



# QUARTERLY STATEMENT

As of March 31, 2019

of the Condition and Affairs of the

## Falls Lake National Insurance Company

NAIC Group Code....3494, 3494  
(Current Period) (Prior Period)

NAIC Company Code.... 31925

Employer's ID Number.... 42-1019055

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Incorporated/Organized..... February 6, 1974

Commenced Business..... February 21, 1974

Statutory Home Office

52 East Gay Street .. Columbus .. OH .. US .. 43215  
(Street and Number) (City or Town, State, Country and Zip Code)

919-882-3500  
(Area Code) (Telephone Number)

Main Administrative Office

6131 Falls of Neuse Rd., Suite 306 .. Raleigh .. NC .. US .. 27609  
(Street and Number) (City or Town, State, Country and Zip Code)

919-882-3500  
(Area Code) (Telephone Number)

Mail Address

6131 Falls of Neuse Rd., Suite 306 .. Raleigh .. NC .. US .. 27609  
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

919-882-3500  
(Area Code) (Telephone Number)

Primary Location of Books and Records

6131 Falls of Neuse Rd., Suite 306 .. Raleigh .. NC .. US .. 27609  
(Street and Number) (City or Town, State, Country and Zip Code)

919-882-3500  
(Area Code) (Telephone Number)

Internet Web Site Address

www.fallslakeins.com

(804) 281-2683

Statutory Statement Contact

Timothy S. MacAleese

(Area Code) (Telephone Number) (Extension)

(Name)

accounting@fallslakeins.com  
(E-Mail Address)

888-698-7290

(Fax Number)

### OFFICERS

Name	Title	Name	Title
1. Terence M. McCafferty	President/CEO	2. Eric F. Liland	Secretary
3. Timothy S. MacAleese	Chief Financial Officer	4. Michael E. Crow	Treasurer

Sarah C. Doran	Chairman of the Board	Dennis R. Johnson	Chief Underwriting Officer
David B. Zoffer	Senior VP and General Counsel		

### OTHER

Sarah C. Doran	Terence M. McCafferty	Michael E. Crow	Courtenay G. Warren
Jennifer E. Kish	Timothy S. MacAleese	Bhupinder S. Sodhi	Dennis R. Johnson

### DIRECTORS OR TRUSTEES

State of..... North Carolina  
County of.... Wake

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.

(Signature) Terence M. McCafferty 1. (Printed Name) President/CEO (Title)	(Signature) Eric F. Liland 2. (Printed Name) Secretary (Title)	(Signature) Timothy S. MacAleese 3. (Printed Name) Chief Financial Officer (Title)
---	--	--

Subscribed and sworn to before me  
This \_\_\_\_\_ day of \_\_\_\_\_

a. Is this an original filing?  
b. If no: 1. State the amendment number  
2. Date filed  
3. Number of pages attached

Yes [ X ] No [ ]

\_\_\_\_\_

**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.....	9,811,345		9,811,345	10,052,839
2. Stocks:				
2.1 Preferred stocks.....	1,389,023		1,389,023	1,526,637
2.2 Common stocks.....	79,074,035		79,074,035	79,292,288
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....7,813,943), cash equivalents (\$....2,844,136) and short-term investments (\$....49,687).....	10,707,766		10,707,766	8,464,805
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	100,982,169	0	100,982,169	99,336,569
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	.93,871		.93,871	.74,396
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	41,346,034	271,749	41,074,285	39,111,532
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	17,400,994	13,414	17,387,580	9,305,755
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	26,276,768		26,276,768	22,586,272
16.2 Funds held by or deposited with reinsured companies.....	244,948,886		244,948,886	234,589,963
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	.224,067
18.2 Net deferred tax asset.....	1,061,773	433,524	628,249	.728,488
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	13,051	10,000	.3,051	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	432,123,546	728,687	431,394,859	405,957,041
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	432,123,546	728,687	431,394,859	405,957,041

**DETAILS OF WRITE-INS**

1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Claim Funds on Deposit.....	10,000	10,000	0	
2502. Miscellaneous Receivable.....	3,051		3,051	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	13,051	10,000	.3,051	0

**Falls Lake National Insurance Company**  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31 Prior Year
1. Losses (current accident year \$.....0).....	13,065,241	12,722,505
2. Reinsurance payable on paid losses and loss adjustment expenses.....	17,977,791	16,684,616
3. Loss adjustment expenses.....	7,907,308	7,639,418
4. Commissions payable, contingent commissions and other similar charges.....	7,540,371	4,936,421
5. Other expenses (excluding taxes, licenses and fees).....	1,443,315	1,156,912
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	4,769,936	4,138,516
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	16,845	.....
7.2 Net deferred tax liability.....	.....	.....
8. Borrowed money \$.....0 and interest thereon \$.....0.....	.....	.....
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$....86,471,023 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	4,227,431	3,802,754
10. Advance premium.....	737,556	.....
11. Dividends declared and unpaid:	.....	.....
11.1 Stockholders.....	.....	.....
11.2 Policyholders.....	.....	.....
12. Ceded reinsurance premiums payable (net of ceding commissions).....	52,618,650	42,462,958
13. Funds held by company under reinsurance treaties.....	226,849,818	217,515,354
14. Amounts withheld or retained by company for account of others.....	(1,723)	(3,284)
15. Remittances and items not allocated.....	.....	667,162
16. Provision for reinsurance (including \$.....0 certified).....	.....	.....
17. Net adjustments in assets and liabilities due to foreign exchange rates.....	.....	.....
18. Drafts outstanding.....	.....	.....
19. Payable to parent, subsidiaries and affiliates.....	302,608	160,557
20. Derivatives.....	.....	.....
21. Payable for securities.....	.....	.....
22. Payable for securities lending.....	.....	.....
23. Liability for amounts held under uninsured plans.....	.....	.....
24. Capital notes \$.....0 and interest thereon \$.....0.....	.....	.....
25. Aggregate write-ins for liabilities.....	44,051	41,668
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	337,499,198	311,925,557
27. Protected cell liabilities.....	.....	.....
28. Total liabilities (Lines 26 and 27).....	337,499,198	311,925,557
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....	4,200,000	4,200,000
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.....	78,558,551	78,558,551
35. Unassigned funds (surplus).....	11,137,110	11,272,933
36. Less treasury stock, at cost:	.....	.....
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....	.....	.....
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....	.....	.....
37. Surplus as regards policyholders (Lines 29 to 35, less 36).....	93,895,661	94,031,484
38. Totals (Page 2, Line 28, Col. 3).....	431,394,859	405,957,041

**DETAILS OF WRITE-INS**

2501. Deferred Ceding Commission.....	44,051	41,668
2502. .....	.....	.....
2503. .....	.....	.....
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	44,051	41,668
2901. .....	.....	.....
2902. .....	.....	.....
2903. .....	.....	.....
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201. .....	.....	.....
3202. .....	.....	.....
3203. .....	.....	.....
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

# Falls Lake National 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 \$....39,041,709).....	27,361,545	17,232,717	84,423,262
1.2 Assumed..... (written \$....26,645,706).....	22,725,523	20,979,544	89,766,600
1.3 Ceded..... (written \$....62,929,186).....	47,753,516	36,702,972	165,019,370
1.4 Net..... (written \$....2,758,229).....	2,333,552	1,509,289	9,170,492
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....0):			
2.1 Direct.....	19,925,310	9,777,008	68,370,484
2.2 Assumed.....	10,260,838	8,651,972	42,933,960
2.3 Ceded.....	29,143,374	17,797,294	107,067,305
2.4 Net.....	1,042,774	631,686	4,237,139
3. Loss adjustment expenses incurred.....	831,960	495,225	2,575,196
4. Other underwriting expenses incurred.....	583,701	246,978	1,861,960
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	2,458,435	1,373,889	8,674,295
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(124,883)	135,400	496,197
<b>INVESTMENT INCOME</b>			
9. Net investment income earned.....	105,055	77,068	428,618
10. Net realized capital gains (losses) less capital gains tax of \$....(3,474).....	(13,067)		(46,564)
11. Net investment gain (loss) (Lines 9 + 10).....	91,988	77,068	382,054
<b>OTHER INCOME</b>			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$....1,295).....	(1,295)	.1	(12,620)
13. Finance and service charges not included in premiums.....	348,943	3,006	459,826
14. Aggregate write-ins for miscellaneous income.....	(309,508)	0	(401,418)
15. Total other income (Lines 12 through 14).....	38,140	3,007	45,788
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	5,245	215,475	924,039
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).....	5,245	215,475	924,039
19. Federal and foreign income taxes incurred.....	20,321	57,106	203,409
20. Net income (Line 18 minus Line 19) (to Line 22).....	(15,076)	158,369	720,630
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year.....	94,031,484	58,078,371	58,078,371
22. Net income (from Line 20).....	(15,076)	158,369	720,630
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$....0.....	(155,317)	2,040,856	(236,440)
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(21,323)	(21,796)	35,096
27. Change in nonadmitted assets.....	55,893	328,686	394,657
28. Change in provision for reinsurance.....		(0)	39,170
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.....			
33. Surplus adjustments:			
33.1 Paid in.....		24,000,000	35,000,000
33.2 Transferred to capital (Stock Dividend).....			
33.3 Transferred from capital.....			
34. Net remittances from or (to) Home Office.....			
35. Dividends to stockholders.....			
36. Change in treasury stock.....			
37. Aggregate write-ins for gains and losses in surplus.....	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37).....	(135,823)	26,506,115	35,953,113
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	93,895,661	84,584,486	94,031,484

### DETAILS OF WRITE-INS

0501.....			
0502.....			
0503.....			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0	0
1401. Miscellaneous fees.....	(309,508)		(401,418)
1402.....			
1403.....			
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	(309,508)	0	(401,418)
3701.....			
3702.....			
3703.....			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

Statement for March 31, 2019 of the **Falls Lake National 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.....	3,741,708	4,082,625	5,679,394
2. Net investment income.....	99,548	90,812	502,316
3. Miscellaneous income.....	38,137	3,007	45,788
4. Total (Lines 1 through 3).....	3,879,393	4,176,444	6,227,499
5. Benefit and loss related payments.....	13,456,282	17,208,021	34,594,705
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	(2,374,002)	312,904	(2,042,328)
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$ (2,744) tax on capital gains (losses).....	(224,065)		655,764
10. Total (Lines 5 through 9).....	10,858,216	17,520,925	33,208,141
11. Net cash from operations (Line 4 minus Line 10).....	(6,978,823)	(13,344,481)	(26,980,642)
<b>CASH FROM INVESTMENTS</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	527,680	1,083,656	7,598,936
12.2 Stocks.....	187,500		
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.....			(18)
12.7 Miscellaneous proceeds.....		2,105,000	2,500,000
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	715,180	3,188,656	10,098,918
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	303,646	1,211,113	4,232,484
13.2 Stocks.....		24,000,000	39,000,000
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).....	303,646	25,211,113	43,232,484
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).....	411,534	(22,022,457)	(33,133,566)
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....		24,000,000	35,000,000
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).....	8,810,250	15,859,950	25,517,845
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	8,810,250	39,859,950	60,517,845
<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 Line 15 plus Line 17).....	2,242,961	4,493,012	403,637
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	8,464,805	7,736,862	8,061,168
19.2 End of period (Line 18 plus Line 19.1).....	10,707,766	12,229,874	8,464,805

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

20,001			
--------	--	--	--

**NOTES TO FINANCIAL STATEMENTS****Note 1 – Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

The financial statements of Falls Lake National Insurance Company ("the Company") are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance

The Ohio Department of Insurance recognizes only statutory accounting 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 purposes of determining its solvency under the Ohio 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 Ohio. The Insurance Commissioner has the right to permit other specific practices that deviate from prescribed practices.

	SSAP #	F/S Page	F/S Line #	Current Year to Date	2018
<b>NET INCOME</b>					
(1) The Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ (15,079)	\$ 720,630
(2) State Prescribed Practice that are an increase/(decrease) from NAIC SAP				\$	\$
(3) State Permitted Practice that are an increase/(decrease) from NAIC SAP				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ (15,079)	\$ 720,630
<b>SURPLUS</b>					
(5) The Company state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 93,895,661	\$ 94,031,484
(6) State Prescribed Practice that are an increase/(decrease) from NAIC SAP				\$	\$
(7) State Permitted Practice that are an increase/(decrease) from NAIC SAP				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 93,895,661	\$ 94,031,484

**C. Accounting Policy**

(2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method  
Bonds are stated at amortized cost using the interest method.

(6) Basis for Loan-Backed Securities and Adjustment Methodology  
The Company does not have any loan-backed securities.

**D. Going Concern**

The Company does not have substantial doubt about the entity's ability to continue as a going concern.

**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****D. Loan-Backed Securities**

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

a. The aggregate amount of unrealized losses:	1. Less than 12 Months	\$
	2. 12 Months or Longer	\$ 29,802
b. The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$
	2. 12 Months or Longer	\$ 1,302,145

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

The Company's management regularly reviews the value of investments. If the value of an investment falls below its cost basis, the decline is analyzed to determine whether it is an other-than-temporary decline in value. To make this determination, the following are considered:

How long and by how much the fair value has been below its cost;

**NOTES TO FINANCIAL STATEMENTS**

The financial condition and near-term prospects of the issuer of the security, including any specific events that may affect its operations; Management's intent to hold the security long enough for it to recover its value; Any downgrades of the security by a rating agency; and Any nonpayment of scheduled interest payments.

Based on that analysis, management makes a judgment as to whether the loss is other-than-temporary. If the loss is other-than-temporary, the impairment is recognized as a realized capital loss in the Statement of Income in the period the determination is made.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions -- Not applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing -- Not applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing  
Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions  
Not applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale  
Repurchase Transaction – Cash Taker – Overview of Sale Transactions  
Not applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale  
Repurchase Transaction – Cash Provider – Overview of Sale Transactions  
Not applicable
- M. Working Capital Finance Investments -- Not applicable
- N. Offsetting and Netting of Assets and Liabilities -- Not applicable

**Note 6 – Joint Ventures, Partnerships and Limited Liability Companies**

No significant changes

**Note 7 – Investment Income**

No significant changes

**Note 8 – Derivative Instruments**

Not applicable

**Note 9 – Income Taxes**

No significant changes

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

No significant changes

**Note 11 – Debt**

- B. FHLB (Federal Home Loan Bank) Agreements

The Company does not have any FHLB (Federal Home Loan Bank) loan agreements at March 31, 2019.

**Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**

- A. Defined Benefit Plan

The Company does not have a defined benefit pension plan.

**Note 13 – Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations**

No significant changes

**Note 14 – Liabilities, Contingencies and Assessments**

No significant changes

**Note 15 – Leases**

No significant changes

**Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**

No significant changes

**NOTES TO FINANCIAL STATEMENTS****Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities****B. Transfer and Servicing of Financial Assets**

(2) Servicing Assets and Servicing Liabilities  
Not applicable

(4) Securitizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales  
Not applicable

**C. Wash Sales**

(1) Description of the Objectives Regarding These Transactions  
The Company did not enter into any wash sale transactions during 2019.

(2) The details by NAIC designation 3 or below, or unrated of securities sold during the current period and reacquired within 30 days of the sale date are:  
The Company did not enter into any wash sale transactions during 2019.

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

No significant changes

**Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**

No significant changes

**Note 20 – Fair Value Measurements****A. Fair Value Measurements**

(1) Fair Value Measurements at Reporting Date  
The Company does not have any liabilities reported at fair value at March 31, 2019

Description for Each Type of Asset or Liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
<b>Assets at Fair Value</b>					
Bonds are reported at amortized cost	\$	\$	\$	\$	\$
Preferred Stock	\$	\$ 1,389,398	\$	\$	\$ 1,389,398
Short-term investments are carried at amortized cost	\$	\$	\$	\$	\$
Cash Equivalents are carried at amortized cost	\$	\$	\$	\$	\$
<b>Total</b>	<b>\$</b>	<b>\$ 1,389,398</b>	<b>\$</b>	<b>\$</b>	<b>\$ 1,389,398</b>
<b>Liabilities at Fair Value</b>					
Not applicable	\$	\$	\$	\$	\$
<b>Total</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy  
Not applicable

(3) Policies when Transfers Between Levels are Recognized  
The Company has a policy to recognize transfers between levels at the beginning of the reporting period.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement  
See narrative above for Level 2 valuation techniques. The Company does not have any Level 3 assets.

(5) Fair Value Disclosures  
The Company does not own derivative assets or liabilities.

**B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements**

Not Applicable

**C. Fair Value Level**

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds are reported at amortized cost	\$ 9,970,014	\$ 9,811,345	\$ 3,578,699	\$ 6,391,315	\$	\$	\$
Preferred Stock	\$ 1,389,398	\$ 1,389,023	\$	\$ 1,389,398	\$	\$	\$
Short-term investments are carried at amortized cost	\$ 49,687	\$ 49,687	\$	\$ 49,687	\$	\$	\$
Cash Equivalents are carried at amortized cost	\$ 2,844,133	\$ 2,844,133	\$ 2,844,133	\$	\$	\$	\$

**D. Not Practicable to Estimate Fair Value**

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Not applicable	\$			

**NOTES TO FINANCIAL STATEMENTS****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 10, 2019 for these statutory financial statements which are to be issued on May 15, 2019. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

**Note 23 – Reinsurance**

No significant changes

**Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination****F. Risk Sharing Provisions of the Affordable Care Act**

Not applicable

**Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**

The following table provides an analysis of the change in loss and loss adjustment expense reserves net of reinsurance recoverables for the indicated periods:

	<u>03/31/2019</u>	<u>12/31/2018</u>
Reserves, Net of Reinsurance Recoverables at		
<b>Beginning of Year</b>	\$ 20,361,913	\$ 17,952,615
Add: Provision of Claims Occurring During:		
Current Year	2,034,809	7,401,361
Prior Years	(160,065)	(589,031)
Incurred Losses/Expenses	<u>1,874,744</u>	<u>6,812,330</u>
Deduct: Payments for Claims Occurring During:		
Current Year	128,735	430,925
Prior Years	1,135,372	3,972,107
	<u>1,264,107</u>	<u>4,403,032</u>
<b>Reserves, net of Reins Recoverables at End of Period</b>	<b>\$ 20,972,550</b>	<b>\$ 20,361,913</b>

Reserves for incurred losses and LAE attributable to insured events of prior years, decreased by approximately \$160,000 in 2019, resulting primarily from the other liability line of business. This change is the result of an ongoing analysis of recent development trends and additional information regarding individual claims. These results are attributable to the business retained from the intercompany reinsurance pooling agreement.

**Note 26 – Intercompany Pooling Arrangements**

No significant changes

**Note 27 – Structured Settlements**

No significant changes

**Note 28 – Health Care Receivables**

No significant changes

**Note 29 – Participating Policies**

No significant changes

**Note 30 – Premium Deficiency Reserves**

No significant changes

**Note 31 – High Deductibles**

No significant changes

**Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**

No significant changes

**Note 33 – Asbestos/Environmental Reserves**

No significant changes

**Note 34 – Subscriber Savings Accounts**

No significant changes

---

## **NOTES TO FINANCIAL STATEMENTS**

---

### **Note 35 – Multiple Peril Crop Insurance**

No significant changes

### **Note 36 – Financial Guaranty Insurance**

B. Schedule of Insured Financial Obligations at the End of the Period:

The Company does not write financial guarantee insurance contracts.

**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 [X] No [ ]

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. 1620459

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [X]  
If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.

4.2 If yes, provide name of 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 NAIC Company Code	3 State of Domicile
Name of Entity Not applicable		

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. 12/31/2014

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. 12/31/2014

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). 11/09/2015

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 [ ] 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 with 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 the 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
Not applicable					

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).

## GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES

## 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: \$ 0

## 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: \$ 0

13. Amount of real estate and mortgages held in short-term investments: \$ 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [X] No [ ]

14.2 If yes, please complete the following:

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

1	2
Prior Year End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
\$ 0	\$ 0
0	0
79,292,288	79,074,035
0	0
0	0
0	0
\$ 79,292,288	\$ 79,074,035
\$ 0	\$ 0

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.

16. For the reporting entity's security lending program, state the amount of the following as of 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

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	2
Name of Custodian(s)	Custodian Address
SunTrust Bank	P.O. Box 465, Atlanta, GA 30302

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

1	2	3
Name(s)	Location(s)	Complete Explanation(s)
Not applicable		

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 and complete information relating thereto:

1	2	3	4
Old Custodian	New Custodian	Date of Change	Reason
Not applicable			

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

1	2
Name of Firm or Individual	Affiliation
New England Asset Management, Inc.	U

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

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? 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
105900	New England Asset Management, Inc.	KUR85E5PS4GQFZTFC130	SEC	NO

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:

## **GENERAL INTERROGATORIES**

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

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 for 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]

**GENERAL INTERROGATORIES (continued)****PART 2 – PROPERTY & CASUALTY INTERROGATORIES**

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

1 Line of Business	2 Maximu m Interest	3 Disc. Rate	Total Discount				Discount Taken During Period			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
	0.000	0.000	0	0	0	0	0	0	0	
Total	XXX	XXX	0	0	0	0	0	0	0	

5. Operating Percentages:

5.1 A&H loss percent	0.000%
5.2 A&H cost containment percent	0.000%
5.3 A&H expense percent excluding cost containment expenses	0.000%

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. \$ 0

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

6.4 If yes, please provide the amount of funds administered as of the reporting date. \$ 0

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 [ ]

**Falls Lake National Insurance Company**  
**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

**NONE**

# Falls Lake National 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	L.....	264,080	147,751	114,712	16,375	1,114,498
2. Alaska.....	.AK	L.....					113,335
3. Arizona.....	.AZ	L.....	492,979	413,025	185,554	205,986	1,200,507
4. Arkansas.....	.AR	L.....	(117)	11,598	18,612	34,715	785,182
5. California.....	.CA	E.....	1,964,462				1,264,666
6. Colorado.....	.CO	L.....	5,182	10,405	45,681	75,657	459,317
7. Connecticut.....	.CT	L.....	460,739		49,886		738,057
8. Delaware.....	.DE	L.....	(1,493)	53,689	2,056	15,762	95,780
9. District of Columbia.....	.DC	L.....					3,554
10. Florida.....	.FL	L.....	525,488	2,686,506	692,126	1,284,772	8,480,334
11. Georgia.....	.GA	L.....	1,980,357	390,674	1,082,706	147,221	1,676,404
12. Hawaii.....	.HI	L.....					495,607
13. Idaho.....	.ID	L.....	3,611	17,888	89,010	91,587	800,049
14. Illinois.....	.IL	L.....	79,637	154,223	42,672	127,205	1,082,737
15. Indiana.....	.IN	L.....	178,163	64,006	19,395	66,205	343,870
16. Iowa.....	.IA	L.....		(1,576)	5,549	67,638	497,886
17. Kansas.....	.KS	L.....	3,727	1,338			7,807
18. Kentucky.....	.KY	L.....	8,562	105,587	52,882	312,664	997,852
19. Louisiana.....	.LA	L.....		52,331	35,000	245,965	1,576,915
20. Maine.....	.ME	N.....					1,019,658
21. Maryland.....	.MD	L.....	650,722	358,481	78,123	138,755	551,961
22. Massachusetts.....	.MA	L.....	492,189	357,856	78,727	65,077	977,374
23. Michigan.....	.MI	L.....	17,214,508	118,339	335,418	14,521	446,486
24. Minnesota.....	.MN	L.....	11,095	17,967	3,897		17,668
25. Mississippi.....	.MS	L.....	21,435	135,418	2,867	4,196	22,424
26. Missouri.....	.MO	L.....	38,375	47,526	22,357	.944	628,041
27. Montana.....	.MT	L.....	6,771	2,480	1,944		104,775
28. Nebraska.....	.NE	L.....		(518)	1,486	.3,344	4,326
29. Nevada.....	.NV	L.....	280,614	266,801	264,668	141,780	236,178
30. New Hampshire.....	.NH	L.....	10,482	9,569	3,000	60,166	1,376,283
31. New Jersey.....	.NJ	L.....	2,348,026	2,536,956	1,279,893	1,030,861	(13,587)
32. New Mexico.....	.NM	L.....	(3,249)	138,423	629,871	430,621	7,208,987
33. New York.....	.NY	L.....	7,129,795	9,204,443	2,408,766	1,269,919	8,768,508
34. North Carolina.....	.NC	L.....	403,848	256,890	66,603	261,124	333,933
35. North Dakota.....	.ND	L.....		(2,934)		.691	209,675
36. Ohio.....	.OH	L.....	481,957	10,412	33,138	51,411	497,904
37. Oklahoma.....	.OK	L.....		2,102		(329)	78,907
38. Oregon.....	.OR	L.....	778	2,045		208,042	169,183
39. Pennsylvania.....	.PA	L.....	1,364,186	615,910	1,075,014	985,783	3,062,589
40. Rhode Island.....	.RI	L.....	487,034	380,782	117,468	447,995	474,620
41. South Carolina.....	.SC	L.....	57,031	139,983	22,061		111,876
42. South Dakota.....	.SD	L.....	16,728	18,615			20,409
43. Tennessee.....	.TN	L.....	42,634	149,775	115,124	707,463	15,409
44. Texas.....	.TX	L.....	506,345	918,060	2,727,668	927,299	12,927,315
45. Utah.....	.UT	L.....		47,808		22,756	259,934
46. Vermont.....	.VT	L.....	1,238				78,907
47. Virginia.....	.VA	L.....	951,792	98,708	47,192	54,132	728,509
48. Washington.....	.WA	L.....	879	6,727	607	49,510	213,425
49. West Virginia.....	.WV	L.....	557,414	3,792	2,546		181,183
50. Wisconsin.....	.WI	L.....	3,705	23,974		21,084	207,463
51. Wyoming.....	.WY	L.....		1,250			(44,010)
52. American Samoa.....	.AS	N.....					(18,168)
53. Guam.....	.GU	N.....					
54. Puerto Rico.....	.PR	N.....					
55. US 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
59. Totals.....		XXX.....	39,041,709	19,975,085	11,754,279	9,588,897	115,573,531
							73,417,942

## DETAILS OF WRITE-INS

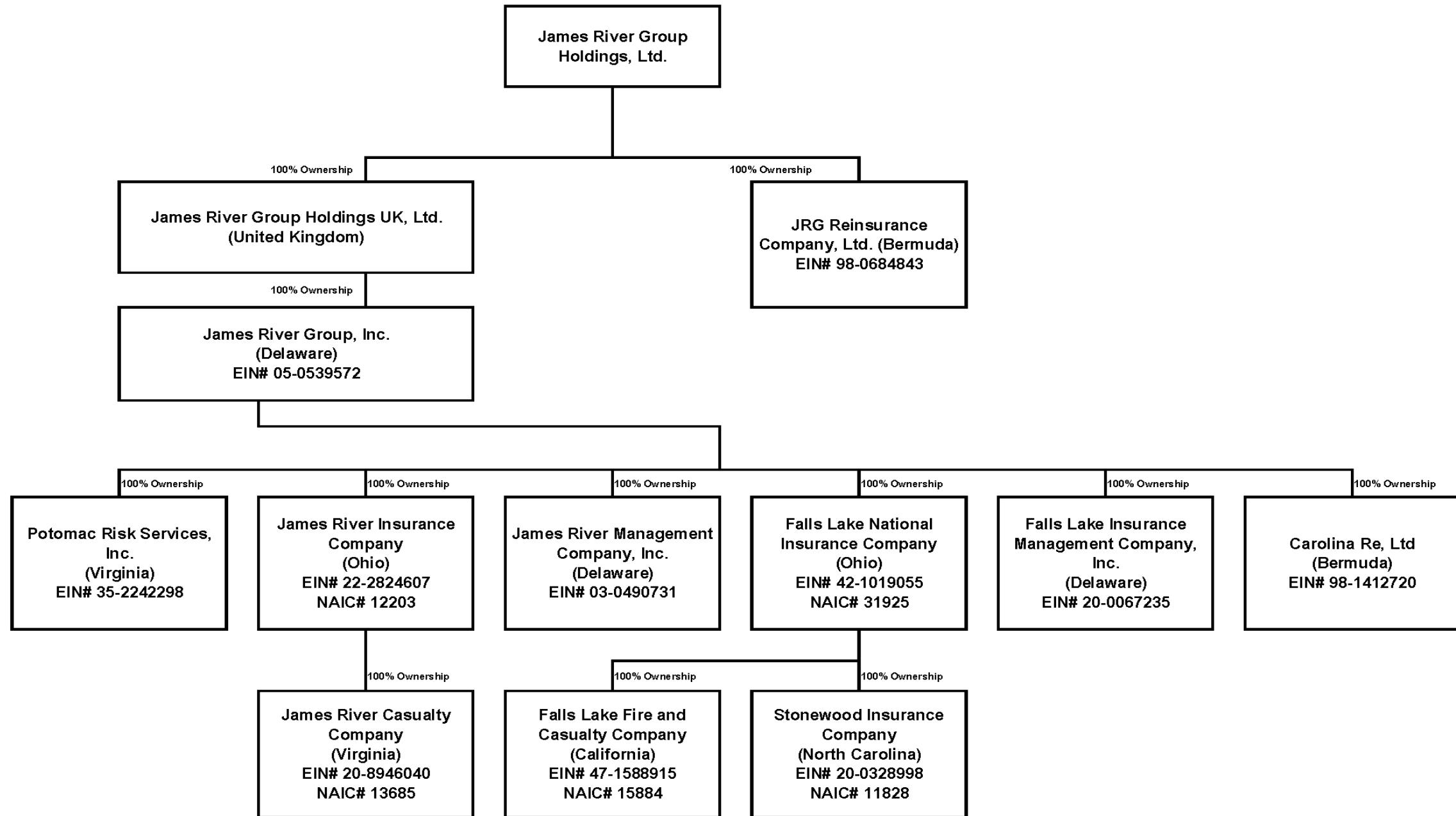
58001.....	XXX.....						
58002.....	XXX.....						
58003.....	XXX.....						
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX.....	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....	XXX.....	0	0	0	0	0	0

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	49	R - Registered - Non-domiciled RRGs.....	0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - See DSLI).....	1	Q - Qualified - Qualified or accredited reinsurer.....	0
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile.....	0	N - None of the above - Not allowed to write business in the state.....	7

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

### **PART 1 – ORGANIZATIONAL CHART**



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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required?	16 * (Y/N)
<b>Members</b>															
			98-0585280..		1620459	OQ.....	James River Group Holdings, Ltd.....	BMU.....	UIP.....						N.....
			05-0539572..				James River Group Holdings UK, Ltd.....	GBR.....	UIP.....	James River Group Holdings, Ltd.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
			98-0684843..				James River Group, Inc.....	DE.....	UIP.....	James River Group Holdings UK, Ltd.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
			98-6061023..				JRG Reinsurance Company, Ltd.....	BMU.....	IA.....	James River Group Holdings, Ltd.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
			35-2242298..				Franklin Holdings II (Bermuda) Capital Trust I ..	DE.....	NIA.....	James River Group Holdings, Ltd.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
							Potomac Risk Services Inc.....	VA.....	NIA.....	James River Group, Inc.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
3494	James River Insurance Group	12203..	22-2824607..				James River Insurance Company.....	OH.....	IA.....	James River Group, Inc.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
			03-0490731..				James River Management Company, Inc.....	DE.....	NIA.....	James River Group, Inc.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
3494	James River Insurance Group	13685..	20-8946040..				James River Casualty Company.....	VA.....	IA.....	James River Insurance Company.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
3494	James River Insurance Group	31925..	42-1019055..				Falls Lake National Insurance Company.....	OH.....	UDP.....	James River Group, Inc.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
			20-0067235..				Falls Lake Insurance Management Company, Inc	DE.....	NIA.....	James River Group, Inc.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
3494	James River Insurance Group	15884..	47-1588915..				Falls Lake Fire and Casualty Company.....	CA.....	RE.....	Falls Lake National Insurance Company.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
3494	James River Insurance Group	11828..	20-0328998..				Stonewood Insurance Company.....	NC.....	IA.....	Falls Lake National Insurance Company.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....
			98-1412720..				Carolina Re, Ltd.....	BMU.....	IA.....	James River Group Holdings, Ltd.....	Ownership.....	100.000	James River Group Holdings, Ltd.....		N.....

**Q12**

# Falls Lake National Insurance Company

## PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....	1,036	.184	17.761	58.652
2. Allied lines.....	1,411	.321	22.750	66.627
3. Farmowners multiple peril.....			0.000	
4. Homeowners multiple peril.....			0.000	
5. Commercial multiple peril.....	4,487,655	7,044,303	156.971	67.478
6. Mortgage guaranty.....			0.000	
8. Ocean marine.....			0.000	
9. Inland marine.....	116,496	(113,811)	(97.695)	24.541
10. Financial guaranty.....			0.000	
11.1 Medical professional liability - occurrence.....			0.000	
11.2 Medical professional liability - claims-made.....			0.000	
12. Earthquake.....			0.000	
13. Group accident and health.....			0.000	
14. Credit accident and health.....			0.000	
15. Other accident and health.....			0.000	
16. Workers' compensation.....	3,090,018	1,682,540	54.451	68.194
17.1 Other liability-occurrence.....	3,753,123	2,814,568	74.993	1.387
17.2 Other liability-claims made.....	80,514	91,915	114.160	47.243
17.3 Excess workers' compensation.....			0.000	
18.1 Products liability-occurrence.....	18,375	24,704	134.444	(19.087)
18.2 Products liability-claims made.....			0.000	
19.1, 19.2 Private passenger auto liability.....	8,616,745	4,335,264	50.312	
19.3, 19.4 Commercial auto liability.....	5,345,567	3,674,863	68.746	81.284
21. Auto physical damage.....	1,807,966	371,889	20.569	59.485
22. Aircraft (all perils).....			0.000	
23. Fidelity.....			0.000	
24. Surety.....			0.000	
26. Burglary and theft.....			0.000	
27. Boiler and machinery.....	42,638	(1,430)	(3.354)	19.954
28. Credit.....			0.000	
29. International.....			0.000	
30. Warranty.....			0.000	
31. Reinsurance-nonproportional assumed property.....	XXX.....	XXX.....	XXX.....	XXX.....
32. Reinsurance-nonproportional assumed liability.....	XXX.....	XXX.....	XXX.....	XXX.....
33. Reinsurance-nonproportional assumed financial lines.....	XXX.....	XXX.....	XXX.....	XXX.....
34. Aggregate write-ins for other lines of business.....	0	0	0.000	
35. Totals.....	27,361,544	19,925,310	72.822	56.735

## DETAILS OF WRITE-INS

3401. ....			0.000	
3402. ....			0.000	
3403. ....			0.000	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.000	XXX.....
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0.000	

## PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
			4 Current Year to Date
1. Fire.....			
2. Allied lines.....			
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....		5,235,025	5,235,025
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....		136,806	136,806
10. Financial guaranty.....			
11.1 Medical professional liability - occurrence.....			
11.2 Medical professional liability - claims made.....			
12. Earthquake.....			
13. Group accident and health.....			
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....		3,376,800	3,376,800
17.1 Other liability-occurrence.....		2,121,819	2,121,819
17.2 Other liability-claims made.....		10,922	10,922
17.3 Excess workers' compensation.....			
18.1 Products liability-occurrence.....		19,429	19,429
18.2 Products liability-claims made.....			
19.1, 19.2 Private passenger auto liability.....		17,865,549	17,865,549
19.3, 19.4 Commercial auto liability.....		8,116,031	8,116,031
21. Auto physical damage.....		2,083,032	2,083,032
22. Aircraft (all perils).....			
23. Fidelity.....			
24. Surety.....			
26. Burglary and theft.....			
27. Boiler and machinery.....		76,296	76,296
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....		XXX.....	XXX.....
32. Reinsurance-nonproportional assumed liability.....		XXX.....	XXX.....
33. Reinsurance-nonproportional assumed financial lines.....		XXX.....	XXX.....
34. Aggregate write-ins for other lines of business.....		0	0
35. Totals.....		39,041,709	39,041,709

## DETAILS OF WRITE-INS

3401. ....			
3402. ....			
3403. ....			
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	0	0

### **PART 3 (000 omitted)**

## LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

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

**Explanation:**

1. The data for this supplement is not required to be filed.
2. The data for this supplement is not required to be filed.
3. The data for this supplement is not required to be filed.
4. The data for this supplement is not required to be filed.

**Bar Code:**

**NONE**

Statement for March 31, 2019 of the **Falls Lake National 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.....	.....0	.....
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 end of current period (Lines 1+2+3+4-5+6-7-8)	.....0	.....0
10. Deduct total nonadmitted amounts.....	.....	.....
11. Statement value at end of current period (Line 9 minus Line 10).....	.....0	.....0

**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.....	.....0	.....
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).....	.....0	.....0
12. Total valuation allowance.....	.....	.....
13. Subtotal (Line 11 plus Line 12).....	.....0	.....0
14. Deduct total nonadmitted amounts.....	.....	.....
15. Statement value at end of current period (Line 13 minus Line 14).....	.....0	.....0

**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.....	.....0	.....
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).....	.....0	.....0
12. Deduct total nonadmitted amounts.....	.....	.....
13. Statement value at end of current period (Line 11 minus Line 12).....	.....0	.....0

**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.....	.....90,871,766	.....55,606,890
2. Cost of bonds and stocks acquired.....	.....303,646	.....43,232,484
3. Accrual of discount.....	.....1,409	.....9,529
4. Unrealized valuation increase (decrease).....	.....(155,317)	.....(256,391)
5. Total gain (loss) on disposals.....	.....(16,541)	.....(58,922)
6. Deduct consideration for bonds and stocks disposed of.....	.....715,180	.....7,598,936
7. Deduct amortization of premium.....	.....15,377	.....62,888
8. Total foreign exchange change in book/adjusted carrying value.....	.....	.....
9. Deduct current year's other-than-temporary impairment recognized.....	.....	.....
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....	.....	.....
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	.....90,274,406	.....90,871,766
12. Deduct total nonadmitted amounts.....	.....	.....
13. Statement value at end of current period (Line 11 minus Line 12).....	.....90,274,406	.....90,871,766

**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).....	9,802,837	353,322	531,170	(13,958)	9,611,031			9,802,837
2. NAIC 2 (a).....	250,000				250,000			250,000
3. NAIC 3 (a).....					0			
4. NAIC 4 (a).....					0			
5. NAIC 5 (a).....					0			
6. NAIC 6 (a).....					0			
7. Total Bonds.....	10,052,837	353,322	531,170	(13,958)	9,861,031	0	0	10,052,837
<b>PREFERRED STOCK</b>								
8. NAIC 1.....	183,440			12,960	196,400			183,440
9. NAIC 2.....	963,322			29,576	992,898			963,322
10. NAIC 3.....	379,875		200,550	20,400	199,725			379,875
11. NAIC 4.....					0			
12. NAIC 5.....					0			
13. NAIC 6.....					0			
14. Total Preferred Stock.....	1,526,637	0	200,550	62,936	1,389,023	0	0	1,526,637
15. Total Bonds and Preferred Stock.....	11,579,474	353,322	731,720	48,978	11,250,054	0	0	11,579,474

(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 \$.....49,687; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

**Falls Lake National Insurance Company**  
**SCHEDULE DA - PART 1**

## Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....	49,687	XXX.....	49,677		

**SCHEDULE DA - VERIFICATION**

## Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	299,727
2. Cost of short-term investments acquired.....	49,677	2,502,121
3. Accrual of discount.....	10	9,495
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		(17)
6. Deduct consideration received on disposals.....		2,811,326
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	49,687	0
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	49,687	0

**Sch. DB - Pt. A - Verification**  
**NONE**

**Sch. DB - Pt. B - Verification**  
**NONE**

**Sch. DB - Pt. C - Sn. 1**  
**NONE**

**Sch. DB - Pt. C - Sn. 2**  
**NONE**

**Sch. DB - Verification**  
**NONE**

**SCHEDULE E - PART 2 - VERIFICATION**

## Cash Equivalents

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	2,389,163	310,627
2. Cost of cash equivalents acquired.....	6,861,668	35,177,136
3. Accrual of discount.....		425
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		(1)
6. Deduct consideration received on disposals.....	6,406,695	33,099,024
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/ adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	2,844,136	2,389,163
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	2,844,136	2,389,163

**Sch. A Pt. 2**  
**NONE**

**Sch. A Pt. 3**  
**NONE**

**Sch. B - Pt. 2**  
**NONE**

**Sch. B - Pt. 3**  
**NONE**

**Sch. BA - Pt. 2**  
**NONE**

**Sch. BA - Pt. 3**  
**NONE**

**SCHEDULE D - PART 3**

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation and Administrative Symbol/Market Indicator (a)
<b>Bonds - U.S. Government</b>									
912828 4Z 0	UNITED STATES TREASURY NOTE.....		02/19/2019.....	JP MORGAN SECURITIES INC.....		303,646	300,000	3,943	1.....
0599999.	Total - Bonds - U.S. Government.....					303,646	300,000	3,943	XXX.....
8399997.	Total - Bonds - Part 3.....					303,646	300,000	3,943	XXX.....
8399999.	Total - Bonds.....					303,646	300,000	3,943	XXX.....
9999999.	Total - Bonds, Preferred and Common Stocks.....					303,646	XXX	3,943	XXX.....

(a) For all common stock bearing NAIC market indicator "U" provide the number of such issues:.....0.

QE04

**SCHEDULE D - PART 4**

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1 CUSIP Identification	2 Description	3 F o r eig n	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest / Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation and Adminis- trative Symbol/ Market Indicator (a)										
										11 Unrealized Valuation Increase (Decrease)	12 Current Year's (Amortization) / Accretion	13 Current Year's Other-Than-Temporary Impairment Recognized	14 Total Change in B.A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B.A.C.V.																	
<b>Bonds - U.S. Government</b>																															
912828 P5 3	UNITED STATES TREASURY NOTE.....	..	02/15/2019.	MATURITY.....	.....	.....	245,000	245,000	243,211	.....	244,925	.....	75	.....	.....	75	.....	.....	245,000	.....	.....	0	.....	919	02/15/2019.	1.....					
912828 P9 5	UNITED STATES TREASURY NOTE.....	..	03/15/2019.	MATURITY.....	.....	.....	150,000	150,000	149,860	.....	149,990	.....	10	.....	.....	10	.....	.....	150,000	.....	.....	0	.....	750	03/15/2019.	1.....					
912828 Q7 8	UNITED STATES TREASURY NOTE.....	..	01/11/2019.	CITIGROUP GLOBAL MARKETS.....	.....	.....	116,948	120,000	120,933	.....	120,444	.....	(5)	.....	.....	(5)	.....	.....	120,439	.....	.....	(3,491)	.....	(3,491)	04/30/2021.	1.....					
0599999.	Total - Bonds - U.S. Government.....	.....	.....	.....	511,948	.....	515,000	.....	514,004	.....	515,359	.....	0	.....	80	.....	0	.....	80	.....	0	.....	515,439	.....	0	(3,491)	.....	(3,491)	1,997	XXX	XXX
<b>Bonds - U.S. Special Revenue and Special Assessment</b>																							QEO5	06/01/2046.	1FE.....						
3132WE F2 3	#Q41084	..	03/01/2019.	PAYDOWN.....	.....	.....	1,944	1,944	2,048	.....	1,944	.....	(1)	.....	.....	(1)	.....	.....	1,944	.....	.....	0	.....	14	06/01/2046.	1FE.....					
3138EP UV 4	FEDERAL NATIONAL MTG ASSOC #AL6895	..	03/01/2019.	PAYDOWN.....	.....	.....	4,081	4,081	4,271	.....	4,083	.....	(2)	.....	.....	(2)	.....	.....	4,081	.....	.....	0	.....	26	05/01/2045.	1FE.....					
3138Y4 WA 3	FEDERAL NATIONAL MTG ASSOC #AX3340	..	03/01/2019.	PAYDOWN.....	.....	.....	1,746	1,746	1,831	.....	1,746	.....	0	.....	.....	0	.....	.....	1,746	.....	.....	0	.....	10	02/01/2045.	1FE.....					
3138YR QX 9	FEDERAL NATIONAL MTG ASSOC #AZ0469	..	03/01/2019.	PAYDOWN.....	.....	.....	2,256	2,256	2,366	.....	2,257	.....	(1)	.....	.....	(1)	.....	.....	2,256	.....	.....	0	.....	13	05/01/2045.	1FE.....					
3140GS PD 8	FEDERAL NATIONAL MTG ASSOC #BH4019	..	03/01/2019.	PAYDOWN.....	.....	.....	5,705	5,705	5,987	.....	5,707	.....	(3)	.....	.....	(3)	.....	.....	5,705	.....	.....	0	.....	36	09/01/2047.	1FE.....					
3199999.	Total - Bonds - U.S. Special Revenue and Special Assessments.....	.....	.....	.....	15,732	.....	15,732	.....	16,503	.....	15,737	.....	0	.....	73	.....	0	.....	15,732	.....	.....	0	.....	0	.....	99	XXX	XXX			
8399997.	Total - Bonds - Part 4.....	.....	.....	.....	527,680	.....	530,732	.....	530,507	.....	531,096	.....	0	.....	73	.....	0	.....	531,171	.....	.....	0	(3,491)	.....	(3,491)	2,096	XXX	XXX			
8399999.	Total - Bonds.....	.....	.....	.....	527,680	.....	530,732	.....	530,507	.....	531,096	.....	0	.....	73	.....	0	.....	531,171	.....	.....	0	(3,491)	.....	(3,491)	2,096	XXX	XXX			
<b>Preferred Stocks - Industrial and Miscellaneous</b>																							P3FEL.....	3,223	XXX						
172967 33 3	CITIGROUP INC 6.875000%.....	..	02/12/2019.	SINK FUND PAYMENT.....	.....	7,500,000	187,500	25.00	200,550	.....	190,650	.....	9,900	.....	.....	9,900	.....	.....	200,550	.....	.....	(13,050)	.....	(13,050)	3,223	XXX	P3FEL.....				
8499999.	Total - Preferred Stocks - Industrial and Miscellaneous.....	.....	.....	.....	187,500	XXX	200,550	.....	190,650	.....	9,900	.....	0	.....	9,900	.....	0	.....	200,550	.....	.....	0	(13,050)	.....	(13,050)	3,223	XXX	XXX			
8999997.	Total - Preferred Stocks - Part 4.....	.....	.....	.....	187,500	XXX	200,550	.....	190,650	.....	9,900	.....	0	.....	9,900	.....	0	.....	200,550	.....	.....	0	(13,050)	.....	(13,050)	3,223	XXX	XXX			
8999999.	Total - Preferred Stocks.....	.....	.....	.....	187,500	XXX	200,550	.....	190,650	.....	9,900	.....	0	.....	9,900	.....	0	.....	200,550	.....	.....	0	(13,050)	.....	(13,050)	3,223	XXX	XXX			
9899999.	Total - Preferred and Common Stocks.....	.....	.....	.....	187,500	XXX	200,550	.....	190,650	.....	9,900	.....	0	.....	9,900	.....	0	.....	200,550	.....	.....	0	(13,050)	.....	(13,050)	3,223	XXX	XXX			
9999999.	Total - Bonds, Preferred and Common Stocks.....	.....	.....	.....	715,180	XXX	731,057	.....	721,746	.....	9,900	.....	73	.....	0	.....	9,973	.....	.....	731,721	.....	.....	0	(16,541)	.....	(16,541)	5,319	XXX	XXX		

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues: .....0.

**Sch. DB - Pt. A - Sn. 1**  
**NONE**

**Sch. DB - Pt. B - Sn. 1**  
**NONE**

**Sch. DB - Pt. D - Sn. 1**  
**NONE**

**Sch. DB - Pt. D - Sn. 2**  
**NONE**

**Sch. DL - Pt. 1**  
**NONE**

**Sch. DL - Pt. 2**  
**NONE**

**Falls Lake National 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	

**Open Depositories**

Key Bank.....	Cleveland, OH.....				.....8,919,200	.....12,156,616	.....7,262,941	XXX
CITIZENS BANK NA CASH SWEEP ACCOUNT .....	SD.....		.....1,063		.....554,561	.....555,623	.....551,002	XXX
INTEREST RECEIVED DURING QTR ON DISPOSED HOLDINGS .....			.....3,081					XXX
0199999. Total Open Depositories.....	XXX	XXX	.....4,144	.....0	.....9,473,761	.....12,712,239	.....7,813,943	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	.....4,144	.....0	.....9,473,761	.....12,712,239	.....7,813,943	XXX
0599999. Total Cash.....	XXX	XXX	.....4,144	.....0	.....9,473,761	.....12,712,239	.....7,813,943	XXX

**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 & Accrued	9 Amount Received During Year
<b>Exempt Money Market Mutual Funds as Identified by the SVO</b>								
31846V 41 9	FIRST AM TREAS OBLI-INS INV.....		12/17/2018.....					
31846V 41 9	FIRST AM TREAS OBLI-INS INV.....	SD.....	12/17/2018.....			315,000		1,656
31846V 80 7	FIRST AMER TREASURY OBLIG-Y.....		03/15/2019.....					
31846V 80 7	FIRST AMER TREASURY OBLIG-Y.....	SD.....	03/15/2019.....			2,275,084		
60934N 50 0	FEDERATED TREASURY OBLIGA-INS.....		03/15/2019.....			133,997		
94975H 29 6	WELLS FARGO ADV TR PL MM-INS.....		03/15/2019.....			120,052		.496
94975H 29 6	WELLS FARGO ADV TR PL MM-INS.....	SD.....	03/15/2019.....					
8599999. Total - Exempt Money Market Mutual Funds as Identified by the SVO.....						2,844,133	.0	.2,152
<b>All Other Money Market Mutual Funds</b>								
31846V 20 3	FIRST AMERICAN GOV OBLIG - Y.....		02/15/2019.....					
31846V 20 3	FIRST AMERICAN GOV OBLIG - Y.....	SD.....	02/15/2019.....					
8699999. Total - All Other Money Market Mutual Funds.....						.0	.0	.0
8899999. Total - Cash Equivalents.....						2,844,133	.0	.2,152