
			26-1736008				NDIC Holdingo Ino	DE	NIA	Heritage Insurance Holdings,	Ownership	100.0	Heritage Insurance	N	0
			20-1730000				NBIC Holdings, Inc		NTA	.   Inc	ownersnip		Holdings, Inc	N	0
			20-3179005				NBIC Financial Holdings, Inc	RI	NIA	NBIC Holdings, Inc	Ownership		Heritage Insurance Holdings, Inc	N.	0
			20-31/9000				Indicial noturitys, INC	Л.	NIA				Heritage Insurance	<sup>N</sup>  -	0
							Westwind Underwriters, Inc	DE	NIA	NBIC Holdings, Inc	Ownership	100.0	Holdings, Inc	N	0
							mestwind Underwirters, INC		NTA				Heritage Insurance	N	0
			26-3867627				NBIC Service Company, Inc	RI		NBIC Holdings, Inc.	Ownership		Holdings, Inc.	N	Ο
			20-300/02/				Narragansett Bay Insurance						Heritage Insurance	<sup>/N</sup>  -	0
04861	Heritage Ins Holdings Grp	43001	05-0394576					RI	IA	NBIC Financial Holdings, Inc.	Ownershin	100.0	Holdings. Inc.	N	Λ
04001	norrage ma norumya orp	10001	00-0004010							Narragansett Bay Insurance	. omieranip		Heritage Insurance	[······]·	0
04861	Heritage Ins Holdings Grp	14931	05-0197250				Pawtucket Insurance Company	RI	IA	Company	Ownership		Holdings, Inc	N	Ο
0.4001	norrago monorarigo orp	1-1001	00 0101200									0.0	norumyo, mo	N	0 N
															U
										-					

Asterisk

Explanation

			Current Year to Date		4	
		1	2	3	Prior Year to	
		Direct Premiums	Direct Losses	Direct Loss	Date Direct Loss	
	Line of Business	Earned	Incurred	Percentage	Percentage	
1.	Fire					
2.	Allied lines	1,252,399				
3.	Farmowners multiple peril		0	.0.0	0.0	
4.	Farmowners multiple peril Homeowners multiple peril	156.689.437	104.366.274	66.6	39.1	
5.	Commercial multiple peril			0.0	0.	
6.	Mortgage guaranty			0.0	0	
8.	Ocean marine			0.0	0	
9.	Inland marine	1 734 240	582 074	33.6	(8.	
10.	Financial guaranty	.,		0.0	0.	
11.1	Medical professional liability -occurrence.			0.0	0	
11.2	Medical professional liability -claims made			0.0	0. 0	
12.	Earthquake	90 685		0.0	0. 0	
12.	Group accident and health			0.0	0.	
13. 14.	Credit accident and health			0.0	0.	
14.	Other accident and health			0.0		
				0.0	0.	
16.	Workers' compensation	4 004 000	400,050		0.	
17.1	Other liability occurrence	1,034,022				
17.2	Other liability-claims made			0.0	0.	
17.3	Excess Workers' Compensation			0.0	0.	
18.1	Products liability-occurrence			0.0	0.	
18.2	Products liability-claims made			0.0	0.	
19.1,19.2	Private passenger auto liability			0.0	0.	
	Commercial auto liability			0.0	0.	
21.	Auto physical damage			0.0	0.	
22.	Aircraft (all perils)				0.	
23.	Fidelity				0.	
24.	Surety				0.	
26.	Burglary and theft				0.	
27.	Boiler and machinery					
28.	Credit			.0.0	0.	
29.	International				0.	
30.	Warranty			0.0	0.	
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX	
32.	Reinsurance - Nonproportional Assumed Liability	ХХХ	XXX	ХХХ	ХХХ	
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	ХХХ	ХХХ	
34.	Aggregate write-ins for other lines of business	0	0	0.0	0.	
35.	TOTALS	163,862,433	107,170,727	65.4	38.	
	AILS OF WRITE-INS		,			
					0.	
402.				.0.0	0.	
403.				0.0	0.	
	n. of remaining write-ins for Line 34 from overflow page	0		0.0		
3499 Tota	Is (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0.0	0. 0.	

## **PART 1 - LOSS EXPERIENCE**

## PART 2 - DIRECT PREMIUMS WRITTEN

	Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire			650 184
2.	Allied lines			1.240.914
3.	Farmowners multiple peril			0
4.	Homeowners multiple peril	85.841.535		151.839.737
5.	Commercial multiple peril	0	,	
6.	Mortgage guaranty			0
8.	Ocean marine			0
9.	Inland marine		1,657,538	1.703.134
10.	Financial guaranty			0
11.1	Medical professional liability-occurrence	0		Õ
11.2	Medical professional liability-claims made	0		Ō
12.	Earthquake			
13.	Group accident and health	0		0
14.	Credit accident and health			0
15.	Other accident and health	0		0
16.	Workers' compensation			0
17.1	Other liability occurrence.	567 762	1 011 091	1 006 164
17.2	Other liability-claims made			0
17.3	Excess Workers' Compensation.			0
18.1	Products liability-occurrence.	0		0
18.2	Products liability-claims made	0		0 0
	Private passenger auto liability	0		0 0
193194	Commercial auto liability	0		0 0
21.	Auto physical damage			0 
22.	Aircraft (all perils)	0		0 0
23.	Fidelity			0 0
24.	Surety			0 0
26.	Burglary and theft	0		0 0
20.	Boiler and machinery		2.383.549	2 542 788
27.	Credit			
20.	International			0
30.	Warranty			0
31.	Reinsurance - Nonproportional Assumed Property	U	XXX.	0 
31.	Reinsurance - Nonproportional Assumed Property			
-	Reinsurance - Nonproportional Assumed Liability	······ ··· ··· ··· ··· ··· ··· ··· ···	ХХХ	
33.	Reinsurance - Nonproportional Assumed Financial Lines			
34.	Aggregate write-ins for other lines of business		100,000,500	150.070.004
35.	TOTALS	89,610,039	160,090,528	159,070,964
	AILS OF WRITE-INS	0		0
		·····		
3402				0
3403				0
	n. of remaining write-ins for Line 34 from overflow page	0		0
3499. Tota	Is (Lines 3401 through 3403 plus 3498) (Line 34)	0	0	0

# PART 3 (000 omitted)

## LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2018 Loss and LAE Payments on Claims Reported as of Prior Year-End	2018 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2018 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11 + 12)
1. 2015 + Prior			8,461	2,628	(661)	1,967		(434)	2,774	6,213	1,100	(1,381)	(281)
2. 2016		2,400	3,512		(772)		1,615	(206)			1,463	(1,134)	
3. Subtotals 2016 + prior	6,513	5,460	11,973	3,588	(1,433)	2,155	5,488	(640)			2,563	(2,515)	
4. 2017		4,039	4,715	6 , 160	(4,154)	2,006		(2,826)		3,584	8,786	(7,911)	
5. Subtotals 2017 + prior	7 , 189	9 , 499	16,688	9,748	(5,587)	4,161	8,790	(3,466)	8,126	13,450	11,349	(10,426)	
6. 2018		XXX	xxx	xxx			XXX			6,606	xxx		xxx
7. Totals	. 7,189	9,499	16,688	9,748	11,370	21,118	8,790	(671)	11,937	20,056	11,349	(10,426)	923
Prior Year-End 8. Surplus As Regards Policy- holders	- 111,105										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. 157.9	2. (109.8)	3. 5.5
													Col. 13, Line 7 Line 8
													4. 0.8

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

#### Explanation:

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

#### Bar Code:

## **OVERFLOW PAGE FOR WRITE-INS**

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

	1	2	3	4
				December 31 Prior
			Net Admitted Assets	Year Net Admitted
	Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets
2504. CURRENT STATE TAX RECOVERABLE				0
2597. Summary of remaining write-ins for Line 25 from Page 02	796,709	0	796,709	0

## **SCHEDULE A – VERIFICATION**

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

# SCHEDULE B – VERIFICATION

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

# SCHEDULE BA – VERIFICATION

	Other Long-Term Invested Assets		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		0
	2.2 Additional investment made after acquisition		0
3.	Capitalized deferred interest and other. Accrual of discount. Unrealized valuation increase (decrease). Total gain (loss) on disposals. Deduct amounts received on disposals. Deduct amounts received on disposals.		0
4.	Accrual of discount		0
5.	Unrealized valuation increase (decrease)		0
6.	Total gain (loss) on disposals		0
7.	Deduct amounts received on disposals		0
9.	Total foreign exchange change in book/adjusted carrying value		0
10.	Total foreign exchange change in book/adjusted carrying value		0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-6+9-10)	0	0
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	0	0

# **SCHEDULE D – VERIFICATION**

Bonds and Stocks

	1	2
		Prior Year Ended
	Year To Date	December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year		
2. Cost of bonds and stocks acquired		
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration for bonds and stocks disposed of		
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other-than-temporary impairment recognized		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)		
12. Deduct total nonadmitted amounts		0
13. Statement value at end of current period (Line 11 minus Line 12)	97, 178, 626	99,920,368

## **SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)				(209,926)			0	
2. NAIC 2 (a)							0	
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)					0	0	0	0
5. NAIC 5 (a)					0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	102,800,224	0	9,366,369	(96,129)	102,800,224	93,337,727	0	100,402,678
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4					0	0	0	0
12. NAIC 5					0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	102,800,224	0	9,366,369	(96, 129)	102,800,224	93,337,727	0	100,402,678

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

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

## **SCHEDULE DA - PART 1**

Short-Term Investments

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

# **SCHEDULE DA - VERIFICATION**

Short-Term Investments

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

Schedule DB - Part A - Verification

# NONE

Schedule DB - Part B - Verification

Schedule DB - Part C - Section 1

Schedule DB - Part C - Section 2

Schedule DB - Verification

# NONE

# SCHEDULE E - PART 2 - VERIFICATION (Cash Equivalents)

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		0
	Cost of cash equivalents acquired		
3.	Accrual of discount		8,561
4.	Unrealized valuation increase (decrease)		(10)
5.	Total gain (loss) on disposals		(9)
6.	Deduct consideration received on disposals		4,281,835
7.	Deduct amortization of premium		0
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)	45,821,263	5,423,044

Schedule A - Part 2

# NONE

Schedule A - Part 3

Schedule B - Part 2

Schedule B - Part 3

Schedule BA - Part 2

Schedule BA - Part 3

## **SCHEDULE D - PART 3**

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

1	2	3	4	5	6	7	8	9	10 NAIC
									Designation of
CUSIP					Number of	Actual		Paid for Accrued	Designation or Market
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Shares of Stock	Actual Cost	Par Value	Interest and Dividends	Indicator (a)
Bonds - Industrial and Misce	ellaneous (Unaffiliated)	ŭ			•	•			•
						1			1
							-		
								l	+
									+
								<u> </u>	1
								I	
9999999 Totals	aring the NAIC market indicator "I.I" provi					0	XXX	0	XXX

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

## **SCHEDULE D - PART 4**

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

1	2	3 4	5	6	7			10			Book/Adjusted C	of During the Ci		16	17	18	19	20	21	22
'	2	3 4	5		'	0	5								17	10	19	20	21	~~~
									11	12	13	14	15							1 1
		F									-									NAIC
		0																		Desig-
		r									Current Year's			Book/				Bond		nation
		e						Prior Year	Unrealized		Other Than		Total Foreign	Adjusted	Foreign			Interest/Stock	Stated	or
CUSIP		i		Number of				Book/Adjusted	Valuation	Current Year's	Temporary	Total Change in	Exchange		Exchange Gain		Total Gain	Dividends	Contractual	Market
Identi-	<b>D</b>	g Disposal		Shares of				Carrying	Increase/	(Amortization)/	Impairment	B./A.C.V.	Change in	at	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Indicator
fication	Description	n Date	Name of Purchaser	Stock	Consideration	Par Value	Actual Cost	Value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	(a)
	. Governments G2 MA2826 - RMBS		Pavdown						0	(1.500)		(1.599)	0		0	0	0	244	05/20/2045	
38377G-YS-2	GNR 1068E YE - CM0/RMBS		Paydown.	ХХХ					0	(1,399)			0 0		0 0	0	0		05/20/2043	1
	GNR 10144A DA - CMO/RMBS.		Paydown	XXX	13,186				0	(123)	(	(125)	0		0	0	0		09/16/2039	1
	GNR 1313 AC - CMBS		Paydown.	ХХХ					0	(5)		(5)				0	.0		04/16/2046	1
38378D-CE-3	GNR 1217B KG - CMO/RMBS	06/01/2018	Paydown	XXX					0	(602)			0		0	0	0		07/20/2039	1
	GNR 1260A QD - CMO/RMBS		Paydown	ХХХ					0	(330)	0		0		0	0	0	134	04/16/2042	1
	Bonds - U.S. Governmen				173,744				0	(2,768)	0	(2,768)	0	173,744	0	0	0	1,274	ХХХ	ХХХ
			nt and all Non-Guaranteed						ubdivisions											
3128MA-BS-7 3128MB-V5-3	FH G07849 - RMBS FH G13136 - RMBS			XXX XXX					0		Ö	(808)	0		0	0	0		05/01/2044	<u>1</u>
3128MB-V5-3 3128MJ-YC-8	FH G13136 - RMBS FH G08706 - RMBS		Paydown Paydown						0		l		0 ^		U	0			05/01/2023	1
3128PG-NN-9	FH J04897 - RMBS		Paydown.	XXX		1,045	1 067		0	(14)	с Г	(14)	0 N	1,045	0 N	0	0		05/01/2022	1
3128PP-RQ-8	FH J10495 - RMBS		Paydown	XXX	1,998	1,998	1,067 2,034		0	(32)		(32)	0	1,998		0	0		08/01/2024	11
3128PP-UD-3	FH J10580 - RMBS	06/01/2018.	Paydown	ХХХ					0	(47)		(47)	0		0	0	0		09/01/2024	1
31292L-K9-5	FH C03920 - RMBS		Paydown						<u>0</u>	(1,448)	Q	(1,448)	0		0	0	0		05/01/2042	l
3132L7-F7-9	FH V81990 - RMBS		Paydown						0		<u>0</u>	(858)	0		<u>0</u>	0	<u>0</u>		10/01/2045	1
3132QU-3B-7 3132XT-KH-0	FH Q37993 - RMBS FH Q51195 - RMBS		Paydown Paydown						0	(3,381)		(3,381)	0		0	0	0		12/01/2045 10/01/2047	1
3136A5-5W-2	FNR 1251C ND - CMO/RMBS		Paydown.						0	(1,000)	u	(1,000)	0 N		U	0	0		05/25/2041	1
3136A6-4N-1	FNR 1272E QE - CM0/RMBS		Paydown	XXX					0	(678)	0	(678)	0		0	0	0		01/25/2038	1
3136A7-AM-4	FNR 1268D YA - CMO/RMBS		Paydown	ХХХ					0			(198) (872)	0		0	0	0		07/25/2042	1
3136A8-EM-8	FNR 12104F QC - CMO/RMBS_		Paydown	XXX					0				0		0	0	0		05/25/2042	1
3136A8-TC-4	FNR 1299A BD - CMO/RMBS		Paydown	XXX				5,504	0		0		0	5,450	0	0	0		08/25/2041	······1·····
3136AC-W6-4	FNR 1315M MG - CMO/RMBS FHR 3854A HA - CMO/RMBS		Paydown	XXX XXX			51,248		0	(772)		(772)	0		0	0	0		07/25/2039	1
3137AA-5U-3 3137AQ-ZD-3	FHR 3854A HA - CMU/RMBS FHR 4059B BA - CMU/RMBS		Paydown Paydown						0	(114)	l	(114)	U		U	0			07/15/2025 04/15/2039	1
3138EP-WS-9	FN AL6956 - RMBS		Paydown	XXX					0				00		00	0	0		06/01/2045	1
3138ET-DZ-6	FN AL8219 - RMBS		Paydown	XXX	61,528		65,742		0	(4,214)	(	(4,214)	0	61,528	0	0	0		02/01/2046	1
3138WB-PT-6	FN AS2233 - RMBS	06/01/2018	Paydown	ХХХ					0	(6,847)		(6,847)	0		0	0	0		04/01/2029	1
3138WE-C5-6	FN AS4591 - RMBS	06/01/2018	Paydown	XXX					0		0		0		0	0	0		03/01/2045	······1·····
3138WF-3X-2	FN AS6213 - RMBS		Paydown	XXX					0	(1,357)	0	(1,357)	0		0	0	0		11/01/2045	1
3138WJ-YB-8 3138WK-UN-3	FN AS8805 - RMBS FN AS9588 - RMBS		Paydown Paydown						0	(238) (936)	l	(238)	0		U	0	0		02/01/2042	1
3138Y9-S8-2	FN AX7742 - RMBS		Paydown	XXX					0				0 0		0 0	0	0	26	01/01/2045	1
3138YM-Q2-8	FN AY7672 - RMBS		Paydown	XXX					0	(1, 186)	0	(1,186)	0		0	0	0		04/01/2045	1
3138YT-MQ-4	FN AZ2166 - RMBS	06/01/2018	Paydown	ХХХ					0	(1,090)	0	(1,090)	0		0	0	0		07/01/2045	1
31398S-QU-0	FNR 10137C MC - CMO/RMBS_		Paydown	XXX					0		0	(352)	0		0	0	0		10/25/2038	11
	FNR 10137H CJ - CMO/RMBS.		Paydown	XXX					0	(4)		(4)	0		0	0	0		12/25/2025	1
	FN BC0826 - RMBS FN BH7766 - RMBS		Paydown Paydown	XXX XXX					0	(049)		(849) (184)	0		0	0	0		04/01/2046 08/01/2047	1
31412U-L7-3	FN 935150 - RMBS		Paydown	XXX	956				0			(24)	0 0		0 0	0	0		04/01/2024	1
57419R-D6-9	111 000100 111100		Call @ 100.00	XXX						(21)	0	(21)			0	(444)	(444)		09/01/2047	1FE
	OHIO HSG FIN AGY SINGLE				,,											, ,	, ,			
677377-2M-4	FAMILY MTG REV		. Call @ 100.00	XXX				10,068	0	(7)	0		0		0	(61)	(61)	126	11/01/2041	1FE
000000-00-0		<u> </u>		XXX XXX	<u> </u>	+	+	+		.+		0		·{}		·	0			
	Pondo II & Createl Dev	(onuo ond On!	al Assessment and all Non-														0			
2199999-			a Assessment and all Non- s of Governments and Thei																	1
	Subdivisions				872.544	872.544	907.015	906.078	0	(33.007)	r c	(33.007)	٥	873.049	٥	(505)	(505)	10.380	ХХХ	ХХХ
Bonde Indi	Istrial and Miscellaneous	(I Inaffiliated)			012,044	012,044	307,013	500,070	0	(55,007)		(00,007)	0	075,045	0	(303)	(303)	10,000	ллл	
12624B-AC-0	COMM 12CRE1 A3 - CMBS	(Unannated)	Paydown	XXX					0		(	(279)	0		٥	0	٥		05/17/2045	1FE
14313U-AD-8	CARMX 144 A4 - ABS		Pavdown.	XXX						2/3)	C	2	0 0		0 0	0	0		07/15/2020	1FE
20826F-AD-8	CONOCOPHILLIPS CO		Not Available	XXX	200,446	200,000	203,518	203,518	0				Ö		Ö	(2,865)	(2,865)		11/15/2024	1FE
23305Y-AD-1	DBUBS 11LC3 A4 - CMBS		Paydown	ХХХ					0		0		0		0	0	0		08/12/2044	1FE
38013M-AC-0	GMALT 172 A2B - ABS		Paydown	XXX					0	0	<u>Q</u>	0	0		0	0	0		01/21/2020	1FE
65478U-AC-3	NAROT 16A A2B - ABS NOBLE ENERGY INC		VAD 10110					0	0		0		0		0				02/15/2019	
655044-AK-1 693476-BN-2	PNC FUNDING CORP.	05/01/2018.	VARIOUS. PERSHING/DONALDSON_LUFKIN.	XXX XXX					0	(18)	(	(18)	0 ^		U	(237)	(237) (13,386)	2,194	05/01/2021 03/08/2022	2FE 1FE
69353R-CH-9	PNC FONDING CORP		PERSHING/DONALDSON_LUFKIN_	ХХХ	249,435		249,889		0	(1,442) 45	Ц Г	45	0 N		U N				03/08/2022	1FE
92937F-AB-7	WFRBS 13C12 A2 - CMBS			XXX								0	0		0				03/17/2048	
94988H-AC-5	WFCM 12LC5 A3 - CMBS		Paydown	XXX					0				0			0	0		10/17/2045	1FE
000000-00-0				ХХХ						,,							0			
3899999 -	Bonds - Industrial and Mi	scellaneous (Un	affiliated)		1,103,320	1,102,477	1,122,041	1,121,877	0	(2,302)	0	(2,302)	0	1,119,575	0	(16,987)	(16,987)	23,768	ХХХ	ХХХ
	Subtotals - Bonds - Part 4	4			2,149,608	2,148,766	2,206,179		0	(38,077)	C	(38,077)	0	2,166,369	0	(17,491)	(17,491)	35,422	ХХХ	ХХХ
8399999 -	Subtotals - Bonds				2,149,608	2,148,766	2,206,179	2,204,670	0	(38,077)	C	(38,077)	0	2,166,369	0	(17,491)	(17,491)	35,422	ХХХ	ХХХ
										• • • • • •		/					/	· · · · ·		

## **SCHEDULE D - PART 4**

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

1	2	3	4	5	6	7	8	9	10		Change in E	Book/Adjusted Ca	arrying Value		16	17	18	19	20	21	22
		F								11	12	13	14	15	Deek/				Dand		NAIC Desig-
		le l							Prior Year	Unrealized		Current Year's Other Than		Total Foreign	Book/ Adjusted	Foreign			Bond Interest/Stock	Stated	nation or
CUSIP		i			Number of				Book/Adjusted		Current Year's	Temporary	Total Change in	Exchange		Exchange Gain	Realized Gain	Total Gain	Dividends	Contractual	Market
Identi-		g	Disposal		Shares of				Carrying	Increase/	(Amortization)/	Impairment	B./A.C.V.	Change in	at	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Indicator
fication	Description	n	Date	Name of Purchaser	Stock	Consideration	Par Value	Actual Cost	Value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	(a)
9999999 Tot	als					2,149,608	XXX	2,206,179	2,204,670	0	(38,077)	0	(38,077)	0	2,166,369	0	(17,491)	(17,491)	35,422	XXX	XXX

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

Schedule DB - Part A - Section 1

Schedule DB - Part B - Section 1

Schedule DB - Part D - Section 1

Schedule DB - Part D - Section 2

Schedule DL - Part 1

Schedule DL - Part 2

## SCHEDULE E - PART 1 - CASH Month End Depository Balances

	Mont	h End Dep	ository Balance	S				
1	2	3	4	5	Book E Month		9	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	During Current Q 7 Second Month	8	*
Open Depositories								-
BANK OF AMERICA PROVIDENCE RI					(379,494)	10 , 183 , 434	35,464,236	XXX
BANK OF TAMPA								XXX
0199998 Deposits in depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories	XXX	ХХХ						xxx
0199999 Total Open Depositories	ХХХ	ХХХ	133,626	0	(379,494)	10,183,434	35,472,934	
	ļ							
	+							
	+	<u> </u>						
	1							
	ļ							
								1
	ļ							
	+							
	1							
	ļ							
	+							
	1							"
	[							
		ļ						
	+							
	+							
	1							
	[							
	ļ							
	<b>.</b>							
	+	·····			+			-
	+							
	1							"
0399999 Total Cash on Deposit	ХХХ	ХХХ	133,626	0	(379,494)	10,183,434	35,472,934	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999 Total	XXX	XXX	133,626	0	(379,494)	10, 183, 434	35,472,934	

## **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

		Show Invest	tments Owne	d End of Currei	nt Quarter			
1	2	3	4	5	6	7	8	9
			Date	Rate of	Maturity	Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year
	nments – Issuer Obligations							
XXX								
Exempt Money Marke	t Mutual Funds – as Identified by SVO							
09248U-71-8	BLKRK LQ:T-FUND; INSTL		06/25/2018	1.800	XXX			
	FIDELITY GOVERNMENT INST MONEY MARKET		10/02/2017	1.500	XXX			
	t Money Market Mutual Funds – as Identified by SVO					10,526,882	0	25,824
All Other Money Ma	rket Mutual Funds							
09248U-64-3	BLACKROCK LIQUIDITY FUNDS TEMPC DREYFUS CASH MANAGEMENT FUND	+			XXX			
996085-25-4	I DREYFUS CASH MANAGEMENT FUND		03/02/2018		XXX		0	
8699999 - ATT UL	ther Money Market Mutual Funds		1 1			35,294,381	U	192,511
•••••								
					••••••			
•••••								
•••••								
		ļ						
8899999 Total C	Cash Equivalents					45,821,263	0	218,335