



HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2014
OF THE CONDITION AND AFFAIRS OF THE

UDC Ohio, Inc.

NAIC Group Code 0019 0019 NAIC Company Code 52022 Employer's ID Number 74-2609036
(Current) (Prior)

Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio

Country of Domicile United States of America

Licensed as business type: Other

Is HMO Federally Qualified? Yes [] No []

Incorporated/Organized 04/20/1990 Commenced Business 05/17/1990

Statutory Home Office 312 Elm Street, Suite 1500, Cincinnati, OH, US 45202
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2323 Grand Boulevard
(Street and Number)
Kansas City, MO, US 64108, 816-474-2345
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 419052, Kansas City, MO, US 64141-6052
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 500 Bielenberg Drive, Suite 400
(Street and Number)
Woodbury, MN, US 55125, 651-361-5286
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address N/A

Statutory Statement Contact Amy Bronk, 651-361-5286
(Name) (Area Code) (Telephone Number)
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(E-mail Address) (FAX Number)

OFFICERS

President Stacia Nalani Almquist Treasurer Amy Jo Goerke
Secretary Kenneth Dale Bowen Actuary Eric Steven Vandenberg

OTHER

James Vernon Barrett DMD Vice President Gary Louis Lau Vice President

DIRECTORS OR TRUSTEES

Stacia Nalani Almquist

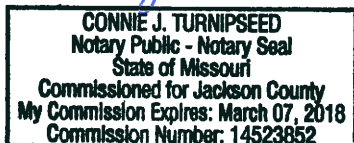
State of Missouri SS:
County of Jackson

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.

Stacia Nalani Almquist Kenneth Dale Bowen Amy Jo Goerke
President Secretary Treasurer

Subscribed and sworn to before me this 14th day of October, 2014

Connie J. Turnipseed
Connie J. Turnipseed
Notary Public
03/07/2018



- 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 SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

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	901,253		901,253	962,942
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks				
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens.....				
4. Real estate:				
4.1 Properties occupied by the company (less \$0 encumbrances)				
4.2 Properties held for the production of income (less \$0 encumbrances)				
4.3 Properties held for sale (less \$0 encumbrances)				
5. Cash (\$52,052), cash equivalents (\$) and short-term investments (\$126,822)	178,874		178,874	85,474
6. Contract loans (including \$0 premium notes)				
7. Derivatives				
8. Other invested assets				
9. Receivables for securities				
10. Securities lending reinvested collateral assets				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	1,080,127		1,080,127	1,048,416
13. Title plants less \$0 charged off (for Title insurers only)				
14. Investment income due and accrued	1,359		1,359	302
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	18,351	1,137	17,214	27,020
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)				
15.3 Accrued retrospective premiums				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers				
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon	6,855		6,855	29,267
18.2 Net deferred tax asset	4,538		4,538	5,260
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
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	22,283		22,283	21,254
24. Health care (\$0) and other amounts receivable	32,444	32,444		
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)	1,165,957	33,581	1,132,376	1,131,519
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	1,165,957	33,581	1,132,376	1,131,519
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)				
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)				

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$0 reinsurance ceded)	16,708		16,708	19,520
2. Accrued medical incentive pool and bonus amounts				
3. Unpaid claims adjustment expenses	144		144	175
4. Aggregate health policy reserves, including the liability of \$ for medical loss ratio rebate per the Public Health Service Act	18,778		18,778	22,379
5. Aggregate life policy reserves				
6. Property/casualty unearned premium reserve				
7. Aggregate health claim reserves				
8. Premiums received in advance	20,239		20,239	15,389
9. General expenses due or accrued	94,328		94,328	97,720
10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized gains (losses))				
10.2 Net deferred tax liability				
11. Ceded reinsurance premiums payable				
12. Amounts withheld or retained for the account of others				
13. Remittances and items not allocated				
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current)				
15. Amounts due to parent, subsidiaries and affiliates	117		117	417
16. Derivatives				
17. Payable for securities				
18. Payable for securities lending				
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)				
20. Reinsurance in unauthorized and certified (\$) companies				
21. Net adjustments in assets and liabilities due to foreign exchange rates				
22. Liability for amounts held under uninsured plans				
23. Aggregate write-ins for other liabilities (including \$0 current)	525		525	550
24. Total liabilities (Lines 1 to 23)	150,839		150,839	156,150
25. Aggregate write-ins for special surplus funds	XXX	XXX	15,269	
26. Common capital stock	XXX	XXX	100	100
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX	865,537	865,537
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds	XXX	XXX		
31. Unassigned funds (surplus)	XXX	XXX	100,631	109,732
32. Less treasury stock, at cost:				
32.10 shares common (value included in Line 26 \$0)	XXX	XXX		
32.20 shares preferred (value included in Line 27 \$0)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	981,537	975,369
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	1,132,376	1,131,519
DETAILS OF WRITE-INS				
2301. Unclaimed funds	525		525	550
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page				
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	525		525	550
2501. Surplus appropriated for CY ACA Section 9010 Fee	XXX	XXX	15,269	
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX		
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	15,269	
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	73,312	79,418	104,829
2. Net premium income (including \$0 non-health premium income)	XXX	706,289	754,608	1,004,058
3. Change in unearned premium reserves and reserve for rate credits	XXX	3,601	3,739	833
4. Fee-for-service (net of \$0 medical expenses)	XXX			
5. Risk revenue	XXX			
6. Aggregate write-ins for other health care related revenues	XXX			
7. Aggregate write-ins for other non-health revenues	XXX			
8. Total revenues (Lines 2 to 7)	XXX	709,890	758,347	1,004,891
Hospital and Medical:				
9. Hospital/medical benefits				
10. Other professional services		456,900	480,343	642,227
11. Outside referrals				
12. Emergency room and out-of-area				
13. Prescription drugs				
14. Aggregate write-ins for other hospital and medical				
15. Incentive pool, withhold adjustments and bonus amounts				
16. Subtotal (Lines 9 to 15)		456,900	480,343	642,227
Less:				
17. Net reinsurance recoveries				
18. Total hospital and medical (Lines 16 minus 17)		456,900	480,343	642,227
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$284 cost containment expenses		3,353	4,344	5,704
21. General administrative expenses		234,548	260,725	345,553
22. Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only)				
23. Total underwriting deductions (Lines 18 through 22)		694,801	745,412	993,484
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	15,089	12,935	11,407
25. Net investment income earned		1,201	1,540	2,057
26. Net realized capital gains (losses) less capital gains tax of \$115		158		
27. Net investment gains (losses) (Lines 25 plus 26)		1,359	1,540	2,057
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$0) (amount charged off \$0)]				
29. Aggregate write-ins for other income or expenses				
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	16,448	14,475	13,464
31. Federal and foreign income taxes incurred	XXX	10,869	6,149	(21,067)
32. Net income (loss) (Lines 30 minus 31)	XXX	5,579	8,326	34,531
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX			
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX			
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX			
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX			
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page				
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)				
2901.				
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page				
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)				

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	975,369	949,890	949,890
34. Net income or (loss) from Line 32	5,579	8,326	34,531
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ 0			
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax	(722)	(13)	(27,157)
39. Change in nonadmitted assets	1,311	17,472	18,105
40. Change in unauthorized and certified reinsurance			
41. Change in treasury stock			
42. Change in surplus notes			
43. Cumulative effect of changes in accounting principles.....			
44. Capital Changes:			
44.1 Paid in			
44.2 Transferred from surplus (Stock Dividend).....			
44.3 Transferred to surplus.....			
45. Surplus adjustments:			
45.1 Paid in			
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital			
46. Dividends to stockholders			
47. Aggregate write-ins for gains or (losses) in surplus			
48. Net change in capital & surplus (Lines 34 to 47)	6,168	25,785	25,479
49. Capital and surplus end of reporting period (Line 33 plus 48)	981,537	975,675	975,369
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page			
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)			

STATEMENT AS OF SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	719,808	758,983	1,004,305
2. Net investment income	869	1,250	2,367
3. Miscellaneous income			
4. Total (Lines 1 to 3)	720,677	760,233	1,006,672
5. Benefit and loss related payments	459,712	485,534	646,850
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	238,876	266,158	345,356
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	(11,428)	(39,770)	(3,509)
10. Total (Lines 5 through 9)	687,160	711,922	988,697
11. Net cash from operations (Line 4 minus Line 10)	33,517	48,311	17,975
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	853,268		
12.2 Stocks			
12.3 Mortgage loans			
12.4 Real estate			
12.5 Other invested assets			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
12.7 Miscellaneous proceeds			
12.8 Total investment proceeds (Lines 12.1 to 12.7)	853,268		
13. Cost of investments acquired (long-term only):			
13.1 Bonds	792,031		
13.2 Stocks			
13.3 Mortgage loans			
13.4 Real estate			
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)	792,031		
14. Net increase (or decrease) in contract loans and premium notes			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	61,237		
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes			
16.2 Capital and paid in surplus, less treasury stock			
16.3 Borrowed funds			
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders			
16.6 Other cash provided (applied)	(1,354)	4,895	(13,941)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(1,354)	4,895	(13,941)
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)	93,400	53,206	4,034
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	85,474	81,440	81,440
19.2 End of period (Line 18 plus Line 19.1)	178,874	134,646	85,474

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

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STATEMENT AS OF SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	8,481					8,481				
2. First Quarter	8,286					8,286				
3. Second Quarter	8,110					8,110				
4. Third Quarter	7,813					7,813				
5. Current Year										
6. Current Year Member Months	73,312					73,312				
Total Member Ambulatory Encounters for Period:										
7. Physician										
8. Non-Physician	985					985				
9. Total	985					985				
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (a)	706,289					706,289				
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned	709,890					709,890				
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services.....	459,712					459,712				
18. Amount Incurred for Provision of Health Care Services	456,900					456,900				

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical)						
2. Medicare Supplement						
3. Dental Only	1,395	458,317	41	16,667	1,436	19,520
4. Vision Only						
5. Federal Employees Health Benefits Plan						
6. Title XVIII - Medicare						
7. Title XIX - Medicaid						
8. Other health						
9. Health subtotal (Lines 1 to 8)	1,395	458,317	41	16,667	1,436	19,520
10. Healthcare receivables (a)						
11. Other non-health						
12. Medical incentive pools and bonus amounts						
13. Totals (Lines 9-10+11+12)	1,395	458,317	41	16,667	1,436	19,520

(a) Excludes \$ 32,444 loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of UDC Ohio, Inc. (the "Company") are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance ("DOI").

The Ohio DOI recognizes only statutory practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' ("NAIC") *Accounting Practices and Procedures Manual* ("SAP") has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. There were no differences between the Company's financial statements prepared according to the NAIC SAP or practices prescribed by the state of Ohio. 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 Ohio is shown below:

	September 30, 2014	December 31, 2013
(1) Net Income Ohio state basis	\$ 5,579	\$ 34,531
(2) State Prescribed Practices (Income) - None	-	-
(3) State Permitted Practices (Income) - None	-	-
(4) Net Income, NAIC SAP	\$ 5,579	\$ 34,531
(5) Statutory Surplus Ohio basis	\$ 981,537	\$ 975,369
(6) State Prescribed Practices (Surplus) - None	-	-
(7) State Permitted Practices (Surplus) - None	-	-
(8) Statutory Surplus, NAIC SAP	\$ 981,537	\$ 975,369

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

The preparation of financial statements in conformity with Statutory Accounting Principles 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 revenue and expense during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums billed to individual and group subscribers are recognized as revenue in the month in which subscribers are entitled to receive dental care. Uncollected premiums over 90 days past due are nonadmitted and excluded from surplus. The Company contracts with dentists (providers) for dental services to be provided to its subscribers. Provider capitation consists of monthly fees paid to providers and is expensed in the month in which the provider is obligated to render dental services. Emergency services to members while temporarily out of their provider's area, as well as specialty services not covered by capitation fees, are recorded as incurred.

2. Accounting Changes and Corrections of Errors

Accounting Changes

- A. Effective January 1, 2014, the Company adopted SSAP No. 35R, Risk Sharing Provisions of the Affordable Care Act. During the first quarter of 2014, the Company recognized full expenses of the 2013 data year for the estimated fee payable in September and established special surplus for the estimated fee payable in 2015 to the federal government by health insurers under the Affordable Care Act.
- B. Effective July 1, 2014, the Company adopted SSAP No. 106, Affordable Care Act Assessments. The Company will continue to disclose the Section 9010 ACA assessment in the subsequent event notes.

3. Business Combinations and Goodwill

No significant change.

4. Discontinued Operations

No significant change.

5. Investments

D. Loan-Backed Securities

(1) - (5) The Company does not have any loan-backed or structured securities.

E. Repurchase Agreements and/or Securities Lending Transactions

(3) The Company has not accepted any collateral that is permitted by contract or custom to sell or repledge.

I. Working Capital Finance Investments

(2) & (3) The Company has no working capital finance programs.

6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. Investment Income

No significant change.

8. Derivative Instruments

No significant change.

NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

No significant change.

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

No significant change.

11. Debt

B. FHLB (Federal Home Loan Bank) Agreements

The Company has no federal home loan bank agreements.

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

A. Defined Benefit Plan

(4) The Company has no defined benefit plan. The Company does not have employees.

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

No significant change.

14. Contingencies

No significant change.

15. Leases

No significant change.

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

No significant change.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

B. Transfer and Servicing of Financial Assets

(2) b. The Company does not have any servicing of assets or liabilities.

(4) a. & b. The Company does not have any securitizations, asset-backed financing agreements or transfers accounted for as sales where the Company has continuing involvement.

C. Wash Sales

The Company had no wash sales for the nine month period ending on September 30, 2014.

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

No significant change.

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

No significant change.

20. Fair Value Measurements

A. Assets Measured at Fair Value

(1) The Company has no financial instruments measured and reported at fair value.

C. Aggregate Fair Value Disclosures and Level Within the Fair Value Hierarchy

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Company has categorized its financial instruments into a three-level fair value hierarchy based on the priority of the inputs to the valuation technique.

The levels of the fair value hierarchy are described below:

Level 1 inputs utilize quoted prices (unadjusted) in active markets for identical financial instruments that the Company can access.

Level 2 inputs utilize other than quoted prices included in Level 1 that are observable for the financial instrument, either directly or indirectly, for substantially the full term of the financial instrument. Level 2 inputs include quoted prices for similar financial instruments in active markets, quoted prices for identical or similar financial instruments in markets that are not active and inputs other than quoted prices that are observable in the marketplace for the financial instrument. The observable inputs are used in valuation models to calculate the fair value for the financial instrument.

Level 3 inputs are unobservable but are significant to the fair value measurement for the financial instrument, and include situations where there is little, if any, market activity for the financial instrument. These inputs reflect management's own assumptions about the assumptions a market participant would use in pricing the financial instrument.

The narrative and table below provide information regarding the fair value of financial instruments.

Bonds

Fair values for bonds are based on quoted prices in active markets.

Cash and short-term investments

The reported carrying value approximates fair value because of the short maturity of the instruments.

NOTES TO FINANCIAL STATEMENTS

The following table summarizes the aggregate fair value of financial instruments and the level within the fair value hierarchy as of September 30, 2014:

Type of financial instrument	Aggregate Fair Value	Carrying Value	Level 1	Level 2
Financial assets:				
Bonds	\$ 901,637	\$ 901,253	\$ -	\$ 901,637
Cash and short-term investments	178,874	178,874	83,702	95,172
Total financial assets	<u>\$ 1,080,511</u>	<u>\$ 1,080,127</u>	<u>\$ 83,702</u>	<u>\$ 996,809</u>

The Company did not have any Level 3 financial instruments.

D. Not Practicable to Estimate Fair Value

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

21. Other Items

H. Offsetting and Netting of Assets and Liabilities

The Company has no offsetting or netting of assets and liabilities.

J. Risk Sharing Provisions of the Affordable Care Act

The Company has no risk sharing provisions for the Affordable Care Act.

22. Events Subsequent

The Company evaluated subsequent events through November 7, 2014 for the statutory statement of September 30, 2014 and determined there were none.

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

No significant change.

25. Change in Incurred Claims and Claims Adjustment Expenses

Reserves as of December 31, 2013 were \$19,695. As of September 30, 2014, \$1,408 has been paid in 2014 for incurred claims and claim adjustment expenses attributable to insured events of 2013 and prior years. Reserves remaining for prior years are now \$41 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been an \$18,246 favorable prior-year development from December 31, 2013 to September 30, 2014.

26. Intercompany Pooling Arrangements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

29. Participating Policies

No significant change.

30. Premium Deficiency Reserves

No significant change.

31. Anticipated Salvage and Subrogation

No significant change.

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 [X] No []
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
Broadtech, Inc., eMortgage Logic, LLC, and Axios Valuation Solutions, LLC were acquired. American Bankers Dominicana, S.A. was dissolved.
- 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 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? 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. 12/31/2010
- 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. 12/31/2010
- 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). 03/14/2012
- 6.4 By what department or departments?
Ohio Department of Insurance
- 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 [X] No [] N/A []
- 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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
.....				

GENERAL INTERROGATORIES

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

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 22,283

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	\$	\$
14.22 Preferred Stock	\$	\$
14.23 Common Stock	\$	\$
14.24 Short-Term Investments	\$	\$
14.25 Mortgage Loans on Real Estate	\$	\$
14.26 All Other	\$	\$
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$	\$
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []
- If no, attach a description with this statement.

GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2\$
 - 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2\$
 - 16.3 Total payable for securities lending reported on the liability page\$

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
BMO Harris Bank N.A.	111 East Kilbourn Ave., Suite 200, Milwaukee, WI 53202

- 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)
.....

- 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 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
Not a Registered Advisor	Assurant Asset Management	One Chase Manhattan Plaza, New York, NY 10005

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [X] No []

- 18.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

1.1 A&H loss percent 64.4 %

1.2 A&H cost containment percent %

1.3 A&H expense percent excluding cost containment expenses 33.4 %

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

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

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

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

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
NONE								

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status	Direct Business Only							9 Deposit-Type Contracts
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life and Annuity Premiums & Other Considerations	7 Property/Casualty Premiums	8 Total Columns 2 Through 7	
1. Alabama AL	N								
2. Alaska AK	N								
3. Arizona AZ	N								
4. Arkansas AR	N								
5. California CA	N								
6. Colorado CO	N								
7. Connecticut CT	N								
8. Delaware DE	N								
9. District of Columbia DC	N								
10. Florida FL	N								
11. Georgia GA	N								
12. Hawaii HI	N								
13. Idaho ID	N								
14. Illinois IL	N								
15. Indiana IN	N								
16. Iowa IA	N								
17. Kansas KS	N								
18. Kentucky KY	L								
19. Louisiana LA	N								
20. Maine ME	N								
21. Maryland MD	N								
22. Massachusetts MA	N								
23. Michigan MI	N								
24. Minnesota MN	N								
25. Mississippi MS	N								
26. Missouri MO	N								
27. Montana MT	N								
28. Nebraska NE	N								
29. Nevada NV	N								
30. New Hampshire NH	N								
31. New Jersey NJ	N								
32. New Mexico NM	N								
33. New York NY	N								
34. North Carolina NC	N								
35. North Dakota ND	N								
36. Ohio OH	L	706,289						706,289	
37. Oklahoma OK	N								
38. Oregon OR	N								
39. Pennsylvania PA	N								
40. Rhode Island RI	N								
41. South Carolina SC	N								
42. South Dakota SD	N								
43. Tennessee TN	N								
44. Texas TX	N								
45. Utah UT	N								
46. Vermont VT	N								
47. Virginia VA	N								
48. Washington WA	N								
49. West Virginia WV	N								
50. Wisconsin WI	N								
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 Aliens OT	XXX								
59. Subtotal	XXX	706,289						706,289	
60. Reporting Entity Contributions for Employee Benefit Plans	XXX								
61. Totals (Direct Business)	(a) 2	706,289						706,289	
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX								
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX								

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY
PART 1 - ORGANIZATIONAL CHART

Assurant, Inc.	Owns 100% of Family Considerations, Inc. Owns 100% of FamilySide, Inc. Owns 100% of Florida Office Corp. Owns 100% of GP Legacy Place, Inc. Owns 100% of Insureco, Inc. Owns 100% of Interfinancial Inc. Owns 100% of Union Security Life Insurance Company of New York	FEI 58-2315775 - GA CANADA FEI 13-3896525 - DE FEI 13-3882719 - DE FEI 33-0658229 - CA FEI 13-3036467 - GA FEI 13-2699219; NAIC 81477 - NY
Insureco, Inc.	Owns 100% of Assurant Reinsurance of Turks & Caicos, Ltd. Owns 100% of Insureco Agency & Insurance Services, Inc. (CA)	FEI 03-0387721 - TURKS & CAICOS FEI 95-3097622 - CA
Interfinancial Inc.	Owns 100% of ALOC Holdings ULC Owns 100% of American Bankers Insurance Group, Inc. Owns 100% of American Memorial Life Insurance Company Owns 100% of American Security Insurance Company Owns 100% of Denticare of Alabama, Inc. Owns 100% of Disability Reinsurance Management Services, Inc. Owns 100% of Guardian Travel, Inc. Owns 100% of John Alden Financial Corporation Owns 100% of Mortgage Group Reinsurance, Ltd. Owns 100% of Time Insurance Company Owns 100% of TrackSure Insurance Agency, Inc. Owns 100% of UDC Dental California, Inc. Owns 100% of Union Security DentalCare of Georgia, Inc. Owns 100% of Union Security Insurance Company Owns 100% of Solidify Software, LLC Owns 100% of NSM Sales Corporation Owns 100% of Blue Bananas, LLC Owns 100% of North Star Marketing Corporation Owns 100% of National Insurance Institute, LLC	CANADA FEI 59-1985922- FL FEI 46-0260270; NAIC 67989 - SD FEI 58-1529575; NAIC 42978 - DE FEI 59-3063687; NAIC 12880 - AL FEI 01-0483086 - DE FEI 59-2519974 - FL FEI 59-2840712 - DE FEI 20-0101110 - BERMUDA FEI 39-0658730; NAIC 69477 - WI FEI 33-0388029 - CA FEI 33-0360239; NAIC 52031 - CA FEI 58-1909945 - GA FEI 81-0170040; NAIC 70408 - KS FEI 45-2424030- KS FEI 65-0416844 - NV FEI 46-1896780 - WI FEI 59-2394561 - OH FEI 83-0408679 - WI
ALOC Holdings ULC	Owns 100% of Assurant Life of Canada	CANADA

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY
PART 1 - ORGANIZATIONAL CHART**

American Security Insurance Company	Owns 100% of Standard Guaranty Insurance Company	FEI 58-1529579; NAIC 42986 - DE
John Alden Financial Corporation	Owns 100% of John Alden Life Insurance Company	FEI 41-0999752; NAIC 65080 - WI
Blue Bananas, LLC	Owns 100% of WePurchit.com, LLC	FEI 46-1902739 - WI
Union Security Insurance Company	Owns 100% of Dental Health Alliance, L.L.C. Owns 100% of United Dental Care of Arizona, Inc. Owns 100% of United Dental Care of Colorado, Inc. Owns 100% of United Dental Care of Michigan, Inc. Owns 100% of United Dental Care of Missouri, Inc. Owns 100% of Union Security DentalCare of New Jersey, Inc. Owns 100% of United Dental Care of New Mexico, Inc. Owns 100% of UDC Ohio, Inc. Owns 100% of United Dental Care of Texas, Inc. Owns 100% of United Dental Care of Utah, Inc.	FEI 13-3830846 - DE FEI 86-0517444; NAIC 47708 - AZ FEI 86-0631335; NAIC 52032 - CO FEI 38-2833988; NAIC 11111 - MI FEI 75-2481527; NAIC 47044 - MO FEI 52-1565653; NAIC 11244 - NJ FEI 86-0384270; NAIC 47042 - NM FEI 74-2609036; NAIC 52022 - OH FEI 75-2076282; NAIC 95142 - TX FEI 75-2635404; NAIC 95450 - UT
American Bankers Insurance Group, Inc.	Owns 100% of ABI International Owns 100% of American Bankers Insurance Company of Florida Owns 100% of American Bankers Life Assurance Company of Florida Owns 100% of American Bankers Management Company, Inc Owns 100% of American Reliable Insurance Company Owns 100% of Assurant Service Protection, Inc. Owns 100% of Assurant Services Canada Inc. Owns 100% of Bankers Atlantic Reinsurance Company Owns 100% of Federal Warranty Service Corporation Owns 100% of Assurant New Ventures, Incorporated (fka Guardian Investment Services, Inc.) Owns 100% of Assurant Services, LLC (fka International Financial Group, Inc.) Owns 100% of MSDiversified Corp. Owns 100% of National Insurance Agency Owns 100% of Assurant Payment Services, Inc. (fka Quail Roost Properties, Inc.) Owns 51% of Signal Holdings LLC	CAYMAN ISLANDS FEI 59-0593886; NAIC 10111 - FL FEI 59-0676017; NAIC 60275 - FL FEI 65-0597010 - FL FEI 41-0735002; NAIC 19615 - AZ FEI 26-3914986 - OK CANADA FEI 98-0152782 - TURKS & CAICOS FEI 36-3596362 - IL FEI 59-2720545 - FL FEI 75-2533456 - TX FEI 64-0660045 - MS FEI 59-1357775 - FL FEI 59-1414202 - FL FEI 47-0876083 - PA

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY
PART 1 - ORGANIZATIONAL CHART

	Owns 100% of Sureway, Inc.	FEI 59-1532747 - DE
	Owns 100% of TS Holdings, Inc.	FEI 30-0080387 - DE
	Owns 100% of Voyager Group, Inc.	FEI 59-1236556 - FL
	Owns 100% of Voyager Service Warranties, Inc.	FEI 59-2675787 - FL
	Owns .01% of Cooperatieve Assurant Netherlands U.A.	NETHERLANDS
	Owns 99% of Assurant Direta Corretora de Seguros Ltda (fka Assurant Services Brasil, Limitada)	BRASIL
ABIG Holding de Espana, S.L.	Owns 96.986% of Assurant Argentina Compania de Seguros Sociedad Anonima	ARGENTINA
	Owns 95% of Assurant Services Argentina, S.A.	ARGENTINA
	Owns 99% of Assurant Holding Mexico, S. de R.L. de C.V. (fka Assurant Holding de Puerto Rico, Inc.)	MEXICO
	Owns 99% of Assurant Seguradora S.A.	BRASIL
	Owns 100% of Assurant Services de Chile, SpA	CHILE
	Owns 98% of Assurant Servicios de Mexico, S.A. de CV	MEXICO
	Owns 99% of Assurant Servicios S.A. (fka Rolim Consult S.A.)	BRASIL
	Owns 99% of Assurant Chile Compania de Seguros Generales S.A.	CHILE
ABI International	Owns 100% of Assurant Group, Limited	UNITED KINGDOM
	Owns 1% of Assurant International Division Limited	MALTA
	Owns 100% of Solutions Holdings	CAYMAN ISLANDS
	Owns 100% of Protection Holding Cayman	CAYMAN ISLANDS
American Bankers General Agency, Inc.	Controls thru a management agreement - Reliable Lloyds Insurance Company	FEI 74-2289453; NAIC 28843 - TX
American Bankers Insurance Company of Florida	Owns 100% of American Bankers General Agency, Inc.	FEI 74-2135158 - TX
Assurant International Division Limited	Owns 3.014% of Assurant Argentina Compania de Seguros Sociedad Anonima	ARGENTINA
	Owns 5% of Assurant Services Argentina, S.A.	ARGENTINA
	Owns 49% of Assurant Danos Mexico S.A.	MEXICO
	Owns 1% of Assurant Seguradora S.A.	BRASIL
	Owns 2% of Assurant Servicios de Mexico, S.A. de CV	MEXICO
	Owns 100% of Assurant Services of Puerto Rico, Inc.	FEI 66-0520042 - PR
	Owns 49% of Assurant Vida Mexico S.A.	MEXICO

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY
PART 1 - ORGANIZATIONAL CHART

	Owns 100% of ABIG Holding de Espana, S.L.	SPAIN
	Owns 1% of Assurant Servicios S.A. (fka Rolim Consult S.A.)	BRASIL
	Owns 1% of Assurant Chile Compañia de Seguros Generales S.A.	CHILE
	Owns 100% of Assurant Solutions Holding Puerto Rico, Inc.	FEI 66-0791841 - PR
	Owns 99.99% of Cooperatieve Assurant Netherlands U.A.	NETHERLANDS
Cooperatieve Assurant Netherlands U.A.		
	Owns 100% of Assurant Solutions Assistance B.V.	NETHERLANDS
Assurant Servicios de Mexico, S.A. de CV		
	Owns 1% of Assurant Holding Mexico, S. de R.L. de C.V. (fka Assurant Holding de Puerto Rico, Inc.)	MEXICO
Assurant Solutions Holding Puerto Rico, Inc.		
	Owns 74% of Caribbean American Property Insurance Company	FEI 66-0481184; NAIC 30590 - PR
	Owns 100% of Caribbean American Life Assurance Company	FEI 66-0448783; NAIC 73156 - PR
American Bankers Management Company, Inc.		
	Owns 100% of Consumer Assist Network Association, Inc.	FEI 65-0597011 - DE
	Owns 1% of Assurant Direta Corretora de Seguros Ltda (fka Assurant Services Brasil, Limitada)	BRASIL
American Reliable Insurance Company		
	Owns 100% of U.S. Insurance Services, Inc.	FEI 59-3717622 - FL
Assurant Group LTD		
	Owns 100% of Assurant Direct Limited	UNITED KINGDOM
	Owns 100% of Assurant General Insurance Limited	UNITED KINGDOM
	Owns 100% of Assurant Life Limited	UNITED KINGDOM
	Owns 100% of Assurant Services (UK) Limited	UNITED KINGDOM
	Owns 100% of Assurant Intermediary Ltd.	UNITED KINGDOM
	Owns 100% of Assurant Deutschland GmbH	GERMANY
	Owns 100% of Assurant Italia Agenzia di Assicurazioni s.r.l.	ITALY
	Owns 100% of Assurant Services Italia s.r.l.	ITALY
	Owns 100% of Assurant Solutions Spain, S.A.	SPAIN
	Owns 100% of Assurant Services Limited	IRELAND
	Owns 100% of Lifestyle Services Group Ltd.	UNITED KINGDOM

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

PART 1 - ORGANIZATIONAL CHART

Lifestyle Services Group Ltd.	<p>Owns 100% of LSG Insurance (Isle of Man Limited)</p> <p>Owns 100% of STAMS Holding Ltd.</p> <p>Owns 100% of Digital Services (UK) Ltd.</p> <p>Owns 100% of LSG España Ltd.</p> <p>Owns 100% of MobileServ 5 Ltd.</p>	<p>ISLE OF MAN</p> <p>UNITED KINGDOM</p> <p>UNITED KINGDOM</p> <p>UNITED KINGDOM</p> <p>UNITED KINGDOM</p>
STAMS Holding Ltd.	<p>Owns 100% of STAMS Ltd.</p>	<p>UNITED KINGDOM</p>
Assurant Holding Mexico, S. de R.L. de C.V.	<p>Owns 51% of Assurant Danos Mexico S.A.</p> <p>Owns 51% of Assurant Vida Mexico S.A.</p>	<p>MEXICO</p> <p>MEXICO</p>
Caribbean American Life Assurance Company	<p>Owns 26% of Caribbean American Property Insurance Company</p>	<p>FEI 66-0481184; NAIC 30590 - PR</p>
Federal Warranty Service Corporation	<p>Owns 80% of Service Delivery Advantage, LLC</p>	<p>FEI 61-1455870 - IL</p>
Assurant Services, LLC	<p>Owns 100% of Field Asset Services, LLC</p> <p>Owns 100% of StreetLinks, LLC</p> <p>Owns 100% of eMortgage Logic, LLC</p>	<p>FEI 45-3250626 - DE</p> <p>FEI 76-0787617 - IN</p> <p>FEI 75-3042604 - TX</p>
Field Asset Services, LLC	<p>Owns 100% of FAS-Nationstar, LLC</p> <p>Owns 100% of FAS - Tenant Access Utilities, LLC</p> <p>Owns 100% of FAS-OWB Utilities, LLC</p>	<p>FEI 90-0815128 - MO</p> <p>FEI 01-0933247 - TX</p> <p>FEI 80-0803912 - TX</p>
eMortgage Logic, LLC	<p>Owns 100% of Axios Valuation Solutions, LLC</p>	<p>FEI 27-1249077 - TX</p>
MS Diversified Corp.	<p>Owns 100% of United Service Protection Corporation</p> <p>Owns 100% of United Service Protection, Inc.</p>	<p>FEI 64-0906751 - DE</p> <p>FEI 59-1794848 - FL</p>

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY
PART 1 - ORGANIZATIONAL CHART

Signal Holdings LLC	Owns 99.9% of CWork Solutions, LP Owns 100% of Signal GP LLC Owns 100% of Signal Northwest LLC Owns 99.9% of The Signal LP Owns 100% of TeleCom Re, Inc. Owns 100% of Broadtech, LLC (fka Broadtech, Inc.)	FEI 04-3706805 - PA FEI 47-0876082 - DE FEI 36-4553652 - DE FEI 22-2623205 - PA FEI 23-3055804 - FL FEI 45-5303847 - TX
CWork Solutions, LP	Owns 100% of CWork Financial Management LLC	FEI 20-3810453 - DE
Signal GP LLC	Owns 0.1% of CWork Solutions, LP Owns 0.1% of The Signal LP	FEI 04-3706805 - PA FEI 22-2623205 - PA
Sureway, Inc.	Owns 100% of Assurant Consulting Company, Limited	CHINA
The Signal LP	Owns 100% of Signal Financial Management LLC	FEI 20-3810532 - DE
Telecom Re, Inc.	Owns 49% of Signal Holdings LLC	FEI 47-0876083 - PA
Voyager Group Inc.	Owns 100% of Voyager Indemnity Insurance Company	FEI 58-1455416; NAIC 40428 - GA
Solutions Holdings	Owns 100% of Solutions Cayman	CAYMAN ISLANDS
Protection Holding Cayman	Owns 99% of Assurant International Division Limited	MALTA

STATEMENT AS OF SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

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
Group Code	Group Name	NAIC Company Code	Federal 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)	*
0019	Assurant, Inc.	00000	39-1126612	3251018	0001267238	N	Assurant, Inc.	DE	UIP					
0019	Assurant, Inc.	00000	58-2315775				Family Considerations, Inc.	GA	NIA	Assurant, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					FamilySide, Inc.	CAN	NIA	Assurant, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	13-3896525				Florida Office Corp.	DE	NIA	Assurant, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	13-3882719				GP Legacy Place, Inc.	DE	NIA	Assurant, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	33-0658229	3160129			Insureco, Inc.	CA	NIA	Assurant, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	13-3036467	3160316	0001063399		Interfinancial Inc.	GA	UIP	Assurant, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	81477	13-2699219	3163335	0000914804		Union Security Life Insurance Company of New York	NY	IA	Assurant, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	03-0387721				Assurant Reinsurance of Turks & Caicos, Ltd.	TCA	IA	Insureco, Inc.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	95-3097622	3163782			Insureco Agency & Insurance Services, Inc. (CA)	CA	NIA	Insureco, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					ALOC Holdings ULC	CAN	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	59-1985922	1624878	0000350571		American Bankers Insurance Group	FL	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	67989	46-0260270	3160428			American Memorial Life Insurance Company	SD	IA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	42978	58-1529575	3160437			American Security Insurance Company	DE	IA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	12880	59-3063687	3163438			Denticare of Alabama, Inc.	AL	IA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	01-0483086	3162794			Disability Reinsurance Management Services, Inc.	DE	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	59-2519974	3164798			Guardian Travel, Inc.	FL	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	59-2840712	3163072	0000926419		John Alden Financial Corporation	DE	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	20-0101110				Mortgage Group Reinsurance, Ltd.	BMU	NIA	Interfinancial Inc.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	69477	39-0658730	3162963			Time Insurance Company	WI	IA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	33-0388029				TrackSure Insurance Agency, Inc.	CA	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	52031	33-0360239	3163559			UDC Dental California, Inc.	CA	IA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	58-1909945	3163483			Union Security DentalCare of Georgia, Inc.	GA	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	70408	81-0170040	3162785	0000823533		Union Security Insurance Company	KS	UDP	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	45-2424030				Solidify Software, LLC	KS	NIA	Interfinancial Inc.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	65-0416844				NSM Sales Corporation	NV	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	46-1896780				Blue Bananas, LLC	WI	NIA	Interfinancial Inc.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	59-2394561	1333406			North Star Marketing Corporation	OH	NIA	Interfinancial Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	83-0408679				National Insurance Institute, LLC	WI	NIA	Interfinancial Inc.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Life of Canada	CAN	IA	ALOC Holdings ULC	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	42986	58-1529579	3163278			Standard Guaranty Insurance Company	DE	IA	American Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	65080	41-0999752	1333161			John Alden Life Insurance Company	WI	IA	John Alden Financial Corporation	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	46-1902739				WePurchit.com, LLC	WI	NIA	Blue Bananas, LLC	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	13-3830846	3170315			Dental Health Alliance, L.L.C.	DE	NIA	Union Security Insurance Company	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	47708	86-0517444	3163586			United Dental Care of Arizona, Inc.	AZ	IA	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	52032	86-0631335	3163595			United Dental Care of Colorado, Inc.	CO	IA	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	11111	38-2833988	3163616			United Dental Care of Michigan, Inc.	MI	IA	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	47044	75-2481527	3163625			United Dental Care of Missouri, Inc.	MO	IA	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	11244	52-1565653	3163465			Union Security DentalCare of New Jersey, Inc.	NJ	IA	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	47042	86-0384270	3163652			United Dental Care of New Mexico, Inc.	NM	IA	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	52022	74-2609036	3163540			UDC Ohio, Inc.	OH	RE	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	95142	75-2076282	3163661			United Dental Care of Texas, Inc.	TX	IA	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	95450	75-2635404	3163698			United Dental Care of Utah, Inc.	UT	IA	Union Security Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					ABI International	CYM	NIA	American Bankers Insurance Group, Inc.	Ownership, Board	100.000	Assurant, Inc.	

STATEMENT AS OF SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

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
Group Code	Group Name	NAIC Company Code	Federal 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)	*
...0019	Assurant, Inc.	...10111	59-0593886	3056576	0000004588		American Bankers Insurance Company of Florida	...FL	...IA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...60275	59-0676017	3160400			American Bankers Life Assurance Company of Florida	...FL	...IA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	65-0597010				American Bankers Management Company, Inc.	...FL	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...19615	41-0735002	3164837			American Reliable Insurance Company	...AZ	...IA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	26-3914986				Assurant Service Protection, Inc.	...OK	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Services Canada Inc.	...CAN	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	98-0152782				Bankers Atlantic Reinsurance Company	...TCA	...IA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	36-3596362	3163193			Federal Warranty Service Corporation	...IL	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	59-2720545				Assurant New Ventures, Incorporated (fka Guardian Investment Services, Inc.)	...FL	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	75-2533456				Assurant Services, LLC (fka International Financial Group, Inc.)	...TX	...NIA	American Bankers Insurance Group, Inc.	Ownership, Management	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	64-0660045				MSDiversified Corp.	...MS	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	59-1357775				National Insurance Agency	...FL	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	59-1414202	3163223			Assurant Payment Services, Inc.	...FL	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	47-0876083				Signal Holdings LLC	...PA	...NIA	American Bankers Insurance Group, Inc.	Ownership, Management	...51.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	59-1532747				Sureway, Inc.	...DE	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	30-080387				TS Holdings, Inc.	...DE	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	59-1236556	3164707			Voyager Group, Inc.	...FL	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	59-2675787	3164686			Voyager Service Warranties, Inc.	...FL	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Cooperatieve Assurant Netherlands U.A.	...NLD	...NIA	American Bankers Insurance Group, Inc.	Ownership, Board	...0.010	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Services Brasil, Limitada to Assurant Direta Corretora de Seguros Ltda	...BRA	...NIA	American Bankers Insurance Group, Inc.	Ownership, Management	...99.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Argentina Compania de Seguros Sociedad Anonima	...ARG	...IA	ABIG Holding de Espana, S.L.	Ownership, Board	...96.986	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Services Argentina, S.A.	...ARG	...NIA	ABIG Holding de Espana, S.L.	Ownership, Board	...95.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Holding Mexico, S. de R.L. de C.V. (fka Assurant Holding de Puerto Rico, Inc.)	...MEX	...NIA	ABIG Holding de Espana, S.L.	Ownership, Board	...99.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Seguradora S.A.	...BRA	...IA	ABIG Holding de Espana, S.L.	Ownership, Board	...99.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Services de Chile, SpA	...CHL	...NIA	ABIG Holding de Espana, S.L.	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Servicios de Mexico, S.A. de CV	...MEX	...NIA	ABIG Holding de Espana, S.L.	Ownership, Board	...98.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Servicios S.A. (fka Rolim Consult S.A.)	...BRA	...NIA	ABIG Holding de Espana, S.L.	Ownership, Board	...99.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Chile Compania de Seguros Generales S.A.	...CHL	...IA	ABIG Holding de Espana, S.L.	Ownership, Board	...99.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Group, Limited	...GBR	...NIA	ABI International	Ownership, Management	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant International Division Limited (fka American Bankers International Division, Inc.)	...MLT	...NIA	ABI International	Ownership, Management	...1.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Solutions Holdings	...CYM	...NIA	ABI International	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Protection Holding Cayman	...CYM	...NIA	ABI International	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...28843	74-2289453	3163308			Reliable Lloyds Insurance Company	...TX	...IA	American Bankers General Agency, Inc.	Attorney-In-Fact	...0.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000	74-2135158	3160389			American Bankers General Agency, Inc.	...TX	...NIA	American Bankers Insurance Company of Florida	Ownership, Board	...100.000	Assurant, Inc.	
...0019	Assurant, Inc.	...00000					Assurant Argentina Compania de Seguros Sociedad Anonima	...ARG	...IA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	...3.014	Assurant, Inc.	

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STATEMENT AS OF SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

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
Group Code	Group Name	NAIC Company Code	Federal 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)	*
0019	Assurant, Inc.	00000					Assurant Services Argentina, S.A.	ARG	NIA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	5.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Danos Mexico S.A.	MEX	IA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	49.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Seguradora S.A.	BRA	IA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	1.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Servicios de Mexico, S.A. de CV	MEX	NIA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	2.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	66-0520042				Assurant Services of Puerto Rico, Inc.	PR	NIA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Vida Mexico S.A.	MEX	IA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	49.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					ABIG Holding de Espana, S.L.	ESP	NIA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Servicios S.A. (fka Rolim Consult S.A.)	BRA	NIA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	1.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Chile Compañia de Seguros Generales S.A.	CHL	IA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	1.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	66-0791841				Assurant Solutions Holding Puerto Rico, Inc.	PR	NIA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.						Cooperatieve Assurant Netherlands U.A.	NLD	NIA	Assurant International Division Limited (fka American Bankers International Division, Inc.)	Ownership, Board	99.990	Assurant, Inc.	
0019	Assurant, Inc.						Assurant Solutions Assistance B.V.	NLD	NIA	Cooperatieve Assurant Netherlands U.A.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Holding Mexico, S. de R.L. de C.V. (fka Assurant Holding de Puerto Rico, Inc.)	MEX	NIA	Assurant Servicios de Mexico, S.A. de CV	Ownership, Board	1.000	Assurant, Inc.	
0019	Assurant, Inc.	30590	66-0481184				Caribbean American Property Insurance Company	PR	IA	Assurant Solutions Holding Puerto Rico, Inc.	Ownership, Board	74.000	Assurant, Inc.	
0019	Assurant, Inc.	73156	66-0448783				Caribbean American Life Assurance Company	PR	IA	Assurant Solutions Holding Puerto Rico, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	65-0597011	3164921			Consumer Assist Network Association, Inc.	DE	NIA	American Bankers Management Company, Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Services Brasil, Limitada to Assurant Direta Corretora de Seguros Ltda	BRA	NIA	American Bankers Management Company, Inc.	Ownership, Management	1.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	59-3717622				U.S. Insurance Services, Inc.	FL	NIA	American Reliable Insurance Company	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Direct Limited	GBR	NIA	Assurant Group LTD	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant General Insurance Limited	GBR	IA	Assurant Group LTD	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Life Limited	GBR	IA	Assurant Group LTD	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Services (UK) Limited	GBR	NIA	Assurant Group LTD	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Intermediary Ltd.	GBR	NIA	Assurant Group LTD	Ownership, Management	100.000	Assurant, Inc.	

STATEMENT AS OF SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

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
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0019	Assurant, Inc.	00000					Assurant Deutschland GmbH	DEU	NIA	Assurant Group LTD	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Italia Agenzia di Assicurazioni s.r.l.	ITA	NIA	Assurant Group LTD	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Services Italia s.r.l.	ITA	NIA	Assurant Group LTD	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Solutions Spain, S.A.	ESP	NIA	Assurant Group LTD	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Services Limited	JRL	NIA	Assurant Group LTD	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.						Lifestyle Services Group Ltd.	GBR	NIA	Assurant Group LTD	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.						LSG Insurance (Isle of Man Limited)	JMN	IA	Lifestyle Services Group Ltd.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.						STAMS Holding Ltd.	GBR	NIA	Lifestyle Services Group Ltd.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.						Digital Services (UK) Ltd.	GBR	NIA	Lifestyle Services Group Ltd.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.						LSG España Ltd.	GBR	NIA	Lifestyle Services Group Ltd.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.						MobileServ 5 Ltd.	GBR	NIA	Lifestyle Services Group Ltd.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.						STAMS Ltd.	GBR	NIA	STAMS Holding Ltd.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Danos Mexico S.A.	MEX	IA	Assurant Holding Mexico, S. de R.L. de C.V. (fka Assurant Holding de Puerto Rico, Inc.)	Ownership, Board	51.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Vida Mexico S.A.	MEX	IA	Assurant Holding Mexico, S. de R.L. de C.V. (fka Assurant Holding de Puerto Rico, Inc.)	Ownership, Board	51.000	Assurant, Inc.	
0019	Assurant, Inc.	30590	66-0481184				Caribbean American Property Insurance Company	PR	IA	Caribbean American Life Assurance Company	Ownership, Board	26.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	61-1455870	3320204			Service Delivery Advantage, LLC	IL	NIA	Federal Warranty Service Corporation	Ownership, Management	80.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	45-3250626				Field Asset Services, LLC	DE	NIA	Assurant Services, LLC (fka International Financial Group, Inc.)	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	76-0787617				StreetLinks, LLC	IN	NIA	Assurant Services, LLC (fka International Financial Group, Inc.)	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	75-3042604				eMortgage Logic, LLC	TX	NIA	Assurant Services, LLC (fka International Financial Group, Inc.)	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	90-0815128				FAS - Nationstar, LLC	MO	NIA	Assurant Services, LLC (fka International Financial Group, Inc.)	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	01-0933247				FAS - Tenant Access Utilities, LLC	TX	NIA	Field Asset Services LLC	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	80-0803912				FAS - OMB Utilities, LLC	TX	NIA	Field Asset Services LLC	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	27-1249077				Axios Valuation Solutions, LLC	TX	NIA	Field Asset Services LLC	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	64-0906751	3173839			United Service Protection Corporation	DE	NIA	eMortgage Logic, LLC	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	59-1794848	3162664			United Service Protection, Inc.	FL	NIA	MS Diversified Corp.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	04-3706805				CWork Solutions, LP	PA	NIA	Signal Holdings LLC	Ownership, Management	99.900	Assurant, Inc.	
0019	Assurant, Inc.	00000	47-0876082				Signal GP LLC	DE	NIA	Signal Holdings LLC	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	36-4553652				Signal Northwest LLC	DE	NIA	Signal Holdings LLC	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	22-2623205				The Signal LP	PA	NIA	Signal Holdings LLC	Ownership, Management	99.900	Assurant, Inc.	
0019	Assurant, Inc.	00000	45-5303847				Broadtech, LLC (fka Broadtech, Inc.)	TX	NIA	Signal Holdings LLC	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	23-3055804				TeleCom Re, Inc.	FL	NIA	Signal Holdings LLC	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	20-3810453				CWork Financial Management LLC	DE	NIA	CWork Solutions, LP	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	04-3706805				CWork Solutions, LP	PA	NIA	Signal GP LLC	Ownership, Management	0.100	Assurant, Inc.	
0019	Assurant, Inc.	00000	22-2623205				The Signal LP	PA	NIA	Signal GP LLC	Ownership, Management	0.100	Assurant, Inc.	
0019	Assurant, Inc.	00000					Assurant Consulting Company, Limited.	CHN	NIA	Sureway, Inc.	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	20-3810532				Signal Financial Management LLC	DE	NIA	The Signal LP	Ownership, Management	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000	47-0876083				Signal Holdings LLC	PA	NIA	Telecom Re, Inc.	Ownership, Management	49.000	Assurant, Inc.	
0019	Assurant, Inc.	40428	58-1455416	3164716			Voyager Indemnity Insurance Company	GA	IA	Voyager Group Inc.	Ownership, Board	100.000	Assurant, Inc.	
0019	Assurant, Inc.	00000					Solutions Cayman	CYM	NIA	Solutions Holding	Ownership, Board	100.000	Assurant, Inc.	

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
Group Code	Group Name	NAIC Company Code	Federal 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)	*
0019	Assurant, Inc.	00000					Assurant International Division Limited (fka American Bankers International Division, Inc.)	MLT	NIA	Protection Holding Cayman	Ownership, Management	99.000	Assurant, Inc.	

Asterisk	Explanation

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 Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Explanation:

1. Not Applicable

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]



OVERFLOW PAGE FOR WRITE-INS

NONE

STATEMENT AS OF SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

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 points 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	962,942	962,914
2. Cost of bonds and stocks acquired	792,031	
3. Accrual of discount	67	106
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	273	
6. Deduct consideration for bonds and stocks disposed of	853,268	
7. Deduct amortization of premium	792	78
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	901,253	962,942
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	901,253	962,942

STATEMENT AS OF SEPTEMBER 30, 2014 OF THE UDC OHIO, INC.

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	998,123	90,453	60,003	(498)	1,028,432	998,123	1,028,075	1,016,238
2. NAIC 2 (a)								
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	998,123	90,453	60,003	(498)	1,028,432	998,123	1,028,075	1,016,238
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	998,123	90,453	60,003	(498)	1,028,432	998,123	1,028,075	1,016,238

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$; NAIC 2 \$; NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

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SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
9199999 Totals	126,822	xxx	126,884		15

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	53,296	21,778
2. Cost of short-term investments acquired	257,989	61,974
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals	184,401	30,456
7. Deduct amortization of premium	62	
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	126,822	53,296
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	126,822	53,296

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

Schedule E - Verification - Cash Equivalents
N O N E

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
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
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 DL - Part 1 - Reinvested Collateral Assets Owned
N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
N O N E

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due and Accrued	8 Amount Received During Year
NONE							
8699999 - Total Cash Equivalents							