

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2019

OF THE CONDITION AND AFFAIRS OF THE Ascot Specialty Insurance Company 4908 NAIC Company Code \_\_\_\_\_\_ Employer's ID Number NAIC Group Code 4908 05-0420799 (Current) (Prior) Organized under the Laws of State of Domicile or Port of Entry Rhode Island RI United States of America **Country of Domicile** Incorporated/Organized 05/14/1974 Commenced Business 03/08/2019 Statutory Home Office 10 Jefferson Blvd Warwick, RI, US 02888 (Street and Number) (City or Town, State, Country and Zip Code) Main Administrative Office 55 W 46th Street (Street and Number) New York, NY, US 10036 646-356-8101 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) Mail Address 55 W 46th Street New York, NY, US 10036 (Street and Number or P.O. Box) (City or Town, State, Country and Zip Code) Primary Location of Books and Records 55 W 46th Street (Street and Number) New York, NY, US 10036 646-956-1574 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) Internet Website Address www.ascotoroup.com Statutory Statement Contact Stephen Grant Note 848-958-1574 (Name) (Area Code) (Telephone Number) 646-839-2775 steve.nolet@ascotgroup.com (E-mail Address) (FAX Number) **OFFICERS** President & Chief Executive Officer Gregory Wolynled Peter Michael Grayston Treasurer General Counsel and Sacretary **Chief Financial Officer** Joseph William Roberts Brian Jeffrey Green OTHER Emily Charlotte Gilde, Chief Risk Officer Stephen Grant Nolet, U.S. Controller **DIRECTORS OR TRUSTEES** John Robert Berger Joseph William Roberts Brian Jeffrey Green Susan Jane Sutherland **Gregory Wolyniec** State of

New York SS: County of New York

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

Gregory Wolyniec President & Chief Executive Office

RIA MEHANDRU

Qualified in Kings County Commission Expires 12/04/20 21

Stephen Grant Nolet

**US Controller** 

m

Brian Jeffrey Green General Counsel and Secretary

Yes [X] No []

Subscribed and sworn to before me this February 20\* 2020 day of

Notary Public, State of New York Reg. No. 01ME6368018

1. State the amendment number 2. Date filed 3. Number of pages attached

a. Is this an original filing?

b. If no,

	AS	SETS			
		4	Current Year	3	Prior Year 4
		1 Assets	2 Nonadmitted Assets	Net Admitted Assets	4 Net Admitted Assets
1.	Bonds (Schedule D)				
	Stocks (Schedule D):			,	
<b>_</b> .	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks				0
	Mortgage loans on real estate (Schedule B):				
	3.1 First liens	0	0	0	0
	3.2 Other than first liens				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				
	\$0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5.	Cash (\$5,830,030 , Schedule E - Part 1), cash equivalents				
5.	(\$1,643,187 , Schedule E - Part 2) and short-term				
	investments (\$0, Schedule DA)	7 473 217	0	7 473 217	6 484 843
6.	Contract loans (including \$				
0. 7.	Derivatives (Schedule DB)				0
	Other invested assets (Schedule BA)				
9.	Receivable for securities				
9. 10.	Securities lending reinvested collateral assets (Schedule DL)				
	Aggregate write-ins for invested assets				
	Subtotals, cash and invested assets (Lines 1 to 11)				
		01,709,041	0		
	Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
	Investment income due and accrued				
		471,934	0		
15.	Premiums and considerations:	0 105 005	01 155	2 104 170	0
	15.1 Uncollected premiums and agents' balances in the course of collection				0
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$0	00.075		00.075	
	earned but unbilled premiums)		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
	16.2 Funds held by or deposited with reinsured companies				0
	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				
	Net deferred tax asset				0
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				
	(\$0 )				0
22.	Net adjustment in assets and liabilities due to foreign exchange rates				0
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$0 ) and other amounts receivable				0
	Aggregate write-ins for other than invested assets				
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	0E 107 100	70 607	05 410 000	F1 000 004
27.	From Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts	0 85,487,469	0 73,607	0 85,413,862	0 51,938,601
20.	DETAILS OF WRITE-INS	50,107,00	10,007	30, 410,002	01,000,001
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
	Intangible Asset	50 000		0	0
	Profit Commission				
	Rhode Island premium tax recoverable		892		892
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page				
2598. 2599.			50,892		
∠ປສສ.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	00,790	30,092	37,090	692

ASSETS

# LIABILITIES, SURPLUS AND OTHER FUNDS

	LIABILITIES, SURFLUS AND UTTER FU		2
		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)	,,	0
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		0
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)		0
4.	Commissions payable, contingent commissions and other similar charges		0
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1			0
7.2	Net deferred tax liability		0
8.	Borrowed money \$0 and interest thereon \$0	0	0
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of		
	\$11, 180, 750 and including warranty reserves of \$0 and accrued accident and		
	health experience rating refunds including \$0 for medical loss ratio rebate per the Public Health		
	Service Act)	8,014,903	0
10.	Advance premium	0	0
11.	Dividends declared and unpaid:		
	11.1 Stockholders	0	0
	11.2 Policyholders	0	0
12.	Ceded reinsurance premiums payable (net of ceding commissions)		0
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
15.	Remittances and items not allocated		0
16.	Provision for reinsurance (including \$		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		0
18.	Drafts outstanding		0
19.	Payable to parent, subsidiaries and affiliates		
20.	Derivatives		
21.	Payable for securities		
22.	Payable for securities lending		
22.	Liability for amounts held under uninsured plans		0
23. 24.	Capital notes \$		0
24. 25.	Aggregate write-ins for liabilities	447,138	0
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
26.		21,292,404	
27.	Protected cell liabilities	-	
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds		0
30.			
31.	Preferred capital stock		0
32.	Aggregate write-ins for other than special surplus funds		0
33.	Surplus notes		0
34.	Gross paid in and contributed surplus		51,575,000
35.	Unassigned funds (surplus)	(12,686,088)	(307,480)
36.	Less treasury stock, at cost:		
	36.1	0	0
	36.20 shares preferred (value included in Line 31 \$	0	0
37.	Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	64,121,397	51,500,005
38.	TOTALS (Page 2, Line 28, Col. 3)	85,413,862	51,938,601
	DETAILS OF WRITE-INS		
2501.	Deferred Ceding Commission	447 , 138	0
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)	447,138	0
2901.			
2902.			
2903.		_	.0
	Summary of remaining write-ins for Line 29 from overflow page		
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0
2998. 2999.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)		0
2998. <u>2999.</u> 3201.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	
2998. 2999. 3201. 3202.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	
2998. 2999. 3201. 3202. 3203.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	
2998. <u>2999.</u> 3201. 3202.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	

# STATEMENT OF INCOME

		1 Current Year	2 Prior Year
	UNDERWRITING INCOME	Current Year	Prior Year
1.	Premiums earned (Part 1, Line 35, Column 4)	3, 122, 313	0
	DEDUCTIONS:	4 000 407	
2. 3.	Losses incurred (Part 2, Line 35, Column 7) Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		0 .0
4.			
5.	Aggregate write-ins for underwriting deductions		0
6.	Total underwriting deductions (Lines 2 through 5)	16,965,105	490,343
7.	Net income of protected cells		0
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7)	(13,842,793)	(490,343)
9.	INVESTMENT INCOME Net investment income earned (Exhibit of Net Investment Income, Line 17)	1 999 012	
9. 10.	Net realized capital gains or (losses) less capital gains tax of \$	1,000,013	
	Gains (Losses) )	169,861	0
11.	Net investment gain (loss) (Lines 9 + 10)	2,057,874	
	OTHER INCOME		
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered		
10	\$0 amount charged off \$0 )0		
13. 14.	Finance and service charges not included in premiums	(18,598)	0 0
15.	Total other income (Lines 12 through 14)	(18,598)	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. 18.	Dividends to policyholders	0	0
10.	(Line 16 minus Line 17)	(11,803,517)	(380,775)
19.	Federal and foreign income taxes incurred	. 0	0
20.	Net income (Line 18 minus Line 19)(to Line 22)	(11,803,517)	(380,775)
		54 500 005	4 005 400
21. 22.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) 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		
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. 29.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		0
29. 30.	Change in surplus notes Surplus (contributed to) withdrawn from protected cells		0
31.	Cumulative effect of changes in accounting principles		
32.	Capital changes:		
	32.1 Paid in	0	0
	32.2 Transferred from surplus (Stock Dividend)		0
22	32.3 Transferred to surplus	0	0
33.	Surplus adjustments: 33.1 Paid in	25 000 000	50 050 000
	33.2 Transferred to capital (Stock Dividend)		
	33.3 Transferred from capital		0
34.	Net remittances from or (to) Home Office	0	0
35.	Dividends to stockholders		0
36. 27	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)	0 0	0
37. 38.	Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders for the year (Lines 22 through 37)	12,621,392	49,604,573
39.	Surplus as regards policyholders, December 31 current year (Lines 22 through 37)	64,121,397	51,500,005
- * -	DETAILS OF WRITE-INS		
0501.			
0502.			
0503.			
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0
0599. 1401.	Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above) Currency translation	0	0
1401.		(10,390)	
1403.			
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	(18,598)	0
3701.			
3702.			
3703. 3798.	Summary of remaining write-ins for Line 37 from overflow page		
3798. 3799.	Summary of remaining write-ins for Line 37 from overflow page Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above)	0	0 0
		0	U

## **CASH FLOW**

		1	2
		Current Year	Prior Year
	Cash from Operations Premiums collected net of reinsurance	15 005 001	0
1.		, ,	0
2.	Net investment income		(285,206)
3.	Miscellaneous income		(005,000)
4.	Total (Lines 1 through 3)		(285,206)
5.	Benefit and loss related payments		
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0
7.	Commissions, expenses paid and aggregate write-ins for deductions		
8.	Dividends paid to policyholders		0
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)		0
10.	Total (Lines 5 through 9)		334,593
11.	Net cash from operations (Line 4 minus Line 10)		(619,799)
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		0
	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
	12.7 Miscellaneous proceeds		0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		0
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds		45,014,415
	13.2 Stocks	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	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)		45,014,415
14.	Net increase (decrease) in contract loans and premium notes		0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(28,902,278)	(45,014,415
	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		
	16.3 Borrowed funds	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)		142,435
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		50, 192, 435
		, , ,	
	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)	988,374	4,558,220
19.	Cash, cash equivalents and short-term investments:		,,-
	19.1 Beginning of year		
	19.2 End of period (Line 18 plus Line 19.1)	7,473,217	6,484,843
		.,,=11	
Note: S	upplemental disclosures of cash flow information for non-cash transactions:		

# UNDERWRITING AND INVESTMENT EXHIBIT

	PART 1 - I	PREMIUMS EARNED 1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1.	Fire				
2.	Allied lines				
3.	Farmowners multiple peril				
4.	Homeowners multiple peril				
5.	Commercial multiple peril				
6.	Mortgage guaranty				
8.	Ocean marine				
9.	Inland marine				
10.	Financial guaranty				
11.1	Medical professional liability - occurrence				
11.2	Medical professional liability - claims-made				
12.	Earthquake				
13.	Group accident and health				
13.	Credit accident and health (group and individual)				
	Other accident and health				
15.	Workers' compensation				
16.	Other liability - occurrence				
17.1	Other liability - occurrence				
17.2					
17.3	Excess workers' compensation				
18.1	Products liability - occurrence				
18.2	Products liability - claims-made				0
	Private passenger auto liability				0
19.3, 19.4	Commercial auto liability	0	0	0	0
21.	Auto physical damage			0	0
22.	Aircraft (all perils)			0	0
23.	Fidelity			0	0
24.	Surety			0	0
26.	Burglary and theft			0	0
27.	Boiler and machinery	0	0	0	0
28.	Credit		0	8,520	
29.	International	0	0	0	0
30.	Warranty	0	0	0	0
31.	Reinsurance - nonproportional assumed property	0	0	0	0
32.	Reinsurance - nonproportional assumed liability	0	0	0	0
33.	Reinsurance - nonproportional assumed financial lines	0	0	0	0
34.	Aggregate write-ins for other lines of business	0	0	0	0
35.	TOTALS	11,137,216	0	8,014,903	3,122,313
	DETAILS OF WRITE-INS				
3401.					
3402.					
3403.					
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0

# UNDERWRITING AND INVESTMENT EXHIBIT

		1	2	3	4 Decementario Dete	5
	Line of Business	Amount Unearned (Running One Year or Less from Date of Policy) (a)	Amount Unearned (Running More Than One Year from Date of Policy) (a)	Earned But Unbilled Premium	Reserve for Rate Credits and Retrospective Adjustments Based on Experience	Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1.	Fire		0	0	0	
2.	Allied lines				0	C
3.	Farmowners multiple peril				0	c
4.	Homeowners multiple peril					
5.	Commercial multiple peril				0	
6.	Mortgage guaranty				0	
8.	Ocean marine					
9.	Inland marine			0	0	
10.	Financial guaranty					
11.1	Medical professional liability - occurrence				0	
11.2	Medical professional liability - claims-made					
12.	Earthquake					
13.	Group accident and health				0	
13.	Credit accident and health (group and					
17.	individual)				0	c
15.	Other accident and health				0	C
16.	Workers' compensation					c
17.1	Other liability - occurrence		148,744	0	0	
17.2	Other liability - claims-made		1,884,737	0	0	
17.3	Excess workers' compensation					C
18.1	Products liability - occurrence	0	0	0		
18.2	Products liability - claims-made				0	C
19.1, 19.2	Private passenger auto liability				0	
19.3, 19.4	Commercial auto liability				0	c
21.	Auto physical damage				0	C
22.	Aircraft (all perils)					
23.	Fidelity					
24.	Surety					
26.	Burglary and theft				0	C
27.	Boiler and machinery			0		
28.	Credit		0	0	0	8.520
29.	International	,	0	0	0	
29. 30.	Warranty		0	0	0	
30. 31.	Reinsurance - nonproportional assumed property			0		
32.	Reinsurance - nonproportional assumed				0	
33.	Reinsurance - nonproportional assumed financial lines	_	0	0	0	0
34.	Aggregate write-ins for other lines of business	0	0	0	0	C
35.	TOTALS	5,981,422	2,033,481	0	0	8,014,903
36.	Accrued retrospective premiums based on expe		•	-	-	,,000
37.	Earned but unbilled premiums					
38.	Balance (Sum of Line 35 through 37)					8,014,903
00.	DETAILS OF WRITE-INS					
3401.						
3401.						
3403. 3498.	Summary of remaining write-ins for Line 34	0	0	n		ſ
3499.	from overflow page Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	

(a) State here basis of computation used in each case Pro rata

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Ascot Specialty Insurance Company UNDERWRITING AND INVESTMENT EXHIBIT

## PART 1B - PREMIUMS WRITTEN

<b></b>			RT 1B - PREMIUN			0.1.1	
		1	Reinsurand 2	e Assumed 3	Reinsurar 4	ice Ceded 5	6 Net Premiums
	Line of Business	Direct Business (a)	From Affiliates	From Non-Affiliates	To Affiliates	To Non-Affiliates	Written Cols. 1+2+3-4-5
1.	Fire		0	0	0	0	
2.	Allied lines		0		0	0	
3.	Farmowners multiple peril					0	0
4.	Homeowners multiple peril					0	0
	Commercial multiple peril						
5.							
6.	Mortgage guaranty					0	
8.	Ocean marine					,	
9.	Inland marine		0				1,816,330
10.	Financial guaranty	0 .	0	0	0	0	0
11.1	Medical professional liability - occurrence	0	0	0	0	0	0
11.2	Medical professional liability - claims-made					0	0
12.	Earthquake					0	0
13.	Group accident and health	0	0	0	0	0	0
14.	Credit accident and health (group and individual)	0	0	0	0	0	0
15.	Other accident and health	0	0	0	0	0	0
16.	Workers' compensation	0	0	0	0	0	0
17.1	Other liability - occurrence	4,225,726	0	0	0	3,340,879	
17.2	Other liability - claims-made	17,292,671	0	0	0	9,940,225	7,352,446
17.3	Excess workers' compensation	0	0	0	0	0	0
18.1	Products liability - occurrence	0	0	0	0	0	0
18.2	Products liability - claims-made	0	0	0	0	0	0
19.1, 19.2	Private passenger auto liability	0	0			0	0
19.3, 19.4	Commercial auto liability				0	0	0
21.	Auto physical damage					0	0
22.	Aircraft (all perils)					0	0
23.	Fidelity		0	0	0	0	0
24.	Surety		0	0	0	0	0
26.	Burglary and theft		0	0	0	0	0
27.	Boiler and machinery		0	0	0	0	0
28.	Credit		0	0	0	41.108	17.617
20.	International		0	0	0	0	
29. 30.	Warranty		0	0	0	0	0 ^
30. 31.	Reinsurance - nonproportional assumed property			0	0	0	0 ^
32.	Reinsurance - nonproportional assumed liability			0	0	0	0
33.	Reinsurance - nonproportional						0
34.	assumed financial lines Aggregate write-ins for other lines of		0	0	0	0	0
25	business	0	0	0	0	16 674 179	0
35.	TOTALS	27,811,389	0	0	0	16,674,173	11,137,216
<b>a</b> 1= 1	DETAILS OF WRITE-INS						
3401.							
3402.							
3403.							
3498.		0 .	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [ ] No [ X ]

If yes: 1. The amount of such installment premiums \$ .....0

2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$ .....0

## UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

		Losses Paid Less Salvage		5 6		7	8		
		1	2	3	4				Percentage of Losses Incurred
	Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 -3 )	Net Losses Unpaid Current Year (Part 2A , Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	(Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire	0	0	0	0		0		
2.	Allied lines	0	0	0	0	0	0	0	0.0
3.	Farmowners multiple peril	0	0	0	0	0	0	0	0.0
4.	Homeowners multiple peril	0	0	0	0	0	0	0	0.0
5.	Commercial multiple peril	0	0	0	0		0		
6.	Mortgage guaranty	0	0	0	0	0	0	0	0.0
8.	Ocean marine	0	0	0	0		0		
9.	Inland marine	0	0	0	0		0		
10.	Financial guaranty	0	0	0	0	0	0	0	0.0
	Medical professional liability - occurrence	0	0	0	0	0	0	0	0.0
11.2	Medical professional liability - claims-made	0	0	0	0	0	0	0	0.0
12.	Earthquake	0	0	0	0	0	0	0	0.0
13.	Group accident and health	0	0	0	0	0	0	0	0.0
14.	Credit accident and health (group and individual)	0	0	0	0	0	0	0	0.0
15.	Other accident and health	0	0	0	0	0	0	0	0.0
16.	Workers' compensation	0	0	0	0	0	0	0	0.0
	Other liability - occurrence	0	0	0	0		0		
17.2	Other liability - claims-made	0	0	0	0		0		
17.3	Excess workers' compensation	0	0	0	0	0	0	0	0.0
18.1	Products liability - occurrence	0	0	0	0	0	0	0	0.0
18.2	Products liability - claims-made	0	0	0	0	0	0	0	0.0
19.1, 19.2	Private passenger auto liability	0	0	0	0	0	0	0	0.0
19.3, 19.4	Commercial auto liability	0	0	0	0	0	0	0	0.0
21.	Auto physical damage	0	0	0	0	0	0	0	0.0
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0.0
23.	Fidelity	0	0	0	0	0	0	0	0.0
24.	Surety	0	0	0	0	0	0	0	0.0
26.	Burglary and theft	0	0	0	0	0	0	0	0.0
27.	Boiler and machinery	0	0	0	0	0	0	0	0.0
28.	Credit	0	0	0	0	5,048	0		
29.	International	0	0	0	0	0	0	0	0.0
30.	Warranty	0	0	0	0	0	0	0	0.0
31.	Reinsurance - nonproportional assumed property		0	0	0	0	0	0	0.0
32.	Reinsurance - nonproportional assumed liability		0	0	0	0	0	0	0.0
33.	Reinsurance - nonproportional assumed financial lines	XXX	0	0	0	0	0	0	0.0
34.	Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0.0
35.	TOTALS	0	0	0	0	1,332,467	0	1,332,467	42.7
	DETAILS OF WRITE-INS								
3401.									
3402.									
3403.									
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0.0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0.0

## UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

				d Losses	ADJUSTMENT EXPEN	lr	ncurred But Not Reported	1	8	9
		1	2	3	4	5	6	7		
	Line of Business	Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire	0	0	0			0	0		
2.	Allied lines	0	0	0	0	0	0	0	0	0
3.	Farmowners multiple peril	0	0	0		0	0	0	0	0
4.	Homeowners multiple peril	0	0	0	0	0	0	0	0	0
5.	Commercial multiple peril	0	0	0	0		0			
6.	Mortgage guaranty	0	0	0	0	0	0	0	0	0
8.	Ocean marine	0	0	0	0		0			
9.	Inland marine	0	0	0	0		0			
10.	Financial guaranty	0	0	0	0	0	0	0	0	0
11.1	Medical professional liability - occurrence	0	0	0	0	0	0	0	0	0
11.2	Medical professional liability - claims-made	0	0	0	0	0	0	0	0	0
12.	Earthquake	0	0	0	0	0	0	0	0	0
13.	Group accident and health	0	0	0	0	0	0	0	(a)0	0
14.	Credit accident and health (group and individual)	0	0	0	0	0	0	0	0	0
15.	Other accident and health	0	0	0	0	0	0	0	(a)0	0
16.	Workers' compensation	0	0	0	0	0	0	0	0	0
17.1	Other liability - occurrence	0	0	0	0	1,000,843	0			
17.2	Other liability - claims-made	0	0	0	0	2,009,275	0			
17.3	Excess workers' compensation	0	0	0		0	0	0	0	0
18.1	Products liability - occurrence	0	0	0	0	0	0	0	0	0
18.2	Products liability - claims-made	0	0	0	0	0	0	0	0	0
19.1, 19.2	Private passenger auto liability	0	0	0		0	0	0	0	0
19.3, 19.4		0	0	0	0	0	0	0	0	0
21.	Auto physical damage	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)	0	0	0		0	0	0	0	0
23.	Fidelity	0	0	0	0	0	0	0	0	0
24.	Surety	0	0	0	0	0	0	0	0	0
26.	Burglary and theft	0	0	0	0	0		0	0	0
27.	Boiler and machinery	0	0	0	0	0	0	0	0	0
28.	Credit	0	0	0	0					
29.	International	0	0	0	0	0	0	0	0	0
30.	Warranty	0	0	0	0	0	0	0	0	0
31.	Reinsurance - nonproportional assumed property		0	0	0	XXX		0	0	0
32.	Reinsurance - nonproportional assumed liability	XXX	0	0	0	XXX		0	0	0
33.	Reinsurance - nonproportional assumed financial lines			0	0	XXX	0	0	0	0
34.	Aggregate write-ins for other lines of business	. 0	0	0	0	0	0	0	0	0
35.	TOTALS	0	0	0	0	3,882,756	0	2,550,289	1,332,467	706,583
	DETAILS OF WRITE-INS									·
3401.										
3402.										
3403.										
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0
) Including §		1	1		- I		ı – I		· · · ·	

(a) Including \$ .....0 for present value of life indemnity claims.

## UNDERWRITING AND INVESTMENT EXHIBIT

		1	2	3	4
		Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1.	Claim adjustment services:				
	1.1 Direct	1,792,139	0	0	1,792,13
	1.2 Reinsurance assumed	0	0	0	
	1.3 Reinsurance ceded	713,649	0	0	713,64
	1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	1,078,490	0	0	1,078,49
2.	Commission and brokerage:				
	2.1 Direct excluding contingent	0	4,526,727	0	4 , 526 , 72
	2.2 Reinsurance assumed, excluding contingent	0	0	0	
	2.3 Reinsurance ceded, excluding contingent	0	4,371,936	0	4,371,93
	2.4 Contingent - direct	0	0	0	
	2.5 Contingent - reinsurance assumed				
	2.6 Contingent - reinsurance ceded				
	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			116 89
3.	Allowances to managers and agents		,		
4.	Advertising				256,03
 5.	Boards, bureaus and associations				
-	Surveys and underwriting reports		,		,
6. 7	Audit of assureds' records				
7.		0			
8.	Salary and related items:	•	0 007 050	0	0 007 05
		0		0	
	8.2 Payroll taxes				
9.	Employee relations and welfare			0	
10.	Insurance		· ·	0	
11.	Directors' fees				
12.		0			408,91
13.	Rent and rent items				
14.	Equipment			0	
15.	Cost or depreciation of EDP equipment and software			0	
16.	Printing and stationery	0		0	
17.	Postage, telephone and telegraph, exchange and express	0		0	
18.	Legal and auditing	0	242,338	0	242,33
19.	Totals (Lines 3 to 18)	0		0	
20.	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty association				
	credits of \$0	0		0	2,43
	20.2 Insurance department licenses and fees	0		0	
	20.3 Gross guaranty association assessments	0	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	0	
22.	Real estate taxes		0	0	
23.	Reimbursements by uninsured plans				
24.	Aggregate write-ins for miscellaneous expenses				
25.	Total expenses incurred				
25. 26.	Less unpaid expenses - current year				
	Add unpaid expenses - prior year				
27.					
28.	Amounts receivable relating to uninsured plans, prior year				
29.	Amounts receivable relating to uninsured plans, current year		0	0	
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	371,907	14,441,775	0	14,813,68
	DETAILS OF WRITE-INS				
401.	•				<u>8</u> ,86
402.	Miscellaneous				
2403.					
498.	Summary of remaining write-ins for Line 24 from overflow page	0		0	
499.	Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above)	0	936,794	76,143	1,012,93

## ANNUAL STATEMENT FOR THE YEAR 2019 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)	(a)1,694,550	1,838,082
1.3	Bonds of affiliates	(a)0	0
2.1	Preferred stocks (unaffiliated)	(b)0	0
2.11	Preferred stocks of affiliates		0
2.2	Common stocks (unaffiliated)		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)160,837	
7	Derivative instruments	(f)0	0
8.	Other invested assets	0	0
9.	Aggregate write-ins for investment income	0	0
10.	Total gross investment income	1,855,387	
11.	Investment expenses		(g)76,143
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)0
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		0
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		1,888,013
	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
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

(a) Includes \$		accrual of discount less \$52,777	amortization of premium and less \$172,785	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 \$		accrual of discount less \$0	amortization of premium and less \$5,659	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						-
		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				0411 (2033)	
1.1	Bonds exempt from U.S. tax		0	0	0	0
1.1	Other berge (we offiliate d)	160 454	0		0	0
	Other bonds (unaffiliated)	109,404	0	109,404	0	0
1.3	Bonds of affiliates		0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0	0	0
5.	Contract loans		0	0	0	0
6.	Cash, cash equivalents and short-term investments		0		0	0
7.	Derivative instruments		0	0	0	0
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	169.861	0	169.861	0	0
10.	DETAILS OF WRITE-INS	100,001	,	100,001		
0901.	DETAILS OF WRITE-INS					
0901.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from	_	•	•	^	_
	overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9,	0	0	0	•	0
	above)	0	0	0	0	0

### ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Ascot Specialty Insurance Company EXHIBIT OF NON-ADMITTED ASSETS

	EXHIBIT OF NON-ADMITTE	DASSEIS	2	3
		1		Change in Total
		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
	Stocks (Schedule D):			
۷.	2.1 Preferred stocks	0	0	0
	2.2 Common stocks	_	0	
3.	Mortgage loans on real estate (Schedule B):			
0.	3.1 First liens	0	0	0
	3.2 Other than first liens			0
4.	Real estate (Schedule A):			
ч.	4.1 Properties occupied by the company	0	0	0
	4.2 Properties held for the production of income		0	0
	4.3 Properties held for sale		0	
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments			
0.	(Schedule DA)	0	0	0
6.	Contract loans	0	0	0
7.	Derivatives (Schedule DB)	0	0	0
8.	Other invested assets (Schedule BA)	0	0	0
9.	Receivables for securities	0	0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11.	Aggregate write-ins for invested assets	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13.	Title plants (for Title insurers only)	0	0	0
14.	Investment income due and accrued	0	0	0
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection		0	(21, 155)
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due		0	
	15.3 Accrued retrospective premiums and contracts subject to redetermination	0	0	0
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers	0	0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0
	16.3 Other amounts receivable under reinsurance contracts	0	0	0
17.	Amounts receivable relating to uninsured plans	0		
	Current federal and foreign income tax recoverable and interest thereon		0	(1,560)
	Net deferred tax asset		0	0
19.	Guaranty funds receivable or on deposit			0
20.	Electronic data processing equipment and software	0	0	0
21.	Furniture and equipment, including health care delivery assets		0	
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			0
24.	Health care and other amounts receivable			
25.	Aggregate write-ins for other than invested assets			
26.	Total assets excluding Separate Accounts. Segregated Accounts and Protected Cell Accounts			
	(Lines 12 to 25)			(23,607)
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28.	Total (Lines 26 and 27)	73,607	50,000	(23,607)
	DETAILS OF WRITE-INS			
1101.				
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501.	Intangible Asset			0
2502.	Rhode Island premium tax recoverable		0	(892)
2503.				
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	50,892	50,000	(892)

### 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.

	55AD #	F/S Page	F/S Line #	2010	2018
NET INCOME (1) State basis (Page 4, Line 20, Columns 1 & 2)	<u>SSAP #</u>	XXX	XXX	\$ 2019 (11,803,517)	\$ 2018 (380,775)
(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)	XXX	xxx	XXX	\$ (11,803,517)	\$ (380,775)
SURPLUS (5) State basis (Page 3, Line 37, Columns 1 & 2)	xxx	xxx	xxx	\$ 64,121,397	\$ 51,500,005
(6) State Prescribed Practices that are an increase/(decrease)	from NAIC SA	NP:			
(7) State Permitted Practices that are an increase/(decrease) fr	om NAIC SAF	D:			
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 64,121,397	\$ 51,500,005

### 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

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 an investment in subsidiary.

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 that 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 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 Insurance Company to Ascot Insurance Company.

- B. Statutory Merger
- There were no statutory mergers during the period ended December 31, 2019.
- C. Impairment Loss

The Company has no impairment loss relating to business combinations or goodwill.

### NOTE 4 Discontinued Operations

A. Discontinued Operation Disposed of or Classified as Held for Sale The Company did not have any discontinued operations during the statement period.

### 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 and/or Securities Lending Transactions 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.

# 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

### 1. Restricted Assets (Including Pledged)

					Gr	oss (Admitt	ed 8	& Nonadmitt	ed)	Restricted				
					Cu	rrent Year						6		7
		1		2		3		4		5				
Restricted Asset Category		al General Account (G/A)	F Ce	G/A upporting Protected ell Account Activity (a)	Ce R	Total Protected II Account Restricted Assets	Ce S	Protected ell Account Assets upporting /A Activity (b)	(	Total 1 plus 3)	F	Total From Prior Year	(De	ncrease/ ecrease) (5 ninus 6)
a. Subject to contractual obligation for which														
liability is not shown	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
<ul> <li>b. Collateral held under security lending</li> </ul>														
agreements	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
c. Subject to repurchase agreements	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
d. Subject to reverse repurchase agreements	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
e. Subject to dollar repurchase agreements f. Subject to dollar reverse repurchase	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
agreements	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
g. Placed under option contracts	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
i. FHLB capital stock	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
j. On deposit with states	\$	300.000	\$	-	\$	-	\$	-	\$	300,000	\$	-	\$	300,000
k. On deposit with other regulatory bodies	\$		\$	-	\$	-	\$	-	\$		\$	-	\$	
I. Pledged collateral to FHLB (including assets	Ť		-				Ŧ		Ŧ		Ť		-	
backing funding agreements) m. Pledged as collateral not captured in other	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
categories	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
n. Other restricted assets	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
o. Total Restricted Assets	\$	300.000	ŝ	_	\$	_	ŝ	_	\$	300.000	\$	-	ŝ	300,000

(b) Subset of Column 3

	Current Year								
		8	8 9 Percentage						
					10	11			
		Total Non- admitted	-	Total Admitted Restricted	Gross (Admitted & Non- admitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets			
Restricted Asset Category	F	estricted	(5	5 minus 8)	(C)	(d)			
a. Subject to contractual obligation for which liability is not shown	\$	-	\$	-	0.000%	0.000%			
b. Collateral held under security lending agreements	\$	-	\$	-	0.000%	0.000%			
c. Subject to repurchase agreements	\$	-	\$	-	0.000%	0.000%			
d. Subject to reverse repurchase agreements	\$	-	\$	-	0.000%	0.000%			
e. Subject to dollar repurchase agreements f. Subject to dollar reverse repurchase	\$	-	\$	-	0.000%	0.000%			
agreements	\$	-	\$	-	0.000%	0.000%			
g. Placed under option contracts	\$	-	\$	-	0.000%	0.000%			
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$	-	\$	-	0.000%	0.000%			
i. FHLB capital stock	\$	-	\$	-	0.000%	0.000%			
j. On deposit with states	\$	-	\$	300,000	0.351%	0.351%			
k. On deposit with other regulatory bodies	\$	-	\$	-	0.000%	0.000%			
I. Pledged collateral to FHLB (including assets backing funding agreements) m. Pledged as collateral not captured in other	\$	-	\$	-	0.000%	0.000%			
categories	\$	-	\$	-	0.000%	0.000%			
n. Other restricted assets	\$	-	\$	-	0.000%	0.000%			
o. Total Restricted Assets	\$	-	\$	300,000	0.351%	0.351%			

(c) Column 5 divided by Asset Page, Column 1, Line 28 (d) Column 9 divided by Asset Page, Column 3, Line 28

- 2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)
  - Not Applicable
- 3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate) Not Applicable
- 4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements Not Applicable

#### Working Capital Finance Investments Μ.

The Company does not have any working capital finance investments.

Offsetting and Netting of Assets and Liabilities N.

The Company does not have any offsetting and netting of assets and liabilities.

#### 5GI Securities О.

The Company does not have any investments subject to this disclosure.

#### Ρ. Short Sales

The Company does not have short sales.

### Q. 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.

В. 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

The Company does not have any non-admitted assets related to investment income due and accrued that is over 90 days past due. Α.

The Company does not have any non-admitted assets related to investment income due or accrued amounts. В.

### NOTE 8 Derivative Instruments

- Derivatives under SSAP No. 86-Derivatives Α.
- 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	End of Current	Period		12/31/2018		Change					
	(1)	(2)	(3) (Col. 1 + 2)	(4)	(5)	(6) (Col. 4 + 5)	(7) (Col. 1 - 4)	(8) (Col. 2 - 5)	(9) (Col. 7 + 8)			
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total			
(a) Gross Deferred Tax Assets	\$ 2,622,836	\$ -	\$ 2,622,836	\$ 98,133	\$ 47,017	\$ 145,150	\$ 2,524,703	\$ (47,017)	\$ 2,477,686			
(b) Statutory Valuation Allowance Adjustment	\$ 2,573,353	\$ -	\$ 2,573,353	\$ 94,615	\$ 47,017	\$ 141,632	\$ 2,478,738	\$ (47,017)	\$ 2,431,721			
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 49,483	s -	\$ 49,483	\$ 3,518	\$ -	\$ 3,518	\$ 45,965	s -	\$ 45,965			
(d) Deferred Tax Assets Nonadmitted	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	s -	\$ -			
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 49,483	\$-	\$ 49,483	\$ 3,518	\$-	\$ 3,518	\$ 45,965	\$-	\$ 45,965			
(f) Deferred Tax Liabilities	\$ 49,483	\$ 452,636	\$ 502,119	\$ 3,518	\$-	\$ 3,518	\$ 45,966	\$ 452,636	\$ 498,602			
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)		\$ (452.636)	\$ (452,636)					\$ (452,636)	\$ (452.637)			

2.

	As of	End of Current	Period		12/31/2018			Change	
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$ -	\$-
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	\$-	xxx	xxx	\$ 7,725,001	xxx	ххх	\$ (7,725,001)
(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	\$ (3,518)	\$-	\$ (3,518)

3.

	 2019	 2018
a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	996.635%	28380.288%
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And		
Threshold Limitation In 2(b)2 Above.	\$ 64,121,397	\$ 51,500,005

4.

	A	s of End of (	Currer	nt Period		12/31	/2018	3		Cha	nge	
		(1)		(2)		(3)		(4)	(5) (Col. 1 - 3)			(6) Col. 2 - 4)
		Ordinary		Capital	(	Ordinary		Capital		Ordinary		Capital
Impact of Tax Planning Strategies:												
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.												
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$	49,483	\$	-	\$	3,518	\$	-	\$	45,965	\$	-
<ol> <li>Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies</li> </ol>		0.000%		0.000%		0.000%		0.000%		0.000%		0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$	49,483	\$	-	\$	3,518	\$	-	\$	45,965	\$	-
<ol> <li>Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies</li> </ol>		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?

Deferred Tax Liabilities Not Recongnized Not applicable

В.

Yes [ ] No [X]

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

1. Current Income Tax			(1) As of End of urrent Period		(2) 12/31/2018		(3) (Col. 1 - 2) Change
(a) Federal		\$		\$		\$	
(b) Foreign		\$	-	\$	-	\$	_
(c) Subtotal		\$	-	\$	-	\$	_
(d) Federal income tax on net capital	nains	\$	-	\$	-	\$	_
(e) Utilization of capital loss carry-forv	-	\$	_	\$	_	\$	_
(f) Other		\$	_	\$	_	\$	_
(g) Federal and foreign income taxes	incurred	\$	_	\$	_	\$	-
		Ŷ		Ů		Ŷ	
2. Deferred Tax Assets:							
(a) Ordinary:				•		_	
(1) Discounting of unpaid losses		\$	45,525	\$	-	\$	45,525
(2) Unearned premium reserve		\$	336,626	\$	-	\$	336,626
(3) Policyholder reserves		\$	-	\$	-	\$	-
(4) Investments		\$	-	\$	-	\$	-
(5) Deferred acquisition costs		\$	-	\$	-	\$	-
(6) Policyholder dividends accrua	al	\$	-	\$	-	\$	-
(7) Fixed Assets		\$	-	\$	-	\$	-
(8) Compensation and benefits a	ccrual	\$	-	\$	-	\$	-
(9) Pension accrual		\$	-	\$	-	\$	-
(10) Receivables - nonadmitted		\$	-	\$	-	\$	-
(11) Net operating loss carry-form	ard	\$	2,202,570	\$	91,518	\$	2,111,052
(12) Tax credit carry-forward		\$	-	\$	-	\$	-
(13) Other (including items <5%	of total ordinary tax assets)	\$	38,115	\$	6,615	\$	31,500
(99) Subtotal		\$	2,622,836	\$	98,133	\$	2,524,703
(b) Statutory valuation allowance adju	stment	\$	2,573,353	\$	94,615	\$	2,478,738
(c) Nonadmitted		\$	-	\$	-	\$	-
(d) Admitted ordinary deferred tax ass	sets (2a99 - 2b - 2c)	\$	49,483	\$	3,518	\$	45,965
(e) Capital:							
(1) Investments		\$	-	\$	-	\$	-
(2) Net capital loss carry-forward		\$	-	\$	47,017	\$	(47,017)
(3) Real estate		\$	-	\$	-	\$	-
(4) Other (including items <5% c	f total ordinary tax assets)	\$	-	\$	-	\$	-
(99) Subtotal		\$	-	\$	47,017	\$	(47,017)
(f) Statutory valuation allowance adjust	stment	\$	-	\$	47,017	\$	(47,017)
(g) Nonadmitted		\$	-	\$	-	\$	-
(h) Admitted capital deferred tax asse	ts (2e99 - 2f - 2g)	\$	-	\$	-	\$	-
(i) Admitted deferred tax assets (2d +	2h)	\$	49,483	\$	3,518	\$	45,965
3. Deferred Tax Liabilities:							
(a) Ordinary:							
(1) Investments		\$	49,483	\$	3,518	\$	45,965
(2) Fixed Assets		\$	-	\$	-	\$	-
(3) Deferred and uncollected pre	mium	\$	-	\$	-	\$	-
(4) Policyholder reserves		\$	-	\$	-	\$	-
(5) Other (including items <5% c	f total ordinary tax liabilities)	\$	-	\$	-	\$	-
(99) Subtotal		\$	49,483	\$	3,518	\$	45,965
(b) Capital:							
(1) Investments		\$	-	\$	-	\$	-
(2) Real estate		\$	-	\$	-	\$	-
(3) Other (including items <5% of	f total capital tax liabilities)	\$	452,636	\$	-	\$	452,636
(99) Subtotal		\$	452,636	\$	-	\$	452,636
(c) Deferred tax liabilities (3a99 + 3b9	9)	\$	502,119	\$	3,518	\$	498,601
4. Net deferred tax assets/liabilities (2i - 3	-	\$	(452,636)	\$	1	\$	(452,636)

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 Income Before Taxes (including all realized capital gains / (losses)) Tax-Exempt Interest Dividends Received Deduction Proration - Non-life Companies Proration - Life Companies IMR Amortization Meals & Entertainment, Lobbying Expenses, Etc. Statutory Valuation Allowance Adjustment Foreign tax rate differential	*****	Amount (11,803,517) - - - - - - - - - - - - - - - - - - -		tatutory Rate 21% Tax Effect (2,478,739) - - - - - 2,478,739	Effective Tax rate 21.00% 0.00% 0.00% 0.00% 0.00% 0.00% 21.00% 0.00%
Restriction of NOL Utilization	\$	-	\$	-	0.00%
Non-Admitted Assets	\$	-	\$	-	0.00%
Other, Including Prior Year True-Up	\$	-	\$	-	0.00%
Total	\$		\$		0.00%
Federal income taxed incurred [expense/(benefit)] Change in net deferred income tax [charge/(benefit)] Total statutory income taxes			\$ \$ \$		0.00% 0.00% 0.00%

Carryforwards, recoverable taxes, and IRC §6603 deposits:	
At December 31, 2019, the Company had net operating loss carryforwards expiring through the year 2038 of:	\$10,488,429
At December 31, 2019, the Company had capital loss carryforwards expiring through the year 2021 of:	\$223,919
At December 31, 2019, the Company had an AMT credit carryforwards, which does not expire, in the amount of:	\$0
Income taxes, ordinary and capital, available for recoupment in the event of	future losses include:

Ordinary		Capital	Total	
\$	-	\$-	\$	-
\$	-	\$-	\$	-
\$	-	\$-	\$	-
\$	-	\$-	\$	-

There were no deposits admitted under IRC § 6603.

F The Company's Federal income tax return is consolidated with the following entities:

Ascot Insurance Company Ascot Specialty Insurance Company Ascot US Holding Corporation Ethos Specialty Insurance Services LLC Ascot US Services Company LLC Ascot Holding Company LLC Ascot Underwriting Inc.

Year 2016 2017 2018 Total

E.

The method of allocation among companies is subject to a written tax allocation agreement, which generally allocates consolidated federal income tax liabilities using a separate return method with benefit for net operating losses and other tax attributes as they are used in the consolidated tax return.

- 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. G.
- Repatriation Transition Tax (RTT) Н. The company does not have any repatriation transition tax.
- Alternative Minimum Tax (AMT) Credit I. The Company does not have an alternative minimum tax credit.

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

The Company is a wholly-owned subsidiary of Ascot Insurance Company (Parent), a Colorado corporation and insurance company. Parent is owned by Ascot Holding Company LLC (previously Greyhawk Holding Company LLC), a Delaware corporation.

Β. Detail of Transactions Greater than 1/2% of Admitted Assets

Transactions between the Company and its affiliates are listed on Schedule Y Part 2.

The Company received a capital contribution of \$15M on April 25, 2019 and \$10M on December 18, 2019 from its parent Ascot Insurance Company. The Company received a capital contribution of \$50M on December 7, 2018 from its parent Ascot Insurance Company.

#### C. Change in Terms of Inter-company Arrangements Not applicable

## D.

Nature of Relationships

Amounts Due To or From Related Parties

At December 31, 2019, the Company reported \$108,920 due to Parent, Ascot Insurance Company, a Colorado corporation and insurance company, and \$2,473,483 due to 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."

#### F Guarantees or Contingencies for Related Parties

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. Management, Service Contracts, Cost Sharing Arrangement

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. The Company is also party to an Underwriting Services Agreement with an affiliate, Ascot Underwriting Inc.

In 2019 the Company entered into a Program Administrator Agreement with its affiliate, Ethos Specialty Insurance Services LLC (Ethos), under which Ethos provides services to the Company in connection with the two insurance programs underwritten by Ethos - Core Commercial Property Program and Transaction Liability Insurance Program. The Program Administrator Agreement, as well as the Program Schedule for each of the programs, were the subject of Form D filings, which were approved by the Department of Business Regulation.

#### G Nature of Relationships That Could Affect Operations

All outstanding shares are owned by Ascot Insurance Company, a Colorado corporation and insurance company.

- Н. Amount Deducted for Investment in Upstream Company Not applicable
- Detail of Investments in Affiliates Greater than 10% of Admitted Assets: L

Not applicable

- J. Write-down for Impairments of Investments in Affiliates Not applicable
- K. Investments in Foreign Insurance Subsidiaries Not applicable
- L. Downstream Holding Company Valued Using Look-Through Method Not applicable
- M. All SCA Investments Not applicable
- N. Investment in Insurance SCAs Not applicable
- O. SCA or SSAP 48 Entity Loss Tracking Not applicable

### NOTE 11 Debt

- A. The Company does not have any outstanding debt.
- 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. Description of Investment Policies 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. Rate of Return Assumptions 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 month period ending on the 31st day of 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. The Company's Statutory surplus at December 31, 2018 was \$51,500,005. The maximum dividend payout which may be made without prior approval in 2019 and 2018 was \$0 and \$19,434. Dividends need to be 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) The Company has no advances to surplus amount.
- (8) The Company has no stock held for special purposes.
- (9) The Company has no special surplus funds.
- (10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$
- (11) The Company issued the following surplus debentures or similar obligations: Not applicable

(12) The impact of any restatement due to prior quasi-reorganizations is as follows: Not applicable

(13) The Company has no quasi-reorganizations.

### NOTE 14 Liabilities, Contingencies and Assessments

 Contingent Commitments The Company has no contingent commitments.

### B. Assessments

The Company is not subject to any assessments beyond those guaranty fund assessments received in the normal course of business, none of which are expected to have a material financial effect on the Company.

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

Any 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

Lessee Operating Lease: The Company does not have any operating leases.

B. Lessor Leases Not applicable

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

Not applicable

Credit Risk

## NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities A. The Company has no transfer of receivables reported as sales.

B. The Company has no transfer and servicing of financial assets.

C. Wash Sales 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

. Inputs Used for Assets and Liabilities Measured at Fair Value

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 Company carriers no assets or liabilities on its balance sheet measured at fair value.

B. Other Fair Value Disclosures Not applicable

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. C.

Type of Financial Instrument		Aggregate Fair Value	۵	Imitted Assets		(Level 1)		(Level 2)		(Level 3)	Net	Asset Value (NAV)	acticable ng Value)
Bonds	\$	75,929,457	\$	75,929,457	\$	-	\$	75,929,457	\$	-	\$	-	\$ -
Cash Equivalents Cash	\$ \$	1,643,187 5,830,030	\$ \$	1,643,187 5,830,030	\$ \$	1,643,187 5,830,030	\$ \$	-	\$ \$	-	\$	-	\$ -

#### D Not Practicable to Estimate Fair Value

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

Ε. Instruments Measured at Net Asset Value (NAV) Not applicable

### NOTE 21 Other Items

#### Unusual or Infrequent Items А

The Company had no extraordinary, unusual or infrequent events or transactions during the statement period.

В. Troubled Debt Restructuring: Debtors The Company had no troubled debt restructuring.

#### C. Other Disclosures

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 with existing applications. All other costs, including any training and maintenance related costs incurred pre- and post-implementation, have been expensed.

#### D. Business Interruption Insurance Recoveries The Company did not experience any business interruptions.

State Transferable and Non-transferable Tax Credits E. Not applicable

#### Subprime Mortgage Related Risk Exposure F.

The Company does not engage in direct subprime residential mortgage lending. The Company had no exposure as of December 31, 2019 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

#### Insurance-Linked Securities (ILS) Contracts G Not applicable

The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control Н. the Policy Not applicable

### NOTE 22 Events Subsequent

Subsequent events have been considered through February 26, 2020 for the statutory financial statements issued as of December 31, 2019 and determined there were none that required disclosure.

#### NOTE 23 Reinsurance Unsecured Reinsurance Recoverables

Δ

The Company does not have an unsecured aggregate reinsurance recoverable for paid and unpaid losses, loss adjustment expenses and unearned premiums from any individual reinsurers that exceed 3% of the Company's policyholder surplus.

#### в Reinsurance Recoverable in Dispute

The Company does not have reinsurance recoverables in dispute for paid losses and loss adjustment expenses that exceed 5% of policyholders' surplus from an individual reinsurer or that exceed 10% of policyholders' surplus in aggregate.

#### C. Reinsurance Assumed and Ceded

The following tables summarized ceded and assumed unearned premium and the related commission equity at December 31, 2019: (1)

	A	Assumed Reinsurance		Ceded Reinsurance				Net				
		nium erve		mission quity		Premium Reserve	С	ommission Equity		Premium Reserve	С	commission Equity
a. Affiliates	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-
b. All Other	\$	-	\$	-	\$	11,180,751	\$	3,271,852	\$	(11,180,751)	\$	(3,271,852)
c. Total	\$	-	\$	-	\$	11,180,751	\$	3,271,852	\$	(11,180,751)	\$	(3,271,852)
d. Direct Unearned Premium Reserve											\$	19,195,654

### (2)

The Company has accrued additional or return commissions that are predicated on loss experience or on any other form of profit sharing agreements.

	D	irect	As	sumed	 Ceded	 Net
a. Contingent Commission	\$	-	\$	-	\$ 37,898	\$ (37,898)
b. Sliding Scale Adjustments	\$	-	\$	-	\$ -	\$ -
c. Other Profit Commission Arrangements	\$	-	\$	-	\$ -	\$ -
d. TOTAL	\$	-	\$	-	\$ 37,898	\$ (37,898)

(3)

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
- H. Disclosures for the Transfer of Property and Casualty Run-off Agreements 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

There is no change in incurred losses and loss adjustment expenses attributable to insured events of prior year. The Company's net change in loss and loss adjustment expense for the year ended December 31, 2019and 2018 was \$2,410,957 and \$0, respectively.

### 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

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

## **GENERAL INTERROGATORIES**

## PART 1 - COMMON INTERROGATORIES

## GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System is an insurer?					
1.2	If yes, complete Schedule Y, Parts 1, 1A and 2 If yes, did the reporting entity register and file with its domiciliary State Inst such regulatory official of the state of domicile of the principal insurer in the providing disclosure substantially similar to the standards adopted by the f its Model Insurance Holding Company System Regulatory Act and model subject to standards and disclosure requirements substantially similar to the	e Holding Company System, a registration statement National Association of Insurance Commissioners (NAIC) in regulations pertaining thereto, or is the reporting entity	Yes [ X	1 No [ ] N/A [ ]		
1.3	State Regulating?			Rhode Island		
1.4	Is the reporting entity publicly traded or a member of a publicly traded grou					
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code issu					
	Has any change been made during the year of this statement in the charter					
2.1	reporting entity?			Yes [ ] No [ X ]		
2.2	If yes, date of change:					
3.1	State as of what date the latest financial examination of the reporting entity	y was made or is being made		09/30/1989		
3.2	State the as of date that the latest financial examination report became av entity. This date should be the date of the examined balance sheet and no	vailable from either the state of domicile or the reporting of the date the report was completed or released.		09/30/1989		
3.3	State as of what date the latest financial examination report became availa domicile or the reporting entity. This is the release date or completion date examination (balance sheet date).	e of the examination report and not the date of the	-	11/20/1989		
3.4	By what department or departments? Rhode Island					
3.5	Have all financial statement adjustments within the latest financial examin statement filed with Departments?	Yes [	] No [ ] N/A [ X ]			
3.6	Have all of the recommendations within the latest financial examination re	Yes [	] No [ ] N/A [ X ]			
4.1 4.2	4.12 renewa During the period covered by this statement, did any sales/service organiz	s of the reporting entity), receive credit or commissions for or asured on direct premiums) of: f new business? Ils? ration owned in whole or in part by the reporting entity or an af	control	Yes [ ] No [ X ] Yes [ ] No [ X ]		
	receive credit or commissions for or control a substantial part (more than 2 premiums) of:	20 percent of any major line of business measured on direct f new business?		Yes [ ] No [ X ]		
		lls?		Yes [ ] No [ X ]		
5.1	Has the reporting entity been a party to a merger or consolidation during the If yes, complete and file the merger history data file with the NAIC.	he period covered by this statement?		Yes [ ] No [X]		
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of c ceased to exist as a result of the merger or consolidation.	domicile (use two letter state abbreviation) for any entity that h	as			
	1 Name of Entity	2 3 NAIC Company Code State of Domicile				
6.1	Has the reporting entity had any Certificates of Authority, licenses or regist revoked by any governmental entity during the reporting period?			Yes [ ] No [ X ]		
6.2	If yes, give full information:					
7.1	Does any foreign (non-United States) person or entity directly or indirectly	control 10% or more of the reporting entity?		Yes [ X ] No [ ]		
7.2	If yes, 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 en attorney-in-fact; and identify the type of entity(s) (e.g., individual, corp	ntity is a mutual or reciprocal, the nationality of its manager or		100.0 %		
	1	2				
	Nationality Co	Type of Entity rporation				

-----

## **GENERAL INTERROGATORIES**

8.1 8.2	Is the company a subsidiary of a bank holding company regulated by the lf response to 8.1 is yes, please identify the name of the bank holding company is the bank holding	ompany.			Yes [	]	No [	X ]
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities fir 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	ms? (city and state of the main office) of any affiliates reg Office of the Comptroller of the Currency (OCC), the	ulated by a fec Federal Depos	deral	Yes [	]	No [	X ]
	1 Affiliate Name	2 Location (City, State)	3 4 FRB OCC	5 FDIC	6 SEC			
9.	What is the name and address of the independent certified public acco Deloitte and Touche LLP 500 College Road East Third Floor Princeton, NJ 08540	untant or accounting firm retained to conduct the anr	iual audit?			-		
10.1	Has the insurer been granted any exemptions to the prohibited non-aud requirements as allowed in Section 7H of the Annual Financial Reportin law or regulation?	ng Model Regulation (Model Audit Rule), or substant	ially similar sta	ate	Yes [	]	No [	X ]
10.2	If the response to 10.1 is yes, provide information related to this exemp							
	0.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?						No [	X ]
10.4								
10.5 10.6					] No [	]	N/A	[]
11.	What is the name, address and affiliation (officer/employee of the repor firm) of the individual providing the statement of actuarial opinion/certifi Kathleen C. Odomirok, FCAS, MAAA Principal Ernst & Young LLP 200 Clarendon Street Boston, MA 02116	cation?						
12.1	Does the reporting entity own any securities of a real estate holding cor				Yes [	]	No [	X ]
		state holding company cels involved			0			
		isted carrying value						0
12.2	If, yes provide explanation:							
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIE	ES ONLY:						
13.1	What changes have been made during the year in the United States m	anager or the United States trustees of the reporting	entity?					
13.2	Does this statement contain all business transacted for the reporting er	ntity through its United States Branch on risks where	ver located?		Yes [	]	No ſ	1
13.3	Have there been any changes made to any of the trust indentures durin	g the year?			Yes [	]	No [	i
13.4					] No [	]	N/A	۱ I
14.1						]	No [	]
	<ul> <li>c. Compliance with applicable governmental laws, rules and regulations</li> <li>d. The prompt internal reporting of violations to an appropriate person of</li> </ul>							
14.11	e. Accountability for adherence to the code. If the response to 14.1 is No, please explain:							
14.2 14.21	Has the code of ethics for senior managers been amended? If the response to 14.2 is yes, provide information related to amendmer	ot(s).			Yes [	]	No [	X ]
14.3 14.31	Have any provisions of the code of ethics been waived for any of the sp If the response to 14.3 is yes, provide the nature of any waiver(s).				Yes [	]	No [	X ]

# **GENERAL INTERROGATORIES**

	1 American Bankers	2	3			4	
	Association (ABA) Routing						
	Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit		Am	ount	
		BOARD OF D					
	thereof?	or sale of all investments of the reporting entity passed upon eithe	-		Yes [	] No	)[)
	thereof?	ng entity keep a complete permanent record of the proceedings of			Yes [ X	] No	) [
		g entity an established procedure for disclosure to its board of dire officers, directors, trustees or responsible employees that is in co			Yes [ X	] No	) [
		FINAN	CIAL				
	Accounting Princ	ent been prepared using a basis of accounting other than Statutory ciples)?			Yes [	] No	)[)
	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans): 20.11 To directors or other officers						
			20.12 To stockholders not officers		\$		
			20.13 Trustees, supreme or grand (Fraternal Only)		\$		
	Total amount of policy loans):	loans outstanding at the end of year (inclusive of Separate Account	nts, exclusive of 20.21 To directors or other officers		\$		
	policy loalis).		20.22 To stockholders not officers		Ψ \$		
			20.23 Trustees, supreme or grand				
			(Fraternal Only)		\$		
	Were any assets obligation being	reported in this statement subject to a contractual obligation to tr reported in the statement?	anster to another party without the liability for such		Yes (	] No	) [ X
		amount thereof at December 31 of the current year:	21.21 Rented from others				
			21.22 Borrowed from others				
			21.23 Leased from others		\$		
			21.24 Other		\$		
	Does this statem guaranty associa	ent include payments for assessments as described in the Annua tion assessments?	I Statement Instructions other than guaranty fund or		Yes [	] No	) [ )
	If answer is yes:		22.21 Amount paid as losses or risk adju	stment \$	\$		
			22.22 Amount paid as expenses				
	Door the reserve	ng entity report any amounts due from parent, subsidiaries or affili	22.23 Other amounts paid		\$ Var '	1 1	 . г ч
	•	ng entity report any amounts due from parent, subsidiaries or affili ny amounts receivable from parent included in the Page 2 amoun					
		INVEST	MENT				
		cks, bonds and other securities owned December 31 of current ye ssion of the reporting entity on said date? (other than securities le			Yes [	] No	o[)
		d complete information relating thereto as securities deposited with the various states as detailed in Sche	dule E Part 3				
3	For security lend	ing programs, provide a description of the program including valu	e for collateral and amount of loaned securities, and				
	whether collatera	al is carried on or off-balance sheet. (an alternative is to reference	Note 17 where this information is also provided)				
ļ	Does the Compa Instructions?	any's security lending program meet the requirements for a confor	ning program as outlined in the Risk-Based Capital	Yes [	] No [	] [	N/A
5	If answer to 24.0	4 is yes, report amount of collateral for conforming programs			\$		
5	If answer to 24.0	4 is no, report amount of collateral for other programs.			\$		
7	Does your secur outset of the con	ities lending program require 102% (domestic securities) and 105 tract?	% (foreign securities) from the counterparty at the	Yes [	] No [	] [	N/A
	D 4	ng entity non-admit when the collateral received from the counterp	arty falls below 100%2	Yes [	1 No I	1 1	A/A
ţ	Does the reportin			100 [	1 100 [		

## **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 of	orted on Schedule DL, Parts 1 and 2 collateral assets reported on Schedule DL, Parts 1 and 2	\$0
25.1	Were any of the stocks, bonds or other assets of the reporting entity owne control of the reporting entity, or has the reporting entity sold or transferred force? (Exclude securities subject to Interrogatory 21.1 and 24.03).	ed at December 31 of the current year not exclusively under the d any assets subject to a put option contract that is currently in	
25.2	If yes, state the amount thereof at December 31 of the current year:	<ul> <li>25.21 Subject to repurchase agreements</li> <li>25.22 Subject to reverse repurchase agreements</li> <li>25.23 Subject to dollar repurchase agreements</li> <li>25.24 Subject to reverse dollar repurchase agreements</li> <li>25.25 Placed under option agreements</li> <li>25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock</li> <li>25.27 FHLB Capital Stock</li> <li>25.28 On deposit with states</li> <li>25.30 Pledged as collateral - excluding collateral pledged an FHLB</li> <li>25.31 Pledged as collateral to FHLB - including assets</li> </ul>	\$
		backing funding agreements 25.32 Other	

### 25.3 For category (25.26) provide the following:

	1 Nature of Restriction		3 ount			
26.1	Does the reporting entity have any hedging transactions reported on Sc	shedule DB?	Yes [	] No [	X ]	
26.2	If yes, has a comprehensive description of the hedging program been n If no, attach a description with this statement.	nade available to the domiciliary state? Yes [	] No [	] N/A	[ X	
LINES 2	6.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ON	LY:				
26.3	Does the reporting entity utilize derivatives to hedge variable annuity gu	arantees subject to fluctuations as a result of interest rate sensitivity?	Yes [	] No [	X ]	
26.4	26.42 Per	ecial accounting provision of SSAP No. 108 mitted accounting practice er accounting guidance			] ] ]	
26.5	<ul> <li>By responding YES to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:</li> <li>The reporting entity has obtained explicit approval from the domiciliary state.</li> <li>Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.</li> <li>Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.</li> <li>Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy is the hedging strategy being used by the company ir its actual day-to-day risk mitigation efforts.</li> </ul>					
27.1	Were any preferred stocks or bonds owned as of December 31 of the c issuer, convertible into equity?	current year mandatorily convertible into equity, or, at the option of the	Yes [	] No [	X ]	
27.2	If yes, state the amount thereof at December 31 of the current year		\$			
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	Yes [ )	X] No[	]	
28.01	For agreements that comply with the requirements of the NAIC Financia	al Condition Examiners Handbook, complete the following				

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

## **GENERAL INTERROGATORIES**

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)		

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

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

## 28.06 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	KUR85E5PS4G0FZTFC130	SEC	NO

 29.1
 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)])?
 Yes [ ] No [ X ]

29.2 If yes, complete the following schedule:

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

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

30. 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.

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
30.1 Bonds	74,296,624	75,929,456	1,632,832
30.2 Preferred stocks	0	0	0
30.3 Totals	74,296,624	75,929,456	1,632,832

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 BofA ML indices, Rueters, Bloomberg, Markit, Markit iBoxx or Pricing Direct. 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.			
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 32.2	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? If no, list exceptions:	Yes [ )	( ]	No [ ]
33.	<ul> <li>By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:</li> <li>a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.</li> <li>b. Issuer or obligor is current on all contracted interest and principal payments.</li> <li>c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.</li> </ul>			
	Has the reporting entity self-designated 5GI securities?	Yes [	]	No [ X ]
34.	<ul> <li>By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:</li> <li>a. The security was purchased prior to January 1, 2018.</li> <li>b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.</li> <li>c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.</li> <li>d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.</li> </ul>	Yes [	]	No [ X ]
35.	<ul> <li>By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund: <ul> <li>a. The shares were purchased prior to January 1, 2019.</li> <li>b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.</li> <li>c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.</li> <li>d. The fund only or predominantly holds bonds in its portfolio.</li> <li>e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.</li> <li>f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.</li> </ul> </li> <li>Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?</li> </ul>	Yes [	]	No [ X ]
	OTHER			

36.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?	5 163.	167
30.1	Amount of payments to trade associations, service organizations and statistical of rating bureaus, if any: $\dots$	100,	, 107

36.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
Insurance Services Office, Inc.	128.206
	, , , , , , , , , , , , , , , , , , , ,

# 38.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	2
Name	Amount Paid

### PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

		ATT AND CASUALTT INTERNOGATORIES	
1.1	Does the reporting entity have any direct Medicare Supplement Ir	nsurance in force?	Yes [ ] No [X]
1.2	If yes, indicate premium earned on U. S. business only.		\$0
1.3	1.31 Reason for excluding	ement Insurance Experience Exhibit?	\$0
1.4	Indicate amount of earned premium attributable to Canadian and	/or Other Alien not included in Item (1.2) above.	\$0
1.5	Indicate total incurred claims on all Medicare Supplement Insurar	1ce	\$0
1.6	Individual policies:	Most current three years:	
	F	1.61 Total premium earned	\$0
		1.62 Total incurred claims	\$0
		1.63 Number of covered lives	
		All years prior to most current three years	
		1.64 Total premium earned	
		1.65 Total incurred claims	\$0
		1.66 Number of covered lives	
1.7	Group policies:	Most current three years:	
		1.71 Total premium earned	\$0
		1.72 Total incurred claims	\$0
		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	
	2.6 Reserve Ratio (2.4/2.5)	0.000	
3.1	Does the reporting entity issue both participating and non-particip	vating policies?	Yes [ ] No [ X ]
3.2	If yes, state the amount of calendar year premiums written on:		
		3.21 Participating policies	\$0
		3.22 Non-participating policies	\$0
4.	For mutual reporting Entities and Reciprocal Exchanges Only:		
4.1			
4.2	Does the reporting entity issue non-assessable policies?		Yes [ ] No [ ]
4.3	If assessable policies are issued, what is the extent of the conting	gent liability of the policyholders?	.%0.0
4.4	I otal amount of assessments paid or ordered to be paid during th	ne year on deposit notes or contingent premiums.	\$ 0
5.	For Reciprocal Exchanges Only:		
5.1			Yes [ ] No [ ]
5.2	If yes, is the commission paid:		
5.2		Attorney's-in-fact compensation	
		irect expense of the exchange	
5.3	What expenses of the Exchange are not paid out of the compens		ן איארן זיאר [ ]
5.5			
5.4		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? The Company does not write workers compensation insurance.				
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. The Company writes relatively little catastrophe exposed business. Its probable maximum insurance loss arises from property-catastrophe exposure associated with its static inland marine and cargo risks. Exposure is diversified countrywide with key locations including southeast Atlantic coast and the Gulf (hurricane) and California (earthquake). To estimate PML, the Company licenses and uses one of the most well established third party catastrophe models.				
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? The Company mitigates its risk of a property catastrophe loss through purchase of both quota share and per occurrence XOL reinsurance covering its inland marine and cargo portfolios				
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. The Company writes primarily casualty business and has relatively little exposure to property-catastrophe loss. As a result, property catastrophe specific reinsurance is not purchased. Coverage of property-catastrophe loss through the Company's purchase of quota share and per occurrence XOL treaties, however, eliminates approximately 75% of its aggregate gross PML.				
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 [	]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions:				4
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 [	[X]
8.2	If yes, give full information				
9.1	<ul> <li>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:</li> <li>(a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;</li> <li>(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;</li> <li>(c) Aggregate stop loss reinsurance coverage;</li> <li>(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;</li> </ul>				
	<ul> <li>(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</li> <li>(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.</li> </ul>	Yes [	]	No [	[ X ]
9.2	Has the reporting entity during the period covered by the statement 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, 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; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity, or its affiliates represents fifty percent (50%) or more of the entire direct 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 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 37 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 [	[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:				
	<ul> <li>(a) The entity does not utilize reinsurance; or,</li></ul>	-	-	-	
	supplement; or		-		[X]
10.	attestation supplement		-		-
	to that which the original entity would have been required to charge had it retained the risks. Has this been done?	] No [	]	N/A	4 [ X ]

### PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1	Has the reporting entity guaranteed policies issued b	y any other entity and n	ow in force?			Yes [ ] N	lo [ X ]
11.2	If yes, give full information						
12.1	If the reporting entity recorded accrued retrospective amount of corresponding liabilities recorded for:	premiums on insurance	e contracts on Line 15.3	of the asset schedule, F	age 2, state the		
			aid losses				
		12.12 Unp	aid underwriting expens	es (including loss adjus	tment 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	, and other funds		\$	0
12.3	If the reporting entity underwrites commercial insural accepted from its insureds covering unpaid premium	nce risks, such as worke s and/or unpaid losses?	ers' compensation, are p	remium notes or promis	sory notes Yes [	] No [ X ]	N/A [ ]
12.4	If yes, provide the range of interest rates charged un	der such notes during th	ne period covered by this	s statement:			
		12.41 From	n				0.0 %
		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	entity's reported direct	unpaid loss reserves , i	including unpaid	Yes [ ] N	lo [ X ]
12.6	If yes, state the amount thereof at December 31 of the						
			ers of credit				
		12.62 Coll	ateral and other funds			.\$	0
13.1	Largest net aggregate amount insured in any one ris	k (excluding workers' co	ompensation):			\$	6,225,000
13.2	Does any reinsurance contract considered in the call reinstatement provision?	culation of this amount i	nclude an aggregate lim	it of recovery without al	so including a	Yes [ ] N	lo [ 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 includ ne amount.	ding facultative program	s, automatic		0
14.1	Is the company a cedant in a multiple cedant reinsur	ance contract?				Yes [X] N	lo [ ]
14.2	If yes, please describe the method of allocating and Allocate based on premium written.	•	•				
14.3	If the answer to 14.1 is yes, are the methods describ contracts?					Yes [ ] N	lo [ X ]
14.4	If the answer to 14.3 is no, are all the methods descr	ibed in 14.2 entirely con	tained in written agreen	nents?		Yes [ ] N	lo [ X ]
14.5	If the answer to 14.4 is no, please explain: The allocations are not written agreements because	they are allocated interr	nally.				
15.1	Has the reporting entity guaranteed any financed pre					Yes [ ] N	lo [ 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 [ ] N	lo [ X ]
		1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct P Ean	remium
16.11	Home	0	0	0		0	0

..0

0

0

..0

.0

0

..0

.0

0

..0

0

0

..0 .0

0

\* Disclose type of coverage:

16.12 Products

16.14

16.13 Automobile

Other\*

### 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 dollars only, no cents: show percentages to one decimal place, i.e. 17.6.

	Show amounts in whole of				i.e. 17.6.	
		1 2019	2 2018	3 2017	4 2016	5 2015
	Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1.	18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)				0	0
2. 3.	Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5,			0	0	0
-	8, 22 & 27)				0	0
5.	29, 30 & 34) Nonproportional reinsurance lines (Lines 31, 32 &			0	0	0
6.	33) Total (Line 35)	0	0	0	0	0
o. 7.	Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. 8.	18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)           Property lines (Lines 1, 2, 9, 12, 21 & 26)		0 0	0	0	0
o. 9.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28					0
11.	29, 30 & 34) Nonproportional reinsurance lines (Lines 31, 32 &		0	0	0	0
12.	33) Total (Line 35)			-	0	0
	Statement of Income (Page 4)					
13	Net underwriting gain (loss) (Line 8)	(13,842,793)	(490,343)			0
14. 15.	Net investment gain or (loss) (Line 11) Total other income (Line 15)	2,UD/,8/4 (10,500)	109,568	19,434 0		(158,836) 0
15. 16.	Dividends to policyholders (Line 17)					0
16.	Federal and foreign income taxes incurred (Line 19)	0	0	0	1,388	4,385
18.	Net income (Line 20)	(11,803,517)				(163,221)
19.	Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	85 413 862	51 938 601	1 944 127	1 824 007	
20.	Premiums and considerations (Page 2, Col. 3) 20.1 In course of collection (Line 15.1)					
	20.1 In course of collection (Line 15.1)			0		0
	20.2 Deferred and not yet due (Line 15.2)					0
21.	Total lighiliting evoluting protected call business					
	(Page 3, Line 26)					
22.	Losses (Page 3, Line 1)		0	0		0
23.	Loss adjustment expenses (Page 3, Line 3)		0			0
24.	Unearned premiums (Page 3, Line 9)			0		0
25.	Capital paid up (Page 3, Lines 30 & 31)					
26.	Surplus as regards policyholders (Page 3, Line 37) Cash Flow (Page 5)			1,895,432		
27.	Net cash from operations (Line 11) Risk-Based Capital Analysis					
28.	Total adjusted capital		51,500,005	1,895,432	1,822,507	1,657,433
29.	Authorized control level risk-based capital Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0			2,890		248,758
30.	Bonds (Line 1)			0.0	0.0	0.0
31.	Stocks (Lines 2.1 & 2.2)	0.0		0.0		
32.	Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0			0.0
33.	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)	0 1	12.6	100.0	0.7	
35.	(Line 5) Contract loans (Line 6)					
35. 36.	Derivatives (Line 7)		0.0			
37.	Other invested assets (Line 8)	0.0	0.0		0.0	.0.0
38.	Receivables for securities (Line 9)				0.0	.0.0
39.	Securities lending reinvested collateral assets (Line 10)	0.0				
40. 41.	Aggregate write-ins for invested assets (Line 11) Cash, cash equivalents and invested assets (Line	0.0	0.0	0.0	0.0	0.0
	12) Investments in Parent, Subsidiaries and	100.0				
42.	Affiliates Affiliated bonds (Schedule D, Summary, Line 12,					_
43.	Col. 1) Affiliated preferred stocks (Schedule D, Summary,					
44.	Affiliated common stocks (Schedule D, Summary, Affiliated common stocks (Schedule D, Summary,					0
45.	Animated common stocks (Schedule D, Summary, Line 24, Col. 1)			0		
	in Schedule DA Verification, Col. 5, Line 10)	0	0	0	-	0
46.	Affiliated mortgage loans on real estate	0	0			0
47.	All other affiliated	0	0	0	0	0
48. 49.	Total of above Lines 42 to 47 Total Investment in Parent included in Lines 42 to					0
50.	47 above Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders	0	0	0	0	0
	(Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.0	0.0	0.0	0.0	0.0

# FIVE-YEAR HISTORICAL DATA

		1 2019	2 2018	3 2017	4 2016	5 2015
	Capital and Surplus Accounts (Page 4)	2010	2010		2010	2010
51.	Net unrealized capital gains (losses) (Line 24)	0	0	(11, 228)	32 994	
52.	Dividends to stockholders (Line 35)				02,004	
53.	Change in surplus as regards policyholders for the year (Line 38)					(232.2
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)			,		
54.	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	
55.	Property lines (Lines 1, 2, 9, 12, 21 & 26)	0	0	0	0	
56.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	0	0	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.	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
68.	Loss expenses incurred (Line 3)					0
69. 	Other underwriting expenses incurred (Line 4)					0
70.	Net underwriting gain (loss) (Line 8)	(443.4)	0.0	0.0	0.0	0
	Other Percentages					
71.	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
72.	Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	77.2	0.0	0.0	0.0	0
73.	Net premiums written to policyholders' surplus					
	3, Line 37, Col. 1 x 100.0)	17.4	0.0	0.0	0.0	0
74.	One Year Loss Development (\$000 omitted) Development in estimated losses and loss expenses incurred prior to current year (Schedule					
	P - Part 2 - Summary, Line 12, Col. 11)	0	0	0	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)					
76.	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	
77.	Percent of development of losses and loss 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

## SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES SCHEDULE P - PART 1 - SUMMARY

(\$000 OMITTED)

		Pr	Premiums Earned Loss and Loss Expense Payments									12	
	ears in	1	2	3				and Cost	Adjusting		10	11	
	Vhich				Loss Pa			t Payments	Payn		-		Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and	Diverse and			Discotorial		Discotorial		Diversities		Salvage and		Reported
	es Were curred	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Received	(4 - 5 + 6 - 7 + 8 - 9)	Direct and
	curreu	Assumed	Cedeu	Net (1 - 2)			Assumed	Cedeu	Assumed	Ceded	neceiveu	+ 0 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2010	0	0	0	0	0	0	0	0	0	0	0	XXX
3.	2011	0	0	0	0	0	0	0	0	0	0	0	XXX
4.	2012	0	0	0	0	0	0	0	0	0	0	0	XXX
5.	2013	0	0	0	0	0	0	0	0	0	0	0	xxx
6.	2014	0	0	0	0			0	0	0	0	0	XXX
7.	2015	0	0	0				0		0		0	XXX
8.	2016	0	0	0	0	0	0	0	0	0	0	0	XXX
9.	2017	0	0	0	0	0	0	0	0	0	0	0	XXX
10.	2018	0	0	0	0	0	0	0	0	0	0	0	XXX
11.	2019	8,616	5,493	3,122	0	0	9	7	370	0	0	372	XXX
12.	Totals	XXX	XXX	XXX	0	0	9	7	370	0	0	372	XXX

						Р.(				A. I''		23	24	25
		Case		Unpaid Bulk +	IBNR	Detens Case		Containment Bulk +		Adjusting Unp				
		13	14	15	16	17	18	19	20	21	22	Salvage and	Total Net Losses	Number of Claims Outstand-
		Direct and Assumed	Ceded	Subrog- ation Anticipated	and Expenses Unpaid	ing Direct and Assumed								
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	XXX
2.	2010	0	0	0	0	0	0	0	0	0	0	0	0	XXX
3.	2011	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4.	2012	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5.	2013	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6.	2014	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7.	2015	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8.	2016	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9.	2017	0	0	0	0	0	0	0	0	0	0	0	0	XXX
10.	2018	0	0	0	0	0	0	0	0	0	0	0	0	XXX
11.	2019	0	0	3,883	2,550	8	6	1,215	701	190	0	0	2,039	XXX
12.	Totals	0	0	3,883	2,550	8	6	1,215	701	190	0	0	2,039	xxx

			Total			oss Expense F				34	Net Balar	
		Losses and 26	Loss Expense 27	es Incurred 28	(Incurre 29	d /Premiums E 30	arned) 31	Nontabula 32	r Discount 33	Inter-	Reserves Af	ter Discount 36
		Direct and Assumed	Ceded	20 Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	xxx	0	0
2.	2010	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2011	0	0	0		0.0	0.0	0	0	0.0	0	0
4.	2012	0	0	0		0.0	0.0	0	0	0.0	0	0
5.	2013	0	0	0	0.0	0.0	0.0	0	0		0	0
6.	2014	0	0	0	0.0	0.0	0.0	0			0	0
7.	2015	0	0	0	0.0	0.0	0.0	0	0		0	0
8.	2016	0	0	0	.0.0			0	0	0.0	0	0
9.	2017	0	0	0	0.0	0.0		0	0	0.0	0	0
10.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	2019	5,675	3,264	2,411	65.9	59.4	77.2	0	0	0.0	1,332	707
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,332	707

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Ascot Specialty Insurance Company SCHEDULE P - PART 2 - SUMMARY

Ye	ars in	INCURRED	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END (\$000	OMITTED)	DEVELC	PMENT
Whic	h Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were	Incurred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	One Year	Two Year
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0
2.	2010	0	0	0	0	0	0	0	0	0	0	0	0
3.	2011	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2012	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2013	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2014	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2015	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2016	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10.	2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,851	XXX	XXX
											12. Totals	0	0

## **SCHEDULE P - PART 3 - SUMMARY**

		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN			MENT EXPE	<b>NSES REPOF</b>	RTED AT YEA	AR END	11	12
						(\$000 OI	MITTED)					Number of	Number of
	ears in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
	Vhich											Closed	Closed
	osses Vere											With Loss	Without Loss
	curred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	Payment	Payment
			-	2012						2010			, i i i i i i i i i i i i i i i i i i i
1.	Prior	000	0	0	0	0	0	0	0	0	0	XXX	XXX
2.	2010	0	0	0	0	0	0	0	0	0	0	XXX	XXX
3.	2011	xxx	0	0	0	0	0	0	0	0	0	xxx	xxx
4.	2012	xxx	XXX	0	0	0	0	0	0	0	0	xxx	xxx
5.	2013	xxx	XXX	XXX	0	0	0	0	0	0	0	xxx	xxx
6.	2014	xxx	XXX	XXX	XXX	0	0	0	0	0	0	xxx	xxx
7.	2015	xxx	XXX	XXX	XXX	XXX	0	0	0	0	0	xxx	xxx
8.	2016	xxx	XXX	XXX	XXX	XXX	XXX	0	0	0	0	xxx	xxx
9.	2017	xxx	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	xxx	xxx
10.	2018	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	xxx	xxx
11.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	XXX	XXX

# **SCHEDULE P - PART 4 - SUMMARY**

		BULK AND I	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
	ears in	1	2	3	4	5	6	7	8	9	10
	Vhich										
	osses Nere										
	curred	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2010	0	0	0	0	0	0	0	0	0	0
3.	2011	xxx	0	0	0	0	0	0	0	0	0
4.	2012	xxx	XXX	0	0	0	0	0	0	0	0
5.	2013	xxx	XXX	XXX	0	0	0	0	0	0	0
6.	2014	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2015	xxx	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2016	xxx	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2017	xxx	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10.	2018	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11.	2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,847

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Ascot Specialty Insurance Company **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

1				Allocated by	States and T	erritories				
1		1	Gross Premiu		4	5	6	7	8	9
			Policy and Mer Less Return F							Direct Premiums
			Premiums or		Dividends					Written for
			Tał		Paid or	Direct			Finance and	Federal
			2	3	Credited to	Losses			Service	Purchasing
		Active	Direct	Direct	Policyholders	Paid	Direct	Direct	Charges Not	Groups
		Status	Premiums	Premiums	on Direct	(Deducting	Losses	Losses	Included in	(Included in
-	States, Etc.	(a)	Written	Earned	Business	Salvage)	Incurred	Unpaid	Premiums	Column 2)
1.	AlabamaAL	E			0	0			0	
2.	AlaskaAK	<u>E</u>			0	0	23,401	23,401	0	
3.	ArizonaAZ	E		4 , 125	0	0	1,361	1,361	0	(
4.	ArkansasAR	E			0	0	5,257	5,257	0	(
5.	CaliforniaCA	E	3,419,637	1,348,745	0	0		597,257	0	(
6.	ColoradoCO	E	1,664,669		0	0			0	(
7.	ConnecticutCT	E		43,679	0	0			0	(
8.	DelawareDE	E	0	0	0	.0	0	0	0	
9.	District of Columbia DC	Е			0	0	6,535		0	(
10.	FloridaFL	E	.900,000		0	0			0	(
11.	GeorgiaGA	E	1,045,200		0	0			0	
12.	Hawaii HI	E	132,578		0	0			0	
13.	IdahoID	Е F			0	0			0	
								4,440	•	(
14.	IllinoisIL	<u>-</u>			0	0			0	
15.	IndianaIN	<u>E</u>	459,750		0	0			0	(
16.	lowaIA	E	0	0	0	0	0	0	0	(
17.	KansasKS	E		9, 133	0	0		3,014	0	(
18.	KentuckyKY	E			0	0			0	(
19.	LouisianaLA	E	352.269	91.093	0	0		45.094	0	
20.	Maine	Ē	0	0	0	0	0		0	(
21.	MarylandMD	Ē	150,500		0	0		29,375	0	(
22.	MassachusettsMA	E		1,383	0	0			0	
22.	MichiganMA	FE.			0	0			0	
					•	•			•	
24.	MinnesotaMN	<u>E</u>			0	0		13,622	0	
	MississippiMS	E	0	0	0	0	0	0	0	(
26.	MissouriMO	E			0	0			0	(
27.	MontanaMT	E			0	0			0	(
28.	NebraskaNE	E			0	0			0	(
29.	NevadaNV	E	203,460		0	0			0	(
30.	New HampshireNH	E	0		0	0	0		0	(
31.	New JerseyNJ	E	543,539		0	0			0	(
32.	New MexicoNM	E		3,224	0	0	1.804		0	(
33.	New YorkNY		2,298,780		0	0			0	
		F			0	0			0	
34.		<u>E</u>			•					
35.	North DakotaND	E			0	0	6,171	6,171	0	(
36.	OhioOH	E			0	0			0	(
	OklahomaOK	E	235,496		0	0			0	(
38.	OregonOR	E		13,567	0	0			0	(
39.	PennsylvaniaPA	E			0	0			0	(
40.	Rhode IslandRI	LL		61,955	0	0			0	(
41.	South CarolinaSC	E	284,700	186,208	0	0			0	(
42.	South Dakota	E			0	0		0	0	(
43.	TennesseeTN	Б F	130,600		0	0			0	
44.	TexasTX	Е. Е	9,890,462	2,749,310	0	0	1,426,097	1,426,097	0	
	UtahUT									
45.	• ·	E		5,083	0	0	1,677	1,677	0	
46.	VermontVT	<u>E</u>	0	0	0	0	0	0	0	·!
47.	VirginiaVA	E			0	0	13, 177	13, 177	0	
48.	WashingtonWA	E			0	0			0	
49.	West VirginiaWV	E	0	0	0	0	0	0	0	
50.	WisconsinWI	E		66,418	0	0			0	
51.	WyomingWY	E	0	0	0	0	0	0	0	
52.	American SamoaAS	N.	0	0	0	0	0	0	0	
	GuamGU	N		0	0		0	0	0	
54.	Puerto RicoPR	N	0	0	0	0	0	0	0	
	U.S. Virgin IslandsVI	N		0	0	0	0	0	0	
55. 56.	Northern Mariana	IN	U	0	U	0	0	0	0	
50.	IslandsMP	N	0	0	0	0	0	0	0	.
57.	CanadaCAN				0	0			0	
				,			,	,		
	Aggregate other alien OT	XXX	00	0	0	0	0	0	0	
59.	Totals	XXX	27,811,389	8,615,735	0	0	3,882,756	3,882,756	0	
	DETAILS OF WRITE-INS									
58001.		XXX								
58002.		XXX								
58003.		XXX								
	Summary of remaining									
	write-ins for Line 58 from									
	overflow page	XXX	0	0	0	0	0	0	0	(
FCC	Totals (Lines 58001 through									
58999.										
58999.	58003 plus 58998)(Line 58	xxx	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).

....1 ..50

D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus business in the state 0

lines in the state of domicile. (b) Explanation of basis of allocation of premiums by states, etc.

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

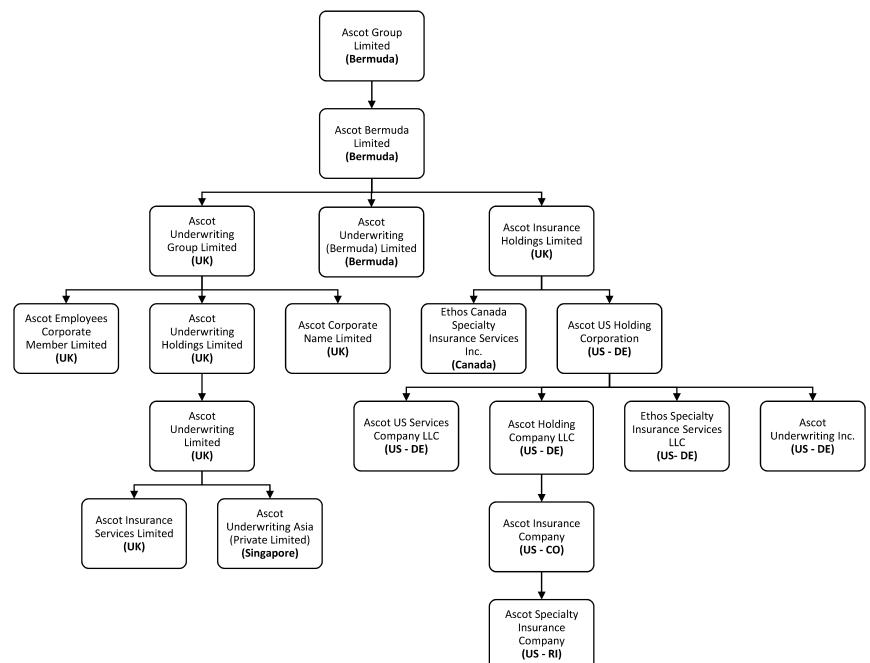
Q - Qualified - Qualified or accredited reinsurer. ..... N - None of the above - Not allowed to write .6

0

.0

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

### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP



PART 1 – ORGANIZATIONAL CHART

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Ascot Specialty Insurance Company OVERFLOW PAGE FOR WRITE-INS

Addition	al 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.	Professional Fees	0		0	
2497.	Summary of remaining write-ins for Line 24 from overflow page	0	902,013	0	902,013

## ALPHABETICAL INDEX

## ANNUAL STATEMENT BLANK

Assets	
Cash Flow	
Exhibit of Capital Gains (Losses)	
Exhibit of Net Investment Income	
Exhibit of Nonadmitted Assets	
Exhibit of Premiums and Losses (State Page)	
Five-Year Historical Data	
General Interrogatories	
Jurat Page	1
Liabilities, Surplus and Other Funds	
Notes To Financial Statements	
Overflow Page For Write-ins	
Schedule A - Part 1	E01
Schedule A - Part 2	E02
Schedule A - Part 3	E03
Schedule A - Verification Between Years	
Schedule B - Part 1	E04
Schedule B - Part 2	E05
Schedule B - Part 3	E06
Schedule B - Verification Between Years	
Schedule BA - Part 1	E07
Schedule BA - Part 2	
Schedule BA - Part 3	E09
Schedule BA - Verification Between Years	SI03
Schedule D - Part 1	E10
Schedule D - Part 1A - Section 1	SI05
Schedule D - Part 1A - Section 2	SI08
Schedule D - Part 2 - Section 1	E11
Schedule D - Part 2 - Section 2	
Schedule D - Part 3	E13
Schedule D - Part 4	
Schedule D - Part 5	E15
Schedule D - Part 6 - Section 1	E16
Schedule D - Part 6 - Section 2	
Schedule D - Summary By Country	
Schedule D - Verification Between Years	SI03
Schedule DA - Part 1	E17
Schedule DA - Verification Between Years	SI10
Schedule DB - Part A - Section 1	E18
Schedule DB - Part A - Section 2	E19
Schedule DB - Part A - Verification Between Years	SI11
Schedule DB - Part B - Section 1	E20
Schedule DB - Part B - Section 2	E21
Schedule DB - Part B - Verification Between Years	SI11
Schedule DB - Part C - Section 1	
Schedule DB - Part C - Section 2	
Schedule DB - Part D - Section 1	
Schedule DB - Part D - Section 2	
Schedule DB - Part E	
Schedule DB - Verification	
Schedule DL - Part 1	
Schedule DL - Part 2	
Schedule E - Part 1 - Cash	
Schedule E - Part 2 - Cash Equivalents	
Schedule E - Part 2 - Verification Between Years	
Schedule E - Part 3 - Special Deposits	
Schedule F - Part 1	
Schedule F - Part 2	
Schedule F - Part 3	
Schedule F - Part 4	
Schedule F - Part 5	
Schedule F - Part 6	
Schedule H - Accident and Health Exhibit - Part 1	
Schedule H - Part 2, Part 3 and 4	
Schedule H - Part 5 - Health Claims	

### **ANNUAL STATEMENT BLANK (Continued)**

Schedule P - Part 1 - Summary	
Schedule P - Part 1A - Homeowners/Farmowners	
Schedule P - Part 1B - Private Passenger Auto Liability/Medical	
Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)	
Schedule P - Part 1E - Commercial Multiple Peril	
Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence	
Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made	
Schedule P - Part 1G - Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler and Machinery)	
Schedule P - Part 1H - Section 1 - Other Liability-Occurrence	
Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made	
Schedule P - Part 11 - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	
Schedule P - Part 1J - Auto Physical Damage	
Schedule P - Part 1K - Fidelity/Surety	
Schedule P - Part 1L - Other (Including Credit, Accident and Health)	
Schedule P - Part 1M - International	
Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property	
Schedule P - Part 10 - Reinsurance - Nonproportional Assumed Liability	
Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines	
Schedule P - Part 1R - Section 1 - Products Liability - Occurrence	
Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made	
Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty	
Schedule P - Part 1T - Warranty	
Schedule P - Part 2, Part 3 and Part 4 - Summary	
Schedule P - Part 2A - Homeowners/Farmowners	5
Schedule P - Part 2B - Private Passenger Auto Liability/Medical	5
Schedule P - Part 2C - Commercial Auto/Truck Liability/Medical	5
Schedule P - Part 2D - Workers' Compensation (Excluding Excess Workers' Compensation)	
Schedule P - Part 2E - Commercial Multiple Peril	
Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence	
Schedule P - Part 2F - Section 2 - Medical Professional Liability - Claims-Made	
Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	
Schedule P - Part 2H - Section 1 - Other Liability - Occurrence	5
Schedule P - Part 2H - Section 2 - Other Liability - Claims-Made	
Schedule P - Part 2I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	
Schedule P - Part 2J - Auto Physical Damage	5
Schedule P - Part 2K - Fidelity, Surety	5
Schedule P - Part 2L - Other (Including Credit, Accident and Health)	5
Schedule P - Part 2M - International	5
Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property	
Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability	
Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines	
Schedule P - Part 2R - Section 1 - Products Liability - Occurrence	
Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made	
Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty	
Schedule P - Part 2T - Warranty	
Schedule P - Part 3A - Homeowners/Farmowners	
Schedule P - Part 3B - Private Passenger Auto Liability/Medical	
Schedule P - Part 3C - Commercial Auto/Truck Liability/Medical	
Schedule P - Part 3D - Workers' Compensation (Excluding Excess Workers' Compensation)	
Schedule P - Part 3E - Commercial Multiple Peril	6
Schedule P - Part 3F - Section 1 - Medical Professional Liability - Occurrence	
Schedule P - Part 3F - Section 2 - Medical Professional Liability - Claims-Made	
Schedule P - Part 3G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	
Schedule P - Part 3H - Section 1 - Other Liability - Occurrence	
Schedule P - Part 3H - Section 2 - Other Liability - Claims-Made	
Schedule P - Part 3I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	
Schedule P - Part 3J - Auto Physical Damage	
Schedule P - Part 3K - Fidelity/Surety	
Schedule P - Part 3L - Other (Including Credit, Accident and Health)	
Schedule P - Part 3M - International	
Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property	
Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability	
Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines	
Schedule P - Part 3R - Section 1 - Products Liability - Occurrence	
Schedule P - Part 3R - Section 2 - Products Liability - Claims-Made	
Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty	

### **ANNUAL STATEMENT BLANK (Continued)**

Schedule P - Part 4A - Homeowners/Farmowners	
Schedule P - Part 4B - Private Passenger Auto Liability/Medical	
Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical	
Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)	
Schedule P - Part 4E - Commercial Multiple Peril	
Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence	
Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made	
Schedule P - Part 4G - Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery) Schedule P - Part 4H - Section 1 - Other Liability - Occurrence	
Schedule P - Part 4H - Section 1 - Other Liability - Occurrence	
Schedule P - Part 4I - Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary and The	
Schedule P - Part 4J - Auto Physical Damage	•
Schedule P - Part 4K - Fidelity/Surety	
Schedule P - Part 4L - Other (Including Credit, Accident and Health)	
Schedule P - Part 4M - International	
Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property	
Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability	
Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines	
Schedule P - Part 4R - Section 1 - Products Liability - Occurrence	
Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made	
Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty	
Schedule P - Part 4T - Warranty	
Schedule P - Part 5A - Homeowners/Farmowners	
Schedule P - Part 5B - Private Passenger Auto Liability/Medical	
Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical	
Schedule P - Part 5D - Workers' Compensation (Excluding Excess Workers' Compensation)	
Schedule P - Part 5E - Commercial Multiple Peril	
Schedule P - Part 5F - Medical Professional Liability - Claims-Made	
Schedule P - Part 5F - Medical Professional Liability - Occurrence	
Schedule P - Part 5H - Other Liability - Claims-Made	
Schedule P - Part 5H - Other Liability - Occurrence	
Schedule P - Part 5R - Products Liability - Claims-Made	
Schedule P - Part 5R - Products Liability - Occurrence	
Schedule P - Part 5T - Warranty	
Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical	
Schedule P - Part 6D - Workers' Compensation (Excluding Excess Workers' Compensation)	
Schedule P - Part 6E - Commercial Multiple Peril	
Schedule P - Part 6H - Other Liability - Claims-Made	
Schedule P - Part 6H - Other Liability - Occurrence	
Schedule P - Part 6M - International	
Schedule P - Part 6N - Reinsurance - Nonproportional Assumed Property	
Schedule P - Part 6O - Reinsurance - Nonproportional Assumed Liability	
Schedule P - Part 6R - Products Liability - Claims-Made	
Schedule P - Part 6R - Products Liability - Occurrence Schedule P - Part 7A - Primary Loss Sensitive Contracts	
Schedule P - Part 7B - Reinsurance Loss Sensitive Contracts	
Schedule P Interrogatories	
Schedule T - Exhibit of Premiums Written	
Schedule T - Part 2 - Interstate Compact	
Schedule Y - Part 2 - Interstate Compact	
Schedule Y - Part 1A - Detail of Insurance Holding Company System	
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	
Statement of Income	
Summary Investment Schedule	
Supplemental Exhibits and Schedules Interrogatories	
Underwriting and Investment Exhibit Part 1	
Underwriting and Investment Exhibit Part 1A	
Underwriting and Investment Exhibit Part 1B	
Underwriting and Investment Exhibit Part 2	
Underwriting and Investment Exhibit Part 2A	