

**QUARTERLY STATEMENT**

**OF THE**

**ProTucket Insurance Company**

**TO THE**

**Insurance Department**

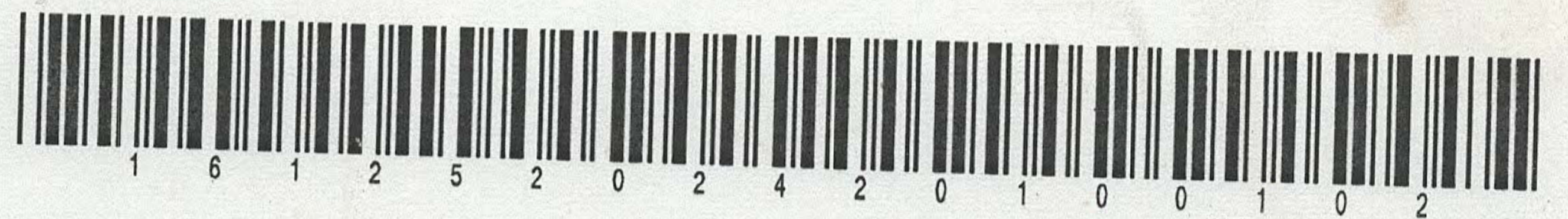
**OF THE**

**STATE OF**

**FOR THE QUARTER ENDED  
JUNE 30, 2024**

**PROPERTY AND CASUALTY**

**2024**



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# QUARTERLY STATEMENT

AS OF JUNE 30, 2024  
OF THE CONDITION AND AFFAIRS OF THE

## ProTucket Insurance Company

NAIC Group Code \_\_\_\_\_ (Current) \_\_\_\_\_ (Prior) NAIC Company Code 16125 Employer's ID Number 81-5375941

Organized under the Laws of \_\_\_\_\_ Rhode Island \_\_\_\_\_ State of Domicile or Port of Entry \_\_\_\_\_ RI

Country of Domicile \_\_\_\_\_ United States of America

Incorporated/Organized 02/24/2017 Commenced Business 03/15/2017

Statutory Home Office One Financial Plaza, Ste 2800, Westminster St Providence, RI, US 02903  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 3501 Concord Road, Suite 120 717-840-2402  
(Street and Number) (Area Code) (Telephone Number)  
York, PA, US 17402  
(City or Town, State, Country and Zip Code)

Mail Address 3501 Concord Road, Suite 120 PO Box 22008 York, PA, US 17402  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 3501 Concord Road, Suite 120 717-840-2402  
(Street and Number) (Area Code) (Telephone Number)  
York, PA, US 17402  
(City or Town, State, Country and Zip Code)

Internet Website Address \_\_\_\_\_ N/A

Statutory Statement Contact Karen Elizabeth Burmeister 717-840-2404  
(Name) (Area Code) (Telephone Number)  
Karen.Burmeister@Pro-Global.com \_\_\_\_\_  
(E-mail Address) (FAX Number)

### OFFICERS

President & CEO Marvin David Mohn Secretary Albert Bernard Miller  
Treasurer Andrew James Donnelly

### OTHER

Aaron Levine, Assistant Vice President Kristy Lovegrove, Assistant Vice President

### DIRECTORS OR TRUSTEES

Andrew James Donnelly Steve Lewis Richard Emmett  
Marvin David Mohn Julie Osborn

State of Pennsylvania SS:  
County of York

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

Marvin D. Mohn

Marvin David Mohn  
President & CEO

Albert Bernard Miller

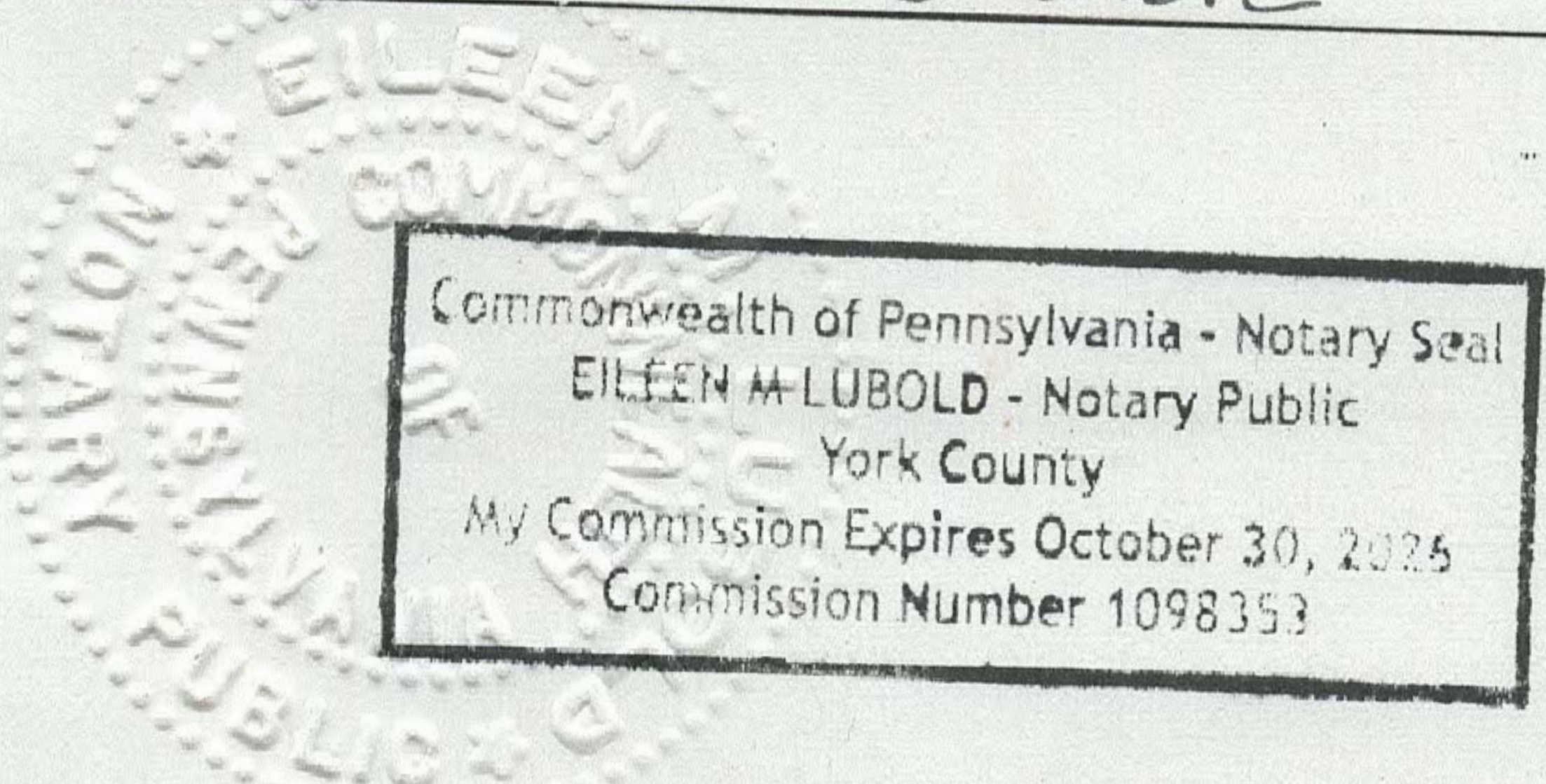
Albert Bernard Miller  
Secretary

Andrew Donnelly

Andrew Donnelly  
Treasurer

Subscribed and sworn to before me this 13th day of August 2024  
Eileen M Lubold

a. Is this an original filing? ..... Yes [ X ] No [ ]  
b. If no,  
1. State the amendment number.....  
2. Date filed .....  
3. Number of pages attached.....



STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	500,717		500,717	489,800
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....			0	0
3. Mortgage loans on real estate:				
3.1 First liens .....			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ encumbrances) .....			0	0
5. Cash (\$ ..... 6,747,758 ), cash equivalents (\$ ..... 44,056,754 ) and short-term investments (\$ ..... ) .....	50,804,512		50,804,512	54,753,140
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....			0	0
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	51,305,229	0	51,305,229	55,242,940
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	985		985	990
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....			0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	200,000
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon ....	17,782		17,782	0
18.2 Net deferred tax asset .....	13		13	13
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			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	0
23. Receivables from parent, subsidiaries and affiliates .....			0	0
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	84,929	0	84,929	115,200
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	51,408,938	0	51,408,938	55,559,143
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	51,408,938	0	51,408,938	55,559,143
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Accounts Receivable .....	84,929		84,929	115,200
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	84,929	0	84,929	115,200

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ ..... ) .....		
2. Reinsurance payable on paid losses and loss adjustment expenses .....		0
3. Loss adjustment expenses .....		
4. Commissions payable, contingent commissions and other similar charges .....		
5. Other expenses (excluding taxes, licenses and fees) .....	4,450	4,450
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....		
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses)) .....	0	268,602
7.2 Net deferred tax liability .....		
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ ..... and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ .....0 for medical loss ratio rebate per the Public Health Service Act) .....		
10. Advance premium .....		
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....		0
13. Funds held by company under reinsurance treaties .....		0
14. Amounts withheld or retained by company for account of others .....		
15. Remittances and items not allocated .....		
16. Provision for reinsurance (including \$ ..... certified) .....		0
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....		
20. Derivatives .....	0	0
21. Payable for securities .....		
22. Payable for securities lending .....		
23. Liability for amounts held under uninsured plans .....		
24. Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....	12,504,127	14,434,684
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	12,508,577	14,707,736
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	12,508,577	14,707,736
29. Aggregate write-ins for special surplus funds .....	0	0
30. Common capital stock .....	12,800,000	12,800,000
31. Preferred capital stock .....		
32. Aggregate write-ins for other than special surplus funds .....	0	0
33. Surplus notes .....		
34. Gross paid in and contributed surplus .....	25,402,000	25,402,000
35. Unassigned funds (surplus) .....	698,361	2,649,407
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... ) .....		
36.2 ..... shares preferred (value included in Line 31 \$ ..... ) .....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) .....	38,900,361	40,851,407
38. Totals (Page 2, Line 28, Col. 3)	51,408,938	55,559,143
<b>DETAILS OF WRITE-INS</b>		
2501. Accrued Expenses .....	84,929	115,200
2502. Retroactive Reinsurance Assumed .....	13,342,116	13,797,418
2503. Retroactive Reinsurance Ceded .....	(13,342,116)	(13,797,418)
2598. Summary of remaining write-ins for Line 25 from overflow page .....	12,419,198	14,319,484
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	12,504,127	14,434,684
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201. ....		0
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....	0	0
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**STATEMENT OF INCOME**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>UNDERWRITING INCOME</b>			
1. Premiums earned:			
1.1 Direct (written \$ ..... )			0
1.2 Assumed (written \$ ..... )			0
1.3 Ceded (written \$ ..... )			0
1.4 Net (written \$ ..... 0 )	0	0	0
<b>DEDUCTIONS:</b>			
2. Losses incurred (current accident year \$ ..... ):			
2.1 Direct .....			0
2.2 Assumed .....			0
2.3 Ceded .....			0
2.4 Net .....	0	0	0
3. Loss adjustment expenses incurred .....			
4. Other underwriting expenses incurred .....	96,038	115,588	196,597
5. Aggregate write-ins for underwriting deductions .....	(96,038)	32,542	(196,597)
6. Total underwriting deductions (Lines 2 through 5) .....	0	148,130	0
7. Net income of protected cells .....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7) .....	0	(148,130)	0
<b>INVESTMENT INCOME</b>			
9. Net investment income earned .....	993,405	794,698	1,792,122
10. Net realized capital gains (losses) less capital gains tax of \$ .....			
11. Net investment gain (loss) (Lines 9 + 10) .....	993,405	794,698	1,792,122
<b>OTHER INCOME</b>			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ ..... amount charged off \$ ..... ) .....	0	0	0
13. Finance and service charges not included in premiums .....			
14. Aggregate write-ins for miscellaneous income .....	0	148,064	0
15. Total other income (Lines 12 through 14) .....	0	148,064	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) .....	993,405	794,632	1,792,122
17. Dividends to policyholders .....			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17) .....	993,405	794,632	1,792,122
19. Federal and foreign income taxes incurred .....	208,615	166,873	376,345
20. Net income (Line 18 minus Line 19)(to Line 22) .....	784,790	627,759	1,415,777
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year .....	40,851,407	39,435,630	39,435,630
22. Net income (from Line 20) .....	784,790	627,759	1,415,777
23. Net transfers (to) from Protected Cell accounts .....			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....			
25. Change in net unrealized foreign exchange capital gain (loss) .....			
26. Change in net deferred income tax .....			
27. Change in nonadmitted assets .....			
28. Change in provision for reinsurance .....			0
29. Change in surplus notes .....			
30. Surplus (contributed to) withdrawn from protected cells .....			
31. Cumulative effect of changes in accounting principles .....			
32. Capital changes:			
32.1 Paid in .....			
32.2 Transferred from surplus (Stock Dividend) .....			
32.3 Transferred to surplus .....			10,300,000
33. Surplus adjustments:			
33.1 Paid in .....	0	0	(10,300,000)
33.2 Transferred to capital (Stock Dividend) .....			
33.3 Transferred from capital .....			
34. Net remittances from or (to) Home Office .....			
35. Dividends to stockholders .....	(2,735,836)		0
36. Change in treasury stock .....			0
37. Aggregate write-ins for gains and losses in surplus .....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37) .....	(1,951,046)	627,759	1,415,777
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) .....	38,900,361	40,063,389	40,851,407
<b>DETAILS OF WRITE-INS</b>			
0501. Contra Expenses .....	30,271	32,542	(20,250)
0502. Reimbursed Expenses .....	(126,309)		(176,347)
0503. ....			
0598. Summary of remaining write-ins for Line 5 from overflow page .....	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) .....	(96,038)	32,542	(196,597)
1401. Retroactive Reinsurance Assumed Loss .....	281,745	636,901	829,768
1402. Retroactive Reinsurance Ceded Gain .....	(281,745)	(636,901)	(829,768)
1403. Other Income .....	0	148,064	0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) .....	0	148,064	0
3701. ....			0
3702. Transferred from Protected Cell Enterprise .....		0	
3703. ....			
3798. Summary of remaining write-ins for Line 37 from overflow page .....	0	0	0
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above) .....	0	0	0

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	0	0	0
2. Net investment income .....	982,493	787,788	1,774,659
3. Miscellaneous income .....	0	148,064	0
4. Total (Lines 1 to 3) .....	982,493	935,852	1,774,659
5. Benefit and loss related payments .....	0	0	0
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	0	148,130	0
8. Dividends paid to policyholders .....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	494,999	125,000	175,000
10. Total (Lines 5 through 9) .....	494,999	273,130	175,000
11. Net cash from operations (Line 4 minus Line 10) .....	487,494	662,722	1,599,659
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	0	157,000	471,000
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0	0
12.7 Miscellaneous proceeds .....	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	0	157,000	471,000
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	0	166,992	480,767
13.2 Stocks .....	0	0	0
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	0
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	0	166,992	480,767
14. Net increase (or decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	0	(9,992)	(9,767)
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	2,735,836	0	0
16.6 Other cash provided (applied) .....	(1,700,286)	259,220	549,213
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	(4,436,122)	259,220	549,213
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(3,948,628)	911,950	2,139,105
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	54,753,140	52,614,035	52,614,035
19.2 End of period (Line 18 plus Line 19.1) .....	50,804,512	53,525,985	54,753,140

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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## NOTES TO FINANCIAL STATEMENTS

**NOTE 1 Summary of Significant Accounting Policies and Going Concern**
**A. Accounting Practices**

The financial statements of ProTucket Insurance Company are presented on the basis of accounting practices prescribed or permitted by the Rhode Island Insurance Department.

The Rhode Island Insurance Department recognizes only statutory accounting practices prescribed or permitted by the State of Rhode Island for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Rhode Island Insurance Law.

The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Rhode Island. The state has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. Specifically, 1) goodwill arising from the purchase of a subsidiary, controlled or affiliated entity is written off directly to surplus in the year it originates by Rhode Island domiciled companies. In NAIC SAP, goodwill in amounts not to exceed 10% of an reporting entity's capital and surplus may be capitalized and all amounts of goodwill are amortized to unrealized gains and losses on investments over periods not to exceed 10 years, and, 2) 100% of all fixed assets are admitted by Rhode Island domiciled companies. In NAIC SAP, fixed assets are not admitted. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices.

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

	SSAP #	F/S Page	F/S Line #	2024	2023
<b>NET INCOME</b>					
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 784,790	\$ 1,415,777
(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	\$ 784,790	\$ 1,415,777
<b>SURPLUS</b>					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 38,900,361	\$ 40,851,407
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 38,900,361	\$ 40,851,407

**B. Use of Estimates in the Preparation of the Financial Statements**  
 No significant changes

**C. Accounting Policy**

"(2) Basis for Bonds and Amortization Schedule  
 Bonds not backed by other loans are stated at amortized cost using the interest method."

"(6) Basis for Loan-Backed Securities and Adjustment Methodology  
 Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities except for interest only securities or securities where the yield had become negative, which are valued using the prospective method."

**D. Going Concern**  
 Not Applicable

**NOTE 2 Accounting Changes and Corrections of Errors**  
 No significant changes

**NOTE 3 Business Combinations and Goodwill**  
 No significant changes

**NOTE 4 Discontinued Operations**  
 No significant changes

**NOTE 5 Investments**
**A. Mortgage Loans, including Mezzanine Real Estate Loans**  
 Not Applicable

**B. Debt Restructuring**  
 Not Applicable

**C. Reverse Mortgages**  
 Not Applicable

**D. Loan-Backed Securities**  
 Not Applicable

**E. Dollar Repurchase Agreements and/or Securities Lending Transactions**  
 Not Applicable

**F. Repurchase Agreements Transactions Accounted for as Secured Borrowing**  
 Not Applicable

**NOTES TO FINANCIAL STATEMENTS**

- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing  
Not Applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale  
Not Applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale  
Not Applicable
- J. Real Estate  
Not Applicable
- K. Low Income Housing tax Credits (LIHTC)  
Not Applicable
- L. Restricted Assets

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6	7
	1	2	3	4	5		
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)
a. Subject to contractual obligation for which liability is not shown					\$ -		\$ -
b. Collateral held under security lending 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	\$ 4,281,306				\$ 4,281,306	\$ 4,318,256	\$ (36,950)
k. On deposit with other regulatory bodies					\$ -		\$ -
l. Pledged collateral to FHLB (including assets backing funding agreements)					\$ -		\$ -
m. Pledged as collateral not captured in other categories	\$12,391,117				\$12,391,117	\$14,315,093	\$ (1,923,976)
n. Other restricted assets					\$ -		\$ -
<b>o. Total Restricted Assets (Sum of a through n)</b>	<b>\$16,672,423</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$16,672,423</b>	<b>\$18,633,349</b>	<b>\$ (1,960,926)</b>

(a) Subset of Column 1  
(b) Subset of Column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
			10	11
	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (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		\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase 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		\$ 4,281,306	8.328%	8.328%
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)		\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories		\$12,391,117	24.103%	24.103%
n. Other restricted assets		\$ -	0.000%	0.000%
<b>o. Total Restricted Assets (Sum of a through n)</b>	<b>\$ -</b>	<b>\$16,672,423</b>	<b>32.431%</b>	<b>32.431%</b>

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



## NOTES TO FINANCIAL STATEMENTS

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)

Description of Assets	Gross (Admitted & Nonadmitted) Restricted					8	Percentage			
	Current Year						6	7	9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account (S/A) Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
Zurich American	\$10,575,902				\$10,575,902	\$14,315,093	\$(3,739,191)	\$10,575,902	20.572%	20.572%
Amer Guarantee	\$ 1,815,215				\$ 1,815,215		\$ 1,815,215	\$ 1,815,215	3.531%	3.531%
Zurich American of Illinois					\$ -		\$ -		0.000%	0.000%
<b>Total (c)</b>	<b>\$12,391,117</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$12,391,117</b>	<b>\$14,315,093</b>	<b>\$(1,923,976)</b>	<b>\$12,391,117</b>	<b>24.103%</b>	<b>24.103%</b>

(a) Subset of column 1

(b) Subset of column 3

(c) Total Line for Columns 1 through 7 should equal 5L(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)m Columns 9 through 11 respectively.

- M. Working Capital Finance Investments  
Not Applicable

- N. Offsetting and Netting of Assets and Liabilities  
Not Applicable

- O. 5GI Securities  
Not Applicable

Investment	Number of 5GI Securities		Aggregate BACV		Aggregate Fair Value	
	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
(1) Bonds - AC						
(2) Bonds - FV						
(3) LB&SS - AC						
(4) LB&SS - FV						
(5) Preferred Stock - AC						
(6) Preferred Stock - FV						
<b>(7) Total (1+2+3+4+5+6)</b>	<b>0</b>	<b>0</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

AC - Amortized Cost FV - Fair Value

- P. Short Sales  
Not Applicable

- Q. Prepayment Penalty and Acceleration Fees  
Not Applicable

- R. Reporting Entity's Share of Cash Pool by Asset Type

Asset Type	Percent Share
(1) Cash	13.0%
(2) Cash Equivalents	87.0%
(3) Short-Term Investments	
(4) Total (Must equal 100%)	100.0%

**NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies**

Not Applicable

**NOTE 7 Investment Income**

No significant changes

- C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued	Amount
1. Gross	\$ 985
2. Nonadmitted	
3. Admitted	\$ 985

- D. The aggregate deferred interest.

Aggregate Deferred Interest	Amount
	\$ -

- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.

Cumulative amounts of PIK interest included in the current principal balance	Amount
	\$ -

**NOTE 8 Derivative Instruments**

Not Applicable

**NOTE 9 Income Taxes**

Not Applicable

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

- A. Nature of the Relationship Involved

Pro US Holdings, Inc, an insurance holding company domiciled in Delaware, and the Company's sole shareholder owns all outstanding shares of the Company's stock consisting of 1,000,000 shares of common stock with a par value of \$12.80. The sole shareholder of Pro US Holdings is Pro Global Holdings Ltd, an English private limited company.

## NOTES TO FINANCIAL STATEMENTS

### B. Transactions

Effective on June 30, 2018, and following approval by the Rhode Island Insurance Department, the Company's immediate parent, Pro US Holdings, Inc. ("PH") contributed \$35,200,000 additional paid in capital to the Company. The Company subsequently attributed \$35,000,000 of the additional paid in capital to a newly formed protected cell (designated as Protected Cell Enterprise), with the \$200,000 balance of the contribution being attributed to the Company's general account.

Effective on September 30, 2019, and following approval by the Rhode Island Insurance Department of a Plan of Closure, the Company closed out Protected Cell Enterprise. As a result of the closeout of Protected Cell Enterprise, all the assets and liabilities attributed to Protected Cell Enterprise prior to the closure of the protected cell are now those of the Company as reflected in this financial statement.

PH financed the capital contribution to the Company in large part through a \$35 million Senior Secured Note (to which the Company is not a party and has no obligations) issued pursuant to a Senior Secured Note Purchase Agreement between the Company and PH, on the one hand, and the holder of the \$35 million note on the other hand. Pursuant to the terms of the Senior Secured Note Purchase Agreement, and following approval by the Rhode Island Insurance Department, the capital stock of the Company was pledged as collateral to secure the obligations of PH under the Senior Secured Note Purchase Agreement. The pledge may not be exercised without the prior approval of the Rhode Island Insurance Department. Except as subsequently described in these Notes, the Company has no material obligations in relation to the Senior Secured Note Purchase Agreement, and in particular is not a debtor under that agreement.

### C. Transactions with related party who are not reported on Schedule Y Not Applicable

### D. Amounts Due From or To Related Parties- Not Applicable

### E. Guarantees or Undertakings - Not Applicable

### F. Material Management or Service Contracts and Cost-Sharing Arrangements

The Company is a party to a service agreement with its affiliate, PRO IS, Inc. Pursuant to the service agreement, PRO IS provides professional and administrative services to the Company.

### G. Nature of the Control Relationship

ProTucket Insurance Company's sole shareholder is Pro US Holdings, a Delaware corporation. With the prior approval of the Rhode Island Insurance Department, all the voting rights connected with the Company stock are exercised by Mr. Adam Barron by means of a proxy provided by Pro US Holdings, Inc., as a result of which Mr. Barron is the Company's sole Ultimate Controlling Person.

### H. Amount Deducted from the Value of Upstream Intermediate Entity or Ultimate Parent Owned- Not Applicable

### I. Investments in SCA that Exceed 10% of Admitted Assets- Not Applicable

### J. Investments in Impaired SCAs - Not Applicable

### K. Investment in Foreign Insurance Subsidiary- Not Applicable

### L. Investment in Downstream Noninsurance Holding Company - 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

Not Applicable

### NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

Not Applicable

### NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

#### A. ProTucket is authorized to issue 100,000,000 shares of common stock with a par value of \$2.50 per share. ProTucket has 1,000,000 shares of stock outstanding. On July 19, 2020, following approval by the Rhode Island Department of Business Regulation, Insurance Division, ProTucket increased the par value of its common stock from \$1.00 per share to \$2.50 share, and the number of shares of common stock authorized from 1,000,000 to 100,000,000.

On August 15, 2023, ProTucket increased the par value of its stock from \$2.50 per share to \$12.80 per share. The change resulted in a decrease to Gross Paid In Surplus of \$10,300,000 and no change in the overall total to policyholder's surplus.

#### B. ProTucket Insurance Company has no preferred stock outstanding.

#### C. Dividend Restrictions- Not Applicable

#### D. Dates and Amounts of Dividends Paid- \$2,735,836.35 on March 26, 2024.

#### E. Profits that may be Paid as Ordinary Dividends to Stockholders- Not Applicable

#### F. Restrictions Placed on Unassigned Funds (Surplus)- Not Applicable

#### G. Amount of Advances to Surplus not Repaid - Not Applicable

#### H. Amount of Stock Held for Special Purposes- Not Applicable

#### I. Reasons for Changes in Balance of Special Surplus Funds from Prior Period- Not Applicable

## NOTES TO FINANCIAL STATEMENTS

- J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$ -
- K. The Company issued the following surplus debentures or similar obligations:  
Not applicable
- L. The impact of any restatement due to prior quasi-reorganizations is as follows:  
Not applicable
- M. Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization-Not Applicable

**NOTE 14 Liabilities, Contingencies and Assessments**  
Not applicable

**NOTE 15 Leases**  
Not applicable

**NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk**  
Not applicable

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

- B. Transfer and Servicing of Financial Assets  
Not applicable
- C. Wash Sales  
(1) Description of the Objectives Regarding These Transactions  
Not Applicable

**NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans**  
Not applicable

**NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**  
Not applicable

**NOTE 20 Fair Value Measurements**

A.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Cash Equivalent, Short Term	\$ 44,053,620				\$ 44,053,620
Bonds	\$ 500,401				\$ 500,401
Total assets at fair value/NAV	\$ 44,554,021	\$ -	\$ -	\$ -	\$ 44,554,021

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy  
Not Applicable

- B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements  
Not Applicable
- C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.  
Not Applicable
- D. Not Practicable to Estimate Fair Value  
Not Applicable
- E. NAV Practical Expedient Investments  
Not Applicable

**NOTE 21 Other Items**  
No significant changes

**NOTE 22 Events Subsequent**

Subsequent events have been considered through May 3, 2024

Type I – Recognized Subsequent Events:  
Company input

Type II – Nonrecognized Subsequent Events:  
Company input

**NOTE 23 Reinsurance**

- A. Unsecured Reinsurance Recoverables  
Not Applicable
- B. Reinsurance Recoverable in Dispute  
Not Applicable
- C. Reinsurance Assumed and Ceded  
Not Applicable
- D. Uncollectible Reinsurance  
Not Applicable
- E. Commutation of Reinsurance Reflected in Income and Expenses.  
Not Applicable

## NOTES TO FINANCIAL STATEMENTS

### F. Retroactive Reinsurance

On December 22, 2020, the Company entered into a reinsurance novation agreement to assumed reinsurance contracts totaling \$19 million in reserves from Zurich American Insurance Company, American Guarantee and Liability Insurance Company, Zurich American Insurance Company of Illinois, American Zurich Insurance Company (collectively the "Ceding Company") and with Swiss Reinsurance America Corporation as the reinsurer. Under the novation, the Company was substituted for Swiss Reinsurance America Corporation as the reinsurer.

In respect to the novation, the Company on December 22, 2020 entered into a loss portfolio transfer reinsurance agreement with Swiss Reinsurance America Corporation to ceded 100% of all reinsured liabilities assumed under the novation.

Pursuant to SSAP 62R, the novation and LPT are accounted for as retroactive reinsurance agreement as the pre-novation treatment of such assumed reinsurance contracts by the Company was accounted for as retroactive.

	Reported Company	
As:	Assumed	Ceded
a. Reserves Transferred:		
1. Initial Reserves	\$ 19,000,194	\$ 19,000,194
2. Adjustments - Prior Year (s)	\$ (5,658,078)	\$ (5,658,078)
3. Adjustments - Current Year		
4. Current Total (1+2+3)	<u>\$ 13,342,116</u>	<u>\$ 13,342,116</u>
b. Consideration Paid or Received:		
1. Initial Consideration	\$ 18,264,992	\$ 18,264,992
2. Adjustments - Prior Year (s)		
3. Adjustments - Current Year		
4. Current Total (1+2+3)	<u>\$ 18,264,992</u>	<u>\$ 18,264,992</u>
c. Paid Losses Reimbursed or Recovered:		
1. Prior Year (s)	\$ 3,269,499	\$ 3,269,499
2. Current Year		
3. Current Total (1+2)	<u>\$ 3,269,499</u>	<u>\$ 3,269,499</u>
d. Special Surplus from Retroactive Reinsurance:		
1. Initial Surplus Gain or Loss		
2. Adjustments - Prior Year (s)		
3. Adjustments - Current Year		
4. Current Year Restricted Surplus		
5. Cumulative Total Transferred to Unassigned Funds (1+2+3+4)	<u>\$ -</u>	<u>\$ -</u>

e. All cedents and reinsurers involved in all transactions included in summary totals above:

Company	Assumed Amount	Ceded Amount
Zurich American Insurance Company #16535	\$ 11,387,586	
American Guarantee and Liability Ins #26247	\$ 1,954,530	
Swiss Reinsurance America Corporation #25364		\$ 13,342,116
Total	<u>\$ 13,342,116</u>	<u>\$ 13,342,116</u>

\* Total amounts must agree with totals in a.4 above. Include the NAIC Company Code or Alien Insurer Identification Number for each insurer listed.

f. Total Paid Loss/LAE amounts recoverable (for authorized, reciprocal jurisdiction, unauthorized and certified reinsurers), any amounts more than 90 days overdue (for authorized, reciprocal jurisdiction, unauthorized and certified reinsurers), and for amounts recoverable the collateral held (for unauthorized and certified reinsurers) as respects amounts recoverable from unauthorized and certified reinsurers:

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

K. Reinsurance Credit  
Not Applicable

**NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination**  
Not Applicable

**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**

As of June 30, 2024, the Company had Net Loss and Loss Adjustment Expense Reserve activity of (\$000,000) and cedes 100% to Swiss Reinsurance America Corporation resulting in an Incurred Net Loss and Loss Adjustment Expense of \$0.

**NOTE 26 Intercompany Pooling Arrangements**  
Not Applicable

**NOTE 27 Structured Settlements**  
Not Applicable

**NOTE 28 Health Care Receivables**  
Not Applicable

## NOTES TO FINANCIAL STATEMENTS

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**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**

Not Applicable

**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 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [ X ]
- 1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [ X ]
- 2.2 If yes, date of change: .....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [ X ] No [ ]  
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [ ] No [ X ]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.  
.....
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? ..... Yes [ ] No [ X ]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. ....
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [ X ]
- 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [ X ] N/A [ ]  
If yes, attach an explanation.  
.....
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2021
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2021
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 06/30/2022
- 6.4 By what department or departments?  
Rhode Island Insurance Department .....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] N/A [ X ]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ ] No [ ] N/A [ X ]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ X ]
- 7.2 If yes, give full information:  
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.  
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [ X ]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**GENERAL INTERROGATORIES**

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [ X ] No [ ]
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain: .....
- 9.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [ X ]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s). .....
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s). .....

**FINANCIAL**

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [ X ]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ .....

**INVESTMENT**

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [ X ]
- 11.2 If yes, give full and complete information relating thereto: .....
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ .....
13. Amount of real estate and mortgages held in short-term investments: ..... \$ .....
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [ ] No [ X ]
- 14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....0	\$ .....
14.22 Preferred Stock .....	\$ .....0	\$ .....
14.23 Common Stock .....	\$ .....0	\$ .....
14.24 Short-Term Investments .....	\$ .....0	\$ .....
14.25 Mortgage Loans on Real Estate .....	\$ .....0	\$ .....
14.26 All Other .....	\$ .....0	\$ .....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) .....	\$ .....0	\$ .....0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	\$ .....	\$ .....

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [ X ]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ] N/A [ X ]  
If no, attach a description with this statement. ....
16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. .... \$ .....0
- 16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$ .....0
- 16.3 Total payable for securities lending reported on the liability page. .... \$ .....0

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company  
**GENERAL INTERROGATORIES**

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? ..... Yes [ X ] No [ ]
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
The Washington Trust Company .....	23 Broad Street, Westerly, RI 02891-1868 .....

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

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
BNY Mellon .....	240 Greenwich Trust, 4th, New York, NY 10286 .....	.....

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes [ ] No [ X ]
- 17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [ ] No [ X ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ ] No [ X ]

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

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

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

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:  
 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.  
 b. Issuer or obligor is current on all contracted interest and principal payments.  
 c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.  
 Has the reporting entity self-designated 5GI securities? ..... Yes [ ] No [ X ]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:  
 a. The security was purchased prior to January 1, 2018.  
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
 c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.  
 d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.  
 Has the reporting entity self-designated PLGI securities? ..... Yes [ ] No [ X ]

21. 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:  
 a. The shares were purchased prior to January 1, 2019.  
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
 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.  
 d. The fund only or predominantly holds bonds in its portfolio.  
 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.  
 f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.  
 Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [ X ]



# GENERAL INTERROGATORIES

## PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? ..... Yes [ ] No [ ] N/A [ X ]  
 If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? ..... Yes [ ] No [ X ]  
 If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? ..... Yes [ ] No [ X ]

3.2 If yes, give full and complete information thereto.

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? ..... Yes [ ] No [ X ]

4.2 If yes, complete the following schedule:

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

5. Operating Percentages:

5.1 A&H loss percent ..... %

5.2 A&H cost containment percent ..... %

5.3 A&H expense percent excluding cost containment expenses ..... %

6.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

6.2 If yes, please provide the amount of custodial funds held as of the reporting date ..... \$.....

6.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

6.4 If yes, please provide the balance of the funds administered as of the reporting date ..... \$.....

7. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? ..... Yes [ X ] No [ ]

7.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? ..... Yes [ ] No [ ]

### SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
<b>NONE</b>						

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company  
**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

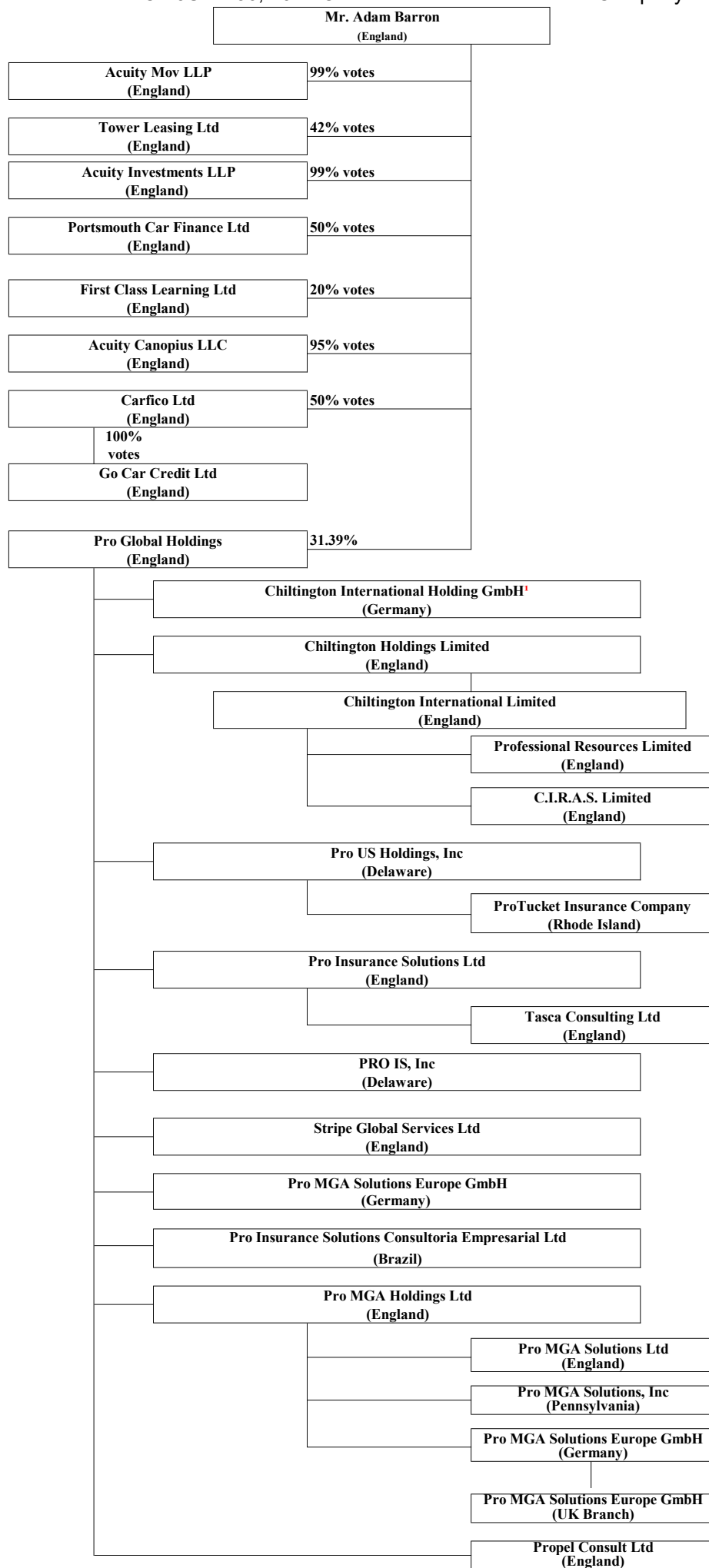
Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama ..... AL	Q						
2. Alaska ..... AK	N						
3. Arizona ..... AZ	L						
4. Arkansas ..... AR	L						
5. California ..... CA	N						
6. Colorado ..... CO	N						
7. Connecticut ..... CT	Q						
8. Delaware ..... DE	Q						
9. District of Columbia ..... DC	N						
10. Florida ..... FL	Q						
11. Georgia ..... GA	N						
12. Hawaii ..... HI	Q						
13. Idaho ..... ID	Q						
14. Illinois ..... IL	Q						
15. Indiana ..... IN	L						
16. Iowa ..... IA	N						
17. Kansas ..... KS	N						
18. Kentucky ..... KY	N						
19. Louisiana ..... LA	L						
20. Maine ..... ME	Q						
21. Maryland ..... MD	L						
22. Massachusetts ..... MA	Q						
23. Michigan ..... MI	L						
24. Minnesota ..... MN	N						
25. Mississippi ..... MS	Q						
26. Missouri ..... MO	L						
27. Montana ..... MT	L						
28. Nebraska ..... NE	Q						
29. Nevada ..... NV	L						
30. New Hampshire ..... NH	Q						
31. New Jersey ..... NJ	Q						
32. New Mexico ..... NM	N						
33. New York ..... NY	N						
34. North Carolina ..... NC	N						
35. North Dakota ..... ND	Q						
36. Ohio ..... OH	L						
37. Oklahoma ..... OK	L						
38. Oregon ..... OR	N						
39. Pennsylvania ..... PA	Q						
40. Rhode Island ..... RI	L						
41. South Carolina ..... SC	Q						
42. South Dakota ..... SD	L						
43. Tennessee ..... TN	L						
44. Texas ..... TX	L						
45. Utah ..... UT	L						
46. Vermont ..... VT	L						
47. Virginia ..... VA	N						
48. Washington ..... WA	Q						
49. West Virginia ..... WV	L						
50. Wisconsin ..... WI	Q						
51. Wyoming ..... WY	N						
52. American Samoa ..... AS	N						
53. Guam ..... GU	N						
54. Puerto Rico ..... PR	N						
55. U.S. Virgin Islands ..... VI	N						
56. Northern Mariana Islands ..... MP	N						
57. Canada ..... CAN	N						
58. Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59. Totals	XXX	0	0	0	0	0	0
DETAILS OF WRITE-INS							
58001. ....	XXX						
58002. ....	XXX						
58003. ....	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0

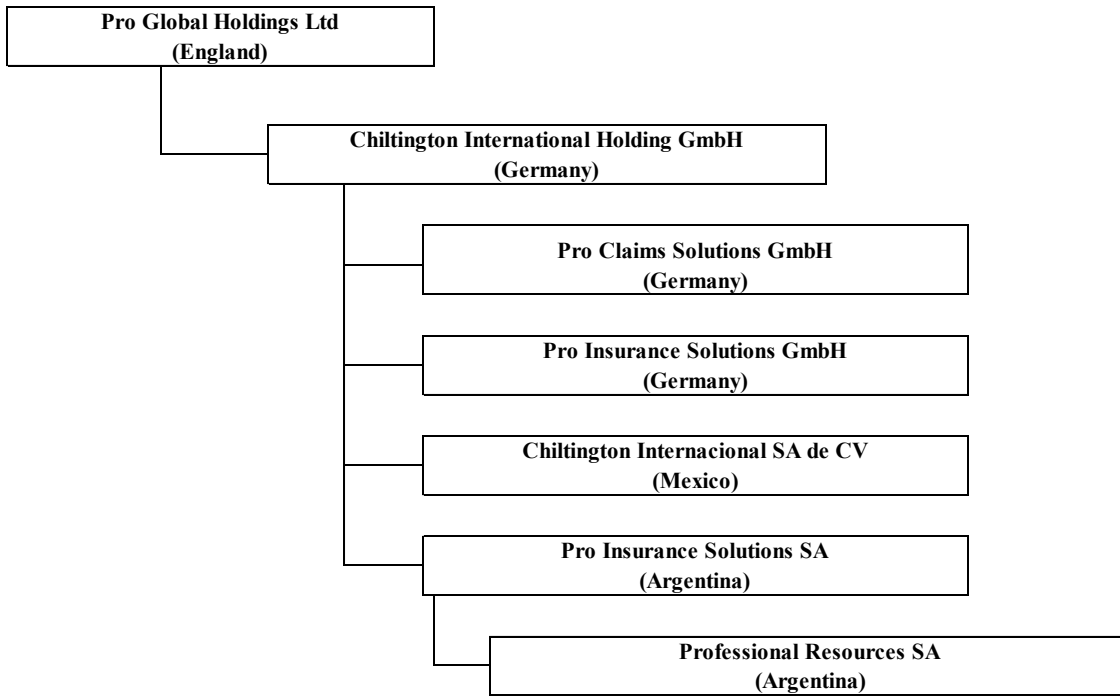
(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 18	4. Q - Qualified - Qualified or accredited reinsurer..... 18
2. R - Registered - Non-domiciled RRGs..... 0	5. D - Domestic Surplus Lines Insurer (DSL) - Reporting entities authorized to write surplus lines in the state of domicile..... 0
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)..... 0	6. N - None of the above - Not allowed to write business in the state..... 21

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company



**FN 1 - Organization Chart for Internations Chiltington HoldingsGmbH**



STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**SCHEDULE Y**  
**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0000	Pro Global Holdings Ltd						Adam Barron	.GBR	UDP	Adam Barron	Ownership		Adam Barron		
.0000	Pro Global Holdings Ltd						Pro Global Holdings Ltd	.GBR	UIP	Adam Barron	Ownership	31.390	Adam Barron		
.0000	Pro Global Holdings Ltd						Chiltington Intl Holding GmbH	.DEU	NIA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Chiltington Holdings Ltd	.GBR	NIA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Chiltington International Ltd	.GBR	NIA	Chiltington Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Professional Resources Ltd	.GBR	NIA	Chiltington International Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						C.I.R.A.S Ltd	.GBR	NIA	Chiltington International Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd		81-5261781				Pro US Holdings Inc	.DE	UDP	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd	16125	81-5375941				ProTucket Insurance Company	.RI	RE	PRO US Holdings Llc	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro Insurance Solutions Ltd	.GBR	NIA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Tasca Consulting, Ltd	.GBR	NIA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd		42-1738438				PRO IS, Inc.	.DE	NIA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Stripe Global Services Ltd	.GBR	NIA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro MGA Solutions Europe GmbH	.DEU	NIA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro Ins Solutions Consultoria Empresarial Ltd	.BRA	NIA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro MGA Holdings Ltd	.GBR	IA	Pro Global Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro MGA Solutions Inc.	.PA	IA	Pro MGA Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro MGA Solutions Ltd	.GBR	NIA	Pro MGA Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro MGA Solutions Europe GmbH	.DEU	NIA	Pro MGA Holdings Ltd	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						UK Branch Pro MGA Solutions Europe GmbH	.GBR	NIA	Pro MGA Solutions Europe GmbH	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Proel Consult Ltd	.GBR	NIA	Pro MGA Solutions Europe GmbH	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro Claim Solutions GmbH	.DEU	NIA	Chiltington International Holding GmbH	Ownership	100.000	Pro Global Holdings Ltd	NO	
.0000	Pro Global Holdings Ltd						Pro Insurance Solutions GmbH	.DEU	NIA	Chiltington International Holding GmbH	Ownership	100.000	Pro Global Holdings Ltd	NO	

Asterisk	Explanation

Part 1 - Loss Experience

**NONE**

Part 2 - Direct Premiums Written

**NONE**

Part 3 (\$000 OMITTED) - Loss and Loss Adjustment Expense Reserves Schedule

**NONE**

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

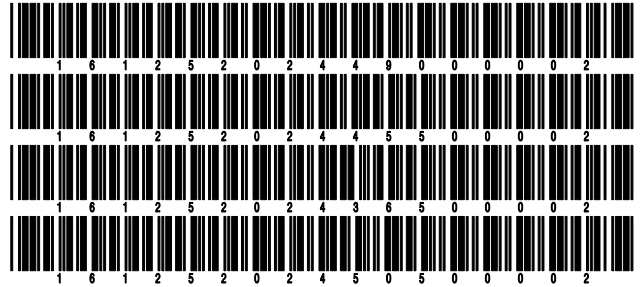
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? .....	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? .....	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....	NO
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....	NO
<b>AUGUST FILING</b>	
5. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter. ....	YES

Explanations:

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

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]
2. Supplement A to Schedule T [Document Identifier 455]
3. Medicare Part D Coverage Supplement [Document Identifier 365]
4. Director and Officer Supplement [Document Identifier 505]





**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Liabilities Line 25

	1 Current Statement Date	2 December 31, Prior Year
2504. Funds Held under Retroactive Reinsurance Treaties .....	12,391,117	14,315,093
2505. Other Liabilities .....	28,081	4,391
2597. Summary of remaining write-ins for Line 25 from overflow page	12,419,198	14,319,484

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**SCHEDULE A - VERIFICATION**

Real Estate

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

**NONE**

**SCHEDULE B - VERIFICATION**

Mortgage Loans

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

**NONE**

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

**NONE**

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	489,800	463,317
2. Cost of bonds and stocks acquired .....		480,767
3. Accrual of discount .....	10,917	16,716
4. Unrealized valuation increase/(decrease) .....		0
5. Total gain (loss) on disposals .....		0
6. Deduct consideration for bonds and stocks disposed of .....		471,000
7. Deduct amortization of premium .....		0
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	500,717	489,800
12. Deduct total nonadmitted amounts .....		0
13. Statement value at end of current period (Line 11 minus Line 12)	500,717	489,800

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a) .....	44,634,309	34,551,458	35,200,000	571,704	44,634,309	44,557,471		47,660,476
2. NAIC 2 (a) .....	0				0	0		0
3. NAIC 3 (a) .....	0				0	0		0
4. NAIC 4 (a) .....	0				0	0		0
5. NAIC 5 (a) .....	0				0	0		0
6. NAIC 6 (a) .....	0				0	0		0
7. Total Bonds	44,634,309	34,551,458	35,200,000	571,704	44,634,309	44,557,471	0	47,660,476
<b>PREFERRED STOCK</b>								
8. NAIC 1 .....	0				0	0		0
9. NAIC 2 .....	0				0	0		0
10. NAIC 3 .....	0				0	0		0
11. NAIC 4 .....	0				0	0		0
12. NAIC 5 .....	0				0	0		0
13. NAIC 6 .....	0				0	0		0
14. Total Preferred Stock .....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	44,634,309	34,551,458	35,200,000	571,704	44,634,309	44,557,471	0	47,660,476

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

NAIC 1 \$ 44,056,753 ; NAIC 2 \$ ; NAIC 3 \$ ; NAIC 4 \$ ; NAIC 5 \$ ; NAIC 6 \$

S102

Schedule DA - Part 1 - Short-Term Investments

**N O N E**

Schedule DA - Verification - Short-Term Investments

**N O N E**

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

**N O N E**

Schedule DB - Part B - Verification - Futures Contracts

**N O N E**

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

**N O N E**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

**N O N E**

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of  
Derivatives

**N O N E**

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	47,170,676	45,470,644
2. Cost of cash equivalents acquired .....	78,574,562	165,271,140
3. Accrual of discount .....	1,172,516	2,256,892
4. Unrealized valuation increase/(decrease) .....		0
5. Total gain (loss) on disposals .....		0
6. Deduct consideration received on disposals .....	82,861,000	165,828,000
7. Deduct amortization of premium .....		0
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	44,056,754	47,170,676
11. Deduct total nonadmitted amounts .....		0
12. Statement value at end of current period (Line 10 minus Line 11)	44,056,754	47,170,676

Schedule A - Part 2 - Real Estate Acquired and Additions Made

**N O N E**

Schedule A - Part 3 - Real Estate Disposed

**N O N E**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

**N O N E**

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

**N O N E**

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

**N O N E**

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

**N O N E**

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired

**N O N E**

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of

**N O N E**

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

**N O N E**

Schedule DB - Part B - Section 1 - Futures Contracts Open

**N O N E**

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

**N O N E**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

**N O N E**

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

**N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

**N O N E**

STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company

**SCHEDULE E - PART 1 - CASH**

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Citizens Bank ..... 2990 E Market Street, York, PA 17402 .....		4.250	31,146		8,470	8,470	8,488	.XXX.
Citizens Bank ..... 2990 E Market Street, York, PA 17402 .....		0.050	1,498		3,003,933	3,014,543	3,024,847	.XXX.
The Washington Trust Company #2360 ..... 23 Broad Street, Westerly, RI 22891-1868 .....	SD				113,537	114,025	114,532	.XXX.
The Washington Trust Company, #5691 ..... 23 Broad Street, Westerly, RI 22891-1868 .....					56,094	56,094	500	.XXX.
The Washington Trust Company, #5692 ..... 23 Broad Street, Westerly, RI 22891-1868 .....			12,189		95,422	95,422	669,543	.XXX.
BNY Mellon #6490 ..... 240 Greenwich St, 4th, NY, NY 10286 .....			2,313		2,383,128	2,386,653	2,390,302	.XXX.
BNY Mellon #7463 ..... 240 Greenwich St, 4th, NY, NY 10286 .....					509,929	510,684	511,464	.XXX.
The Washington Trust Company, #3360 ..... 23 Broad Street, Westerly, RI 22891-1868 .....					31,909	47,884	28,082	.XXX.
0199998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX	47,146	0	6,202,422	6,233,775	6,747,758	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	47,146	0	6,202,422	6,233,775	6,747,758	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
.....								
.....								
.....								
.....								
0599999. Total - Cash	XXX	XXX	47,146	0	6,202,422	6,233,775	6,747,758	XXX



STATEMENT AS OF JUNE 30, 2024 OF THE ProTucket Insurance Company  
**SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
	US Treasury Bills .....		06/27/2024 .....		09/24/2024 .....	30,901,846		
	US Treasury Bills .....	SD	06/27/2024 .....		09/24/2024 .....	3,865,557		
	US Treasury Bills .....		01/18/2024 .....		07/18/2024 .....	8,185,600		
	US Treasury Bills .....		01/18/2024 .....		07/18/2024 .....	1,303,751		
0019999999	Subtotal - Bonds - U.S. Governments - Issuer Obligations					44,056,754	0	0
0109999999	Total - U.S. Government Bonds					44,056,754	0	0
0309999999	Total - All Other Government Bonds					0	0	0
0509999999	Total - U.S. States, Territories and Possessions Bonds					0	0	0
0709999999	Total - U.S. Political Subdivisions Bonds					0	0	0
0909999999	Total - U.S. Special Revenues Bonds					0	0	0
1109999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
1309999999	Total - Hybrid Securities					0	0	0
1509999999	Total - Parent, Subsidiaries and Affiliates Bonds					0	0	0
1909999999	Subtotal - Unaffiliated Bank Loans					0	0	0
2419999999	Total - Issuer Obligations					44,056,754	0	0
2429999999	Total - Residential Mortgage-Backed Securities					0	0	0
2439999999	Total - Commercial Mortgage-Backed Securities					0	0	0
2449999999	Total - Other Loan-Backed and Structured Securities					0	0	0
2459999999	Total - SVO Identified Funds					0	0	0
2469999999	Total - Affiliated Bank Loans					0	0	0
2479999999	Total - Unaffiliated Bank Loans					0	0	0
2509999999	Total Bonds					44,056,754	0	0
8609999999	Total Cash Equivalents					44,056,754	0	0