



# QUARTERLY STATEMENT

As of March 31, 2019  
of the Condition and Affairs of the

## The Order Of United Commercial Travelers Of America

NAIC Group Code..... 0, 0 (Current Period) (Prior Period)	NAIC Company Code..... 56383	Employer's ID Number..... 31-4273120
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Licensed as Business Type: Fraternal Benefit Society		
Incorporated/Organized..... October 4, 1890	Commenced Business..... January 16, 1888	
Statutory Home Office	1801 Watermark Drive Suite 100 .. Columbus .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	1801 Watermark Drive Suite 100 .. Columbus .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	800-848-0123 (Area Code) (Telephone Number)
Mail Address	1801 Watermark Drive Suite 100 .. Columbus .. OH .. US .. 43215 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	1801 Watermark Drive Suite 100 .. Columbus .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	800-848-0123 (Area Code) (Telephone Number)
Internet Web Site Address	www.uct.org	
Statutory Statement Contact	Kevin C Hecker (Name) khecker@uct.org (E-Mail Address)	800-848-0123-1142 (Area Code) (Telephone Number) (Extension) 614-487-9675 (Fax Number)

### OFFICERS

Name	Title	Name	Title
1. Christopher Barry Phelan	President	2. Stephen Randal Desselles	Secretary/Treasurer
3. Kevin Clare Hecker	Chief Executive Officer	4.	

### OTHER

Ronald Allen Ives	Senior Vice-President, Chief Information Officer	Sandra Elizabeth Shafer	Vice-President, Fraternal
Jeffrey Lee Smith MAAA, FCA	Consulting Actuary		

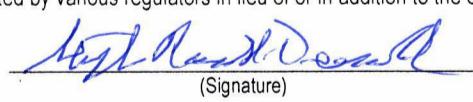
### DIRECTORS OR TRUSTEES

Glenn Edward Suever	Stephen Randal Desselles	Mary Frances Applegate	Numan Dwight Loafman
Christopher Barry Phelan	David James Syrota	Dianna Jean Wolfe	Kenneth Eugene Milliser, Jr.
Stanna Kay Funk			

State of..... Ohio  
County of.... Franklin

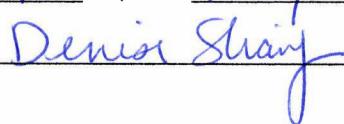
The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any 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.

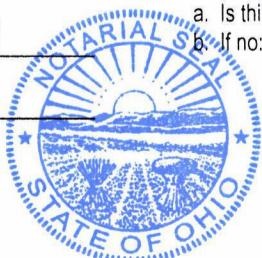
  
(Signature)  
Christopher Barry Phelan  
1. (Printed Name)  
President  
(Title)

  
(Signature)  
Stephen Randal Desselles  
2. (Printed Name)  
Secretary/Treasurer  
(Title)

  
(Signature)  
Kevin Clare Hecker  
3. (Printed Name)  
Chief Executive Officer  
(Title)

Subscribed and sworn to before me  
This 10 day of May 2019

  
Denise Sharf



a. Is this an original filing?  
If no: 1. State the amendment number  
2. Date filed  
3. Number of pages attached  
Notary Public, State of Ohio  
My Commission Expires 8-25-2020

Yes [ X ] No [ ]

Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**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.....	13,211,517	0	13,211,517	13,314,482
2. Stocks:				
2.1 Preferred stocks.....	0	0	0	0
2.2 Common stocks.....	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens.....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	0	0	0	0
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	0	0	0	0
4.3 Properties held for sale (less \$.....0 encumbrances).....	0	0	0	0
5. Cash (\$....(462,290)), cash equivalents (\$....211,646) and short-term investments (\$.....0).....	(250,644)	0	(250,644)	710,037
6. Contract loans (including \$.....0 premium notes).....	736,004	0	736,004	746,626
7. Derivatives.....	0	0	0	0
8. Other invested assets.....	0	0	0	0
9. Receivables for securities.....	0	0	0	0
10. Securities lending reinvested collateral assets.....	0	0	0	0
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	13,696,877	0	13,696,877	14,771,145
13. Title plants less \$.....0 charged off (for Title insurers only).....	0	0	0	0
14. Investment income due and accrued.....	107,861	0	107,861	91,901
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	29,751	0	29,751	32,540
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	68,474	0	68,474	60,861
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	257,876	0	257,876	401,650
16.2 Funds held by or deposited with reinsured companies.....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts.....	63,404	0	63,404	63,404
17. Amounts receivable relating to uninsured plans.....	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon.....	0	0	0	0
18.2 Net deferred tax asset.....	0	0	0	0
19. Guaranty funds receivable or on deposit.....	0	0	0	0
20. Electronic data processing equipment and software.....	149,450	134,794	14,656	13,378
21. Furniture and equipment, including health care delivery assets (\$.....0).....	29,144	29,144	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates.....	0	0	0	0
24. Health care (\$.....0) and other amounts receivable.....	0	0	0	0
25. Aggregate write-ins for other than invested assets.....	653,310	653,310	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	15,056,147	817,248	14,238,899	15,434,879
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0	0
28. Total (Lines 26 and 27).....	15,056,147	817,248	14,238,899	15,434,879

**DETAILS OF WRITE-INS**

1101.....	0	0	0	0
1102.....	0	0	0	0
1103.....	0	0	0	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. Other Assets Nonadmitted.....	653,310	653,310	0	0
2502.....	0	0	0	0
2503.....	0	0	0	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).....	653,310	653,310	0	0

Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31 Prior Year
1. Aggregate reserve for life contracts \$.....0 less \$.....0 included in Line 6.3 (including \$.....0 Modco Reserve).....	2,463,777	2,580,815
2. Aggregate reserve for accident and health contracts (including \$.....0 Modco Reserve).....	986,582	961,866
3. Liability for deposit-type contracts (including \$.....0 Modco Reserve).....	20,305	21,704
4. Contract claims:		
4.1 Life.....	27,778	33,313
4.2 Accident and health.....	988,228	1,013,523
5. Policyholders' dividends/refunds to members \$.....0 and coupons \$.....0 due and unpaid.....	0	0
6. Provision for policyholders' dividends/refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholder's dividends/refunds to members apportioned for payment (including \$.....0 Modco).....	0	0
6.2 Policyholder's dividends/refunds to members not yet apportioned (including \$.....0 Modco).....	0	0
6.3 Coupons and similar benefits (including \$.....0 Modco).....	0	0
7. Amount provisionally held for deferred dividend policies not included in Line 6.....	0	0
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$....103,896 accident and health premiums.....	104,642	113,187
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....	0	0
9.2 Provision for experience rating refunds, including the liability of \$.....0 accident and health experience rating refunds of which \$.....0 is for medical loss ratio rebate per the Public Health Service Act.....	0	0
9.3 Other amounts payable on reinsurance, including \$.....0 assumed and \$.....0 ceded.....	0	0
9.4 Interest Maintenance Reserve.....	72,583	76,685
10. Commissions to agents due or accrued - life and annuity contracts \$....278, accident and health \$....8,978 and deposit-type contract funds \$.....0.....	9,256	12,680
11. Commissions and expense allowances payable on reinsurance assumed.....	0	0
12. General expenses due or accrued.....	572,226	834,758
13. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves, net of reinsurance allowances).....	0	0
14. Taxes, licenses and fees due or accrued, excluding federal income taxes.....	29,478	27,275
15.1 Current federal and foreign income taxes, including \$.....0 on realized capital gains (losses).....	0	0
15.2 Net deferred tax liability.....	0	0
16. Unearned investment income.....	0	0
17. Amounts withheld or retained by reporting entity as agent or trustee.....	173,768	169,639
18. Amounts held for agents' account, including \$.....0 agents' credit balances.....	0	0
19. Remittances and items not allocated.....	11,629	10,819
20. Net adjustment in assets and liabilities due to foreign exchange rates.....	0	0
21. Liability for benefits for employees and agents if not included above.....	0	0
22. Borrowed money \$.....0 and interest thereon \$.....0.....	0	0
23. Dividends to stockholders declared and unpaid.....	0	0
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve.....	45,978	46,564
24.02 Reinsurance in unauthorized and certified (\$.....0) companies.....	0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....	0	0
24.04 Payable to parent, subsidiaries and affiliates.....	0	0
24.05 Drafts outstanding.....	0	0
24.06 Liability for amounts held under uninsured plans.....	0	0
24.07 Funds held under coinsurance.....	0	0
24.08 Derivatives.....	0	0
24.09 Payable for securities.....	0	0
24.10 Payable for securities lending.....	0	0
24.11 Capital notes \$.....0 and interest thereon \$.....0.....	0	0
25. Aggregate write-ins for liabilities.....	624,031	1,278,001
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....	6,130,261	7,180,829
27. From Separate Accounts statement.....	0	0
28. Total liabilities (Lines 26 and 27).....	6,130,261	7,180,829
29. Common capital stock.....	0	0
30. Preferred capital stock.....	0	0
31. Aggregate write-ins for other-than-special surplus funds.....	0	0
32. Surplus notes.....	0	0
33. Gross paid in and contributed surplus.....	0	0
34. Aggregate write-ins for special surplus funds.....	25,000	25,000
35. Unassigned funds (surplus).....	8,083,638	8,229,050
36. Less treasury stock, at cost:		
36.1 ....0.000 shares common (value included in Line 29 \$.....0).....	0	0
36.2 ....0.000 shares preferred (value included in Line 30 \$.....0).....	0	0
37. Surplus (Total Lines 31 + 32 + 33 + 34 + 35 - 36) (including \$.....0 in Separate Accounts Statement).....	8,108,638	8,254,050
38. Totals of Lines 29, 30 and 37.....	8,108,638	8,254,050
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3).....	14,238,899	15,434,879

**DETAILS OF WRITE-INS**

2501. Amounts Payable to Reinsurer.....	133,655	924,501
2502. Deferred Income.....	208,896	71,659
2503. Unclaimed Funds.....	281,480	281,841
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).....	624,031	1,278,001
3101. ....	0	0
3102. ....	0	0
3103. ....	0	0
3198. Summary of remaining write-ins for Line 31 from overflow page.....	0	0
3199. Totals (Lines 3101 thru 3103 plus 3198) (Line 31 above).....	0	0
3401. Fraternal Fund.....	25,000	25,000
3402. ....	0	0
3403. ....	0	0
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	25,000	25,000

**SUMMARY OF OPERATIONS**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
1. Premiums and annuity considerations for life and accident and health contracts.....	3,143,931	3,221,989	12,669,023
2. Considerations for supplementary contracts with life contingencies.....	0	0	0
3. Net investment income.....	102,869	118,169	456,788
4. Amortization of Interest Maintenance Reserve (IMR).....	2,575	7,784	1,254
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0	0	0
6. Commissions and expense allowances on reinsurance ceded.....	919,907	1,032,176	3,965,874
7. Reserve adjustments on reinsurance ceded.....	0	0	0
8. Miscellaneous Income:			
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0	0	0
8.2 Charges and fees for deposit-type contracts.....	0	0	0
8.3 Aggregate write-ins for miscellaneous income.....	299,943	302,763	1,104,468
9. Totals (Lines 1 to 8.3).....	4,469,225	4,682,881	18,197,407
10. Death benefits.....	54,660	99,370	234,091
11. Matured endowments (excluding guaranteed annual pure endowments).....	0	0	18,355
12. Annuity benefits.....	59,389	12,888	26,222
13. Disability benefits and benefits under accident and health contracts.....	2,109,935	2,013,645	8,115,953
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0	0	0
15. Surrender benefits and withdrawals for life contracts.....	131,075	19,664	498,719
16. Group conversions.....	0	0	0
17. Interest and adjustments on contract or deposit-type contract funds.....	16	.32	143
18. Payments on supplementary contracts with life contingencies.....	0	0	0
19. Increase in aggregate reserves for life and accident and health contracts.....	(92,307)	(67,293)	(679,702)
20. Totals (Lines 10 to 19).....	2,262,768	2,078,306	8,213,781
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	668,978	825,974	3,040,128
22. Commissions and expense allowances on reinsurance assumed.....	0	0	0
23. General insurance expenses and fraternal expenses.....	1,670,684	1,947,561	7,670,596
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	96,389	105,752	324,953
25. Increase in loading on deferred and uncollected premiums.....	(1,951)	8,232	13,725
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0	0	0
27. Aggregate write-ins for deductions.....	0	0	0
28. Totals (Lines 20 to 27).....	4,696,868	4,965,825	19,263,183
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28).....	(227,643)	(282,944)	(1,065,776)
30. Dividends to policyholders and refunds to members.....	0	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	(227,643)	(282,944)	(1,065,776)
32. Federal and foreign income taxes incurred (excluding tax on capital gains).....	0	0	0
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	(227,643)	(282,944)	(1,065,776)
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$.....0 (excluding taxes of \$.....0 transferred to the IMR).....	0	(539)	236,041
35. Net income (Line 33 plus Line 34).....	(227,643)	(283,483)	(829,735)
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
36. Capital and surplus, December 31, prior year.....	8,254,050	9,213,236	9,213,236
37. Net income (Line 35).....	(227,643)	(283,483)	(829,735)
38. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0	0	0	0
39. Change in net unrealized foreign exchange capital gain (loss).....	39,637	(74,763)	(180,711)
40. Change in net deferred income tax.....	0	0	0
41. Change in nonadmitted assets.....	42,007	(74,401)	42,406
42. Change in liability for reinsurance in unauthorized and certified companies.....	0	0	0
43. Change in reserve on account of change in valuation basis, (increase) or decrease.....	0	0	0
44. Change in asset valuation reserve.....	586	(1,232)	8,855
45. Change in treasury stock.....	0	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period.....	0	0	0
47. Other changes in surplus in Separate Accounts Statement.....	0	0	0
48. Change in surplus notes.....	0	0	0
49. Cumulative effect of changes in accounting principles.....	0	0	0
50. Capital changes:			
50.1 Paid in.....	0	0	0
50.2 Transferred from surplus (Stock Dividend).....	0	0	0
50.3 Transferred to surplus.....	0	0	0
51. Surplus adjustment:			
51.1 Paid in.....	0	0	0
51.2 Transferred to capital (Stock Dividend).....	0	0	0
51.3 Transferred from capital.....	0	0	0
51.4 Change in surplus as a result of reinsurance.....	0	0	0
52. Dividends to stockholders.....	0	0	0
53. Aggregate write-ins for gains and losses in surplus.....	0	0	0
54. Net change in capital and surplus (Lines 37 through 53).....	(145,413)	(433,879)	(959,186)
55. Capital and surplus as of statement date (Lines 36 + 54).....	8,108,638	8,779,357	8,254,050

**DETAILS OF WRITE-INS**

08.301. Donations.....	2,558	5,030	29,564
08.302. Supreme Dues.....	165,888	196,862	706,165
08.303. Misc Income.....	90,585	100,871	368,739
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	40,912	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above).....	299,943	302,763	1,104,468
2701. ....	0	0	0
2702. ....	0	0	0
2703. ....	0	0	0
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above).....	0	0	0
5301. ....	0	0	0
5302. ....	0	0	0
5303. ....	0	0	0
5398. Summary of remaining write-ins for Line 53 from overflow page.....	0	0	0
5399. Totals (Lines 5301 thru 5303 plus 5398) (Line 53 above).....	0	0	0

Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**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.....	3,132,509	3,212,482	12,657,501
2. Net investment income.....	95,129	113,365	709,240
3. Miscellaneous income.....	587,685	745,276	5,588,975
4. Total (Lines 1 through 3).....	3,815,323	4,071,123	18,955,716
5. Benefit and loss related payments.....	2,387,319	2,200,168	9,003,165
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions.....	2,670,711	2,770,076	10,769,801
8. Dividends paid to policyholders.....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$..... tax on capital gains (losses).....	0	0	0
10. Total (Lines 5 through 9).....	5,058,030	4,970,244	19,772,966
11. Net cash from operations (Line 4 minus Line 10).....	(1,242,707)	(899,121)	(817,250)
<b>CASH FROM INVESTMENTS</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	128,965	573,207	3,670,350
12.2 Stocks.....	0	0	0
12.3 Mortgage loans.....	0	0	0
12.4 Real estate.....	0	0	0
12.5 Other invested assets.....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	0	0	0
12.7 Miscellaneous proceeds.....	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	128,965	573,207	3,670,350
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	0	593,121	1,622,571
13.2 Stocks.....	0	0	0
13.3 Mortgage loans.....	0	0	0
13.4 Real estate.....	0	0	0
13.5 Other invested assets.....	0	0	0
13.6 Miscellaneous applications.....	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6).....	0	593,121	1,622,571
14. Net increase or (decrease) in contract loans and premium notes.....	(10,622)	(7,120)	(42,196)
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	139,587	(12,794)	2,089,975
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0	0
16.3 Borrowed funds.....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	0	0	0
16.5 Dividends to stockholders.....	0	0	0
16.6 Other cash provided (applied).....	142,438	104,503	(272,680)
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	142,438	104,503	(272,680)
<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).....	(960,682)	(807,412)	1,000,045
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	710,038	(290,007)	(290,007)
19.2 End of period (Line 18 plus Line 19.1).....	(250,644)	(1,097,419)	710,038

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

20.001 .....	0	0	0
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Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**EXHIBIT 1**

**DIRECT PREMIUMS AND DEPOSIT-TYPE CONTRACTS**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
1. Industrial life.....	0	0	0
2. Ordinary life insurance.....	166,714	187,889	718,624
3. Ordinary individual annuities.....	1,350	12,250	48,603
4. Credit life (group and individual).....	0	0	0
5. Group life insurance.....	0	0	0
6. Group annuities.....	0	0	0
7. A&H - group.....	0	0	0
8. A&H - credit (group and individual).....	0	0	0
9. A&H - other.....	11,540,221	12,650,899	48,459,586
10. Aggregate of all other lines of business.....	0	0	0
11. Subtotal (Lines 1 through 10).....	11,708,285	12,851,038	49,226,813
12. Fraternal ( Fraternal Benefit Societies Only).....	0	0	0
13. Subtotal (Lines 11 through 12).....	11,708,285	12,851,038	49,226,813
14. Deposit-type contracts.....	0	0	0
15. Total (Lines 13 and 14).....	11,708,285	12,851,038	49,226,813

**DETAILS OF WRITE-INS**

1001. ....	0	0	0
1002. ....	0	0	0
1003. ....	0	0	0
1098. Summary of remaining write-ins for Line 10 from overflow page.....	0	0	0
1099. Total (Lines 1001 thru 1003 plus 1098) (Line 10 above).....	0	0	0

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

The financial statements of The Order of United Commercial Travelers of America (UCT) 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, and for determining its solvency under Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual, version effective March 2019, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio. UCT has no transactions that fall outside the NAIC's practices and procedures.

	SSAP #	F/S Page	F/S Line #	Current Year to Date	2018
<b>NET INCOME</b>					
(1) The Order Of United Commercial Travelers Of America Company state basis (Page 4, Line 35, Columns 1 & 3)	XXX	XXX	XXX	\$ (227,643)	\$ (829,735)
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP				\$ 0	\$ 0
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP				\$ 0	\$ 0
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ (227,643)	\$ (829,735)
<b>SURPLUS</b>					
(5) The Order Of United Commercial Travelers Of America Company state basis (Page 3, line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 8,108,638	\$ 8,254,050
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP				\$ 0	\$ 0
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP				\$ 0	\$ 0
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 8,108,638	\$ 8,254,050

**C. Accounting Policy**

(2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method  
Bonds not backed by other loans are stated at amortized cost using the scientific-to-worst amortization method.

(6) Basis for Loan-Backed Securities and Adjustment Methodology  
Bonds backed by other loans are stated at amortized cost using the scientific-to-worst amortization method.

**D. Going Concern**

N/A

**Note 2 – Accounting Changes and Corrections of Errors**

No significant changes

**Note 3 – Business Combinations and Goodwill**

No significant changes

**Note 4 – Discontinued Operations**

As stated in the 2018 annual statement, the Order is discontinuing its insurance operations in Canada. As of the end of Q1, there has not been a material impact on the financial statements for 2019. The Order accrued for its expected remaining payouts and remaining expenses at the end of 2018.

**Note 5 – Investments****D. Loan-Backed Securities**

(1) Description of Sources Used to Determine Prepayment Assumptions  
Prepayment assumptions for loan-backed securities are obtained from Bloomberg.

(2) Securities with Recognized Other-Than-Temporary Impairment - **None**

(3) Recognized OTTI securities - **None**

(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	\$ 0
	2. 12 Months or Longer	\$ 18,827
b. The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 0
	2. 12 Months or Longer	\$ 1,507,242

**NOTES TO FINANCIAL STATEMENTS**

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary  
 The Company has an "Other Than Temporary Impaired" policy in place that utilizes industry information, investment managers' expertise and rating agencies to identify securities that may be other than temporarily impaired.

## E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(3) Collateral Received

b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged	\$ 0
--	------

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - **None**G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing  
 Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions - **None**H. Repurchase Agreements Transactions Accounted for as a Sale  
 Repurchase Transaction – Cash Taker – Overview of Sale Transactions - **None**I. Reverse Repurchase Agreements Transactions Accounted for as a Sale  
 Repurchase Transaction – Cash Provider – Overview of Sale Transactions - **None**M. Working Capital Finance Investments - **None**N. Offsetting and Netting of Assets and Liabilities - **None****Note 6 – Joint Ventures, Partnerships and Limited Liability Companies**

No significant changes

**Note 7 – Investment Income**

No significant changes

**Note 8 – Derivative Instruments**

No significant changes

## H. Total Premium Costs for Contracts

(1)		Fiscal Year	Derivative Premium Payments Due	
a.		2020	\$ 0	0
b.		2021		0
c.		2022		0
d.		2023		0
e.		Thereafter		0
f.		Total Future Settled Premiums	\$ 0	0

(2)		Undiscounted Future Premium Commitments	Derivative Fair Value with Premium Commitments (Reported on DB)	Derivative Fair Value Excluding Impact of Future Settled Premiums
a.	Prior Year	\$ 0	\$ 0	\$ 0
b.	Current Period	\$ 0	\$ 0	\$ 0

**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 - **None**(1) Information on the Nature of the Agreement - **N/A**(2) FHLB Capital Stocka. Aggregate Totals

## 1. Current Year to Date

	1 Total 2 + 3	2 General Account	3 Separate Accounts
(a) Membership Stock – Class A	\$ 0	\$ 0	\$ 0
(b) Membership Stock – Class B		0	0
(c) Activity Stock	0		0
(d) Excess Stock	0		0
(e) Aggregate Total (a+b+c+d)	\$ 0	\$ 0	\$ 0
(f) Actual or estimated borrowing capacity as		XXX	XXX

**NOTES TO FINANCIAL STATEMENTS**

	1 Total 2 + 3	2 General Account	3 Separate Accounts
determined by the insurer			

## 2. Prior Year

	1 Total 2 + 3	2 General Account	3 Separate Accounts
(a) Membership Stock – Class A	\$ 0	\$ 0	\$ 0
(b) Membership Stock – Class B	0	0	0
(c) Activity Stock	0	0	0
(d) Excess Stock	0	0	0
(e) Aggregate Total (a+b+c+d)	\$ 0	\$ 0	\$ 0
(f) Actual or estimated borrowing capacity as determined by the insurer	0	XXX	XXX

## b. Membership Stock (Class A and B) Eligible for Redemption

Membership Stock	1 Current Year to Date Total (2+3+4+5+6)	2 Not Eligible for Redemption	Eligible for Redemption			
			3 Less than 6 Months	4 6 Months to Less Than 1 Year	5 1 to Less Than 3 Years	6 3 to 5 Years
1. Class A	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
2. Class B	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

## (3) Collateral Pledged to FHLB

## a. Amount Pledged as of Reporting Date

	1 Fair Value	2 Carrying Value	3 Aggregate Total Borrowing
1. Current Year Total to Date General and Separate Accounts Total Collateral Pledged (Lines 2+3)	\$ 0	\$ 0	\$ 0
2. Current Year to Date General Account Total Collateral Pledged	0	0	0
3. Current Year to Date Separate Accounts Total Collateral Pledged	0	0	0
4. Prior Year Total General and Separate Accounts Total Collateral Pledged	\$ 0	\$ 0	\$ 0

## b. Maximum Amount Pledged During Reporting Period

	1 Fair Value	2 Carrying Value	3 Amount of Borrowed at Time of Maximum Collateral
1. Current Year to Date Total General and Separate Accounts Total Collateral Pledged (Lines 2+3)	\$ 0	\$ 0	\$ 0
2. Current Year to Date General Account Total Collateral Pledged	0	0	0
3. Current Year to Date Separate Accounts Total Collateral Pledged	0	0	0
4. Prior Year Total General and Separate Accounts Total Collateral Pledged	\$ 0	\$ 0	\$ 0

## (4) Borrowing from FHLB

## a. Amount as of the Reporting Date

## 1. Current Year to Date

	1 Total 2 + 3	2 General Account	3 Separate Accounts	4 Funding Agreements Reserves Established
(a) Debt	\$ 0	\$ 0	\$ 0	XXX
(b) Funding Agreements	0	0	0	\$ 0
(c) Other	0	0	0	XXX
(d) Aggregate Total (a+b+c)	\$ 0	\$ 0	\$ 0	\$ 0

## 2. Prior Year

	1 Total 2 + 3	2 General Account	3 Separate Accounts	4 Funding Agreements Reserves Established
(a) Debt	\$ 0	\$ 0	\$ 0	XXX
(b) Funding Agreements	0	0	0	\$ 0
(c) Other	0	0	0	XXX
(d) Aggregate Total (a+b+c)	\$ 0	\$ 0	\$ 0	\$ 0

**NOTES TO FINANCIAL STATEMENTS**

## b. Maximum Amount During Reporting Period (Current Year to Date)

	1 Total 2 + 3	2 General Account	3 Separate Accounts
1. Debt	0	0	0
2. Funding Agreements	0	0	0
3. Other	0	0	0
4. Aggregate Total (Lines 1+2+3)	0	0	0

## c. FHLB – Prepayment Obligations

	Does the Company have Prepayment Obligations under the Following Arrangements (YES/NO)
1. Debt	NO
2. Funding Agreements	NO
3. Other	NO

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

## A. Defined Benefit Plan

## (4) Components of Net Periodic Benefit Cost

The company sponsors a qualified defined contribution plan (401K Profit Sharing Plan) that covers all eligible U.S. employees. Eligible Canadian employees participate in Individual RRSP accounts in Canada.

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
	Current Year to Date	2018	Current Year to Date	2018	Current Year to Date	2018
a. Service cost	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Interest cost	0	0	0	0	0	0
c. Expected return on plan assets	0	0	0	0	0	0
d. Transition asset or obligation	0	0	0	0	0	0
e. Gains and losses	0	0	0	0	0	0
f. Prior service cost or credit	0	0	0	0	0	0
g. Gain or loss recognized due to a settlement curtailment	0	0	0	0	0	0
h. Total net periodic benefit cost	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

**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

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

## B. Transfer and Servicing of Financial Assets - N/A

## (2) Servicing Assets and Servicing Liabilities - N/A

## (4) Securitizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales - N/A

## C. Wash Sales - N/A

**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**

**NOTES TO FINANCIAL STATEMENTS**

A. Fair Value Measurements  
 (1) Fair Value Measurements at Reporting Date  
 The Company holds bonds at amortized cost.

**Note 21 – Other Items**

During Q1, the Order established UCT Insurance Oversight Board LLC as a single-member LLC wholly owned by the Order. UCT Insurance Oversight Board LLC is a service provider which will be comprised of no more than three individuals to perform advisory functions to the Board of Directors and to Senior Management. The activities of the service provider do not supplant the UCT Board but instead augment the talents and strengths of the UCT Board. Form D has been filed with the insurance department of the State of Ohio by Ice Miller LLP on behalf of the Order with the effective date of April 1, 2019.

The entity has been added to Schedule Y.

**Note 22 – Events Subsequent**

No significant changes

**Note 23 – Reinsurance**

No significant changes

**Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination**

E. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions?  
 Yes [ ] No [ X ]

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

A. Change in Incurred Losses and Loss Adjustment Expenses

The Company did not have any changes in the provision for incurred loss or loss adjustment expenses.

B. Information about Significant Changes in Methodologies and Assumptions

N/A.

**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 – Reserves for Life Contracts and Deposit-Type Contracts**

No significant changes

**Note 32 – Analysis of Annuity Actuarial Reserves and Deposit Liabilities by Withdrawal Characteristics**

No significant changes

**Note 33 – Premium and Annuity Considerations Deferred and Uncollected**

No significant changes

**Note 34 – Separate Accounts**

No significant changes

**Note 35 – Loss/Claim Adjustment Expenses**

No significant changes

**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 [X] No [ ]

1.2 If yes, has the report been filed with the domiciliary state? Yes [X] 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.  
Addition of UCT Insurance Oversight Board LLC. See Note 21.

3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [ ] No [X]

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [X]  
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	0	

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 [ ] N/A [X]  
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. 12/31/2018

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. 12/31/2015

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). 07/20/2016

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 [X] 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 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

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).

Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**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 [ ] No [X]

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
0	0
0	0
0	0
0	0
\$ 0	\$ 0
\$ 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 [X]

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of 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 [ ] No [X]

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
US Bank National Association	1555 N River Center Dr Ste 302; Milwaukee, WI 53212
Wachovia Securities	2010 N Tryon St; Charlotte, NC 28201

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)
Scotiabank	Exchange Tower, 130 King St West 20th Fl; Toronto, ON M5X 1K1	Canadian Investments are in compliance with OSFI.

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

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
Prime Advisors, 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 [X] No [ ]

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
107680	Victor Harned, Prime Advisors, Inc.		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]

# The Order Of United Commercial Travelers Of America

## GENERAL INTERROGATORIES (continued)

### PART 2 - LIFE AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES

#### Life and Accident and Health Companies/Fraterna Benefit Societies

1. Report the statement value of mortgage loans at the end of this reporting period for the following categories:

	Amount
1.1 Long-term mortgages in good standing	\$.....0
1.11 Farm mortgages.....	\$.....0
1.12 Residential mortgages.....	\$.....0
1.13 Commercial mortgages.....	\$.....0
1.14 Total mortgages in good standing.....	\$.....0
1.2 Long-term mortgages in good standing with restructured terms	\$.....0
1.21 Total mortgages in good standing with restructured terms.....	\$.....0
1.3 Long-term mortgage loans upon which interest is overdue more than three months	\$.....0
1.31 Farm mortgages.....	\$.....0
1.32 Residential mortgages.....	\$.....0
1.33 Commercial mortgages.....	\$.....0
1.34 Total mortgages with interest overdue more than three months.....	\$.....0
1.4 Long-term mortgage loans in process of foreclosure	\$.....0
1.41 Farm mortgages.....	\$.....0
1.42 Residential mortgages.....	\$.....0
1.43 Commercial mortgages.....	\$.....0
1.44 Total mortgages in process of foreclosure.....	\$.....0
1.5 Total mortgage loans (Lines 1.14 + 1.21 + 1.34 + 1.44) (Page 2, Column 3, Lines 3.1 + 3.2)	\$.....0
1.6 Long-term mortgages foreclosed, properties transferred to real estate in current quarter	\$.....0
1.61 Farm mortgages.....	\$.....0
1.62 Residential mortgages.....	\$.....0
1.63 Commercial mortgages.....	\$.....0
1.64 Total mortgages foreclosed and transferred to real estate.....	\$.....0
2. Operating Percentages:	
2.1 A&H loss percent.....	68.9
2.2 A&H cost containment percent.....	0.0
2.3 A&H expense percent excluding cost containment expenses.....	52.7
3.1 Do you act as a custodian for health savings accounts?.....	Yes [ ] No [X]
3.2 If yes, please provide the amount of custodial funds held as of the reporting date.....	\$.....0
3.3 Do you act as an administrator for health savings accounts?.....	Yes [ ] No [X]
3.4 If yes, please provide the balance of the funds administered as of the reporting date.....	\$.....0
4. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?.....	Yes [X] No [ ]
4.1 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 [ ]

#### Fraterna Benefit Societies Only:

5.1 In all cases where the reporting entity has assumed accident and health risks from another company, provisions should be made in this statement on account of such reinsurance for reserve equal to that which the original company would have been required to establish had it retained the risks. Has this been done?

Yes [X] No [ ] N/A [ ]

5.2 If no, explain:

---

6.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus?

Yes [ ] No [X]

6.2 If yes, what is the date(s) of the original lien and the total outstanding balance of liens that remain in surplus?

Date	Outstanding Lien Amount
	\$.....0

Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**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**

**The Order Of United Commercial Travelers Of America**  
**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS**

Current Year to Date - Allocated by States and Territories

States, Etc.	Active Status (a)	1		Direct Business Only				Deposit-Type Contracts	
		Life Contracts		4	5	6	7		
		2	3						
1. Alabama.....	AL	.L	1,945	0	160,324	0	162,269	0	
2. Alaska.....	AK	.N...	.67	0	2,026	0	2,093	0	
3. Arizona.....	AZ	L	1,479	0	331,741	0	333,220	0	
4. Arkansas.....	AR	L	1,324	0	320,341	0	321,664	0	
5. California.....	CA	L	10,316	0	54,405	0	64,720	0	
6. Colorado.....	CO	L	.295	600	490,060	0	490,955	0	
7. Connecticut.....	CT	L	1,009	0	3,846	0	4,856	0	
8. Delaware.....	DE	L	0	0	1,117	0	1,117	0	
9. District of Columbia.....	DC	L	.39	0	0	0	.39	0	
10. Florida.....	FL	L	13,687	0	554,544	0	568,231	0	
11. Georgia.....	GA	L	5,473	0	86,660	0	92,134	0	
12. Hawaii.....	HI	N...	0	0	.50	0	.50	0	
13. Idaho.....	ID	L	0	0	653,994	0	653,994	0	
14. Illinois.....	IL	L	.8,996	0	497,673	0	506,669	0	
15. Indiana.....	IN	L	.8,198	0	744,581	0	752,779	0	
16. Iowa.....	IA	L	1,584	0	320,778	0	322,361	0	
17. Kansas.....	KS	L	1,823	500	84,033	0	86,356	0	
18. Kentucky.....	KY	L	4,575	0	29,365	0	33,939	0	
19. Louisiana.....	LA	L	4,870	0	351,937	0	356,808	0	
20. Maine.....	ME	N...	0	0	1,411	0	1,411	0	
21. Maryland.....	MD	L	.847	0	11,275	0	12,122	0	
22. Massachusetts.....	MA	L	1,188	0	16,146	0	17,334	0	
23. Michigan.....	MI	L	21,866	0	246,549	0	268,415	0	
24. Minnesota.....	MN	L	.176	0	27,256	0	27,432	0	
25. Mississippi.....	MS	L	7,347	0	807,307	0	814,655	0	
26. Missouri.....	MO	L	4,291	0	171,912	0	176,203	0	
27. Montana.....	MT	L	.96	0	251,618	0	251,714	0	
28. Nebraska.....	NE	L	1,980	0	1,184,382	0	1,186,362	0	
29. Nevada.....	NV	L	.536	0	107,183	0	107,718	0	
30. New Hampshire.....	NH	L	.269	0	4,145	0	4,414	0	
31. New Jersey.....	NJ	L	2,872	0	4,457	0	7,329	0	
32. New Mexico.....	NM	N...	.59	0	6,343	0	6,402	0	
33. New York.....	NY	L	.360	0	14,086	0	14,446	0	
34. North Carolina.....	NC	L	2,721	0	323,854	0	326,575	0	
35. North Dakota.....	ND	L	1,236	0	203,404	0	204,639	0	
36. Ohio.....	OH	L	15,460	0	266,705	0	282,164	0	
37. Oklahoma.....	OK	L	2,207	0	85,586	0	87,794	0	
38. Oregon.....	OR	L	4,288	0	420,935	0	425,223	0	
39. Pennsylvania.....	PA	L	7,497	250	157,076	0	164,823	0	
40. Rhode Island.....	RI	L	.543	0	1,270	0	1,813	0	
41. South Carolina.....	SC	L	1,141	0	106,642	0	107,782	0	
42. South Dakota.....	SD	L	1,977	0	103,717	0	105,694	0	
43. Tennessee.....	TN	L	7,371	0	71,479	0	78,851	0	
44. Texas.....	TX	L	13,319	0	273,978	0	287,297	0	
45. Utah.....	UT	L	.244	0	175,799	0	176,044	0	
46. Vermont.....	VT	L	0	0	1,706	0	1,706	0	
47. Virginia.....	VA	L	5,002	0	603,010	0	608,013	0	
48. Washington.....	WA	N...	.25	0	25,330	0	25,355	0	
49. West Virginia.....	WV	L	2,491	0	281,804	0	284,295	0	
50. Wisconsin.....	WI	L	3,050	0	482,601	0	485,652	0	
51. Wyoming.....	WY	L	.147	0	244,092	0	244,239	0	
52. American Samoa.....	AS	N...	0	0	0	0	0	0	
53. Guam.....	GU	N...	0	0	0	0	0	0	
54. Puerto Rico.....	PR	N...	0	0	0	0	0	0	
55. US Virgin Islands.....	VI	N...	0	0	0	0	0	0	
56. Northern Mariana Islands.....	MP	N...	0	0	0	0	0	0	
57. Canada.....	CAN	L	.467	0	.305	0	.772	0	
58. Aggregate Other Alien.....	OT	XXX	0	0	0	0	0	0	
59. Subtotal.....		XXX	176,753	1,350	11,370,838	0	11,548,941	0	
60. Reporting entity contributions for employee benefit plans.....		XXX	0	0	0	0	0	0	
61. Dividends or refunds applied to purchase paid-up additions and annuities.....		XXX	0	0	0	0	0	0	
62. Dividends or refunds applied to shorten endowment or premium paying period.....		XXX	0	0	0	0	0	0	
63. Premium or annuity considerations waived under disability or other contract provisions.....		XXX	0	0	0	0	0	0	
64. Aggregate other amounts not allocable by State.....		XXX	0	0	0	0	0	0	
65. Totals (Direct Business).....		XXX	176,753	1,350	11,370,838	0	11,548,941	0	
66. Plus Reinsurance Assumed.....		XXX	0	0	0	0	0	0	
67. Totals (All Business).....		XXX	176,753	1,350	11,370,838	0	11,548,941	0	
68. Less Reinsurance Ceded.....		XXX	137,402	.913	8,278,117	0	8,416,432	0	
69. Totals (All Business) less Reinsurance Ceded.....		XXX	39,351	.437	3,092,721	0	3,132,509	0	

## DETAILS OF WRITE-INS

58001.....		XXX	0	0	0	0	0	0
58002.....		XXX	0	0	0	0	0	0
58003.....		XXX	0	0	0	0	0	0
58998. Summary of remaining write-ins for line 58 from overflow page.....		XXX	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above).....		XXX	0	0	0	0	0	0
9401.....		XXX	0	0	0	0	0	0
9402.....		XXX	0	0	0	0	0	0
9403.....		XXX	0	0	0	0	0	0
9498. Summary of remaining write-ins for line 94 from overflow page.....		XXX	0	0	0	0	0	0
9499. Total (Lines 9401 thru 9403 plus 9498) (Line 94 above).....		XXX	0	0	0	0	0	0

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 47  
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0R - Registered - Non-domiciled RRGs..... 0  
Q - Qualified - Qualified or accredited reinsurer..... 0  
N - None of the above - Not allowed to write business in the state..... 10

**The Order of United Commercial Travelers of America**

FEIN: 31-4273120  
NAIC: 56383  
Ohio

**UCT Charities**

FEIN: 31-1486573  
Ohio

**UCT Insurance Oversight  
Board LLC**

FEIN: 83-3057701  
Ohio

**Q12**

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
<b>Members</b>															
0.....		56383...	31-4273120..	.....0	.....0		The Order of United Commercial Travelers of America	OH.....	RE.....	The Order of United Commercial Travelers of America	Board.....	.....0.000	The Order of United Commercial Travelers of America	.....N.....0.....	
0.....		0.....	31-1486573..	.....0	.....0		UCT Charities.....	OH.....	OTH.....	The Order of United Commercial Travelers of America	Other.....	.....0.000	The Order of United Commercial Travelers of America	.....N.....1.....	
0.....		0.....	83-3057701..	.....0	.....0		UCT Insurance Oversight Board LLC.....	OH.....	DS.....	The Order of United Commercial Travelers of America	Ownership.....	....100.000	The Order of United Commercial Travelers of America	.....N.....0.....	

**Asterisk Explanation**

1 This entity is a 501(c)(3) charitable organization that provides scholarships. The Board of Directors of UCT Charities is appointed by the Board of The Order of United Commercial Travelers of America.

# The Order Of United Commercial Travelers Of America

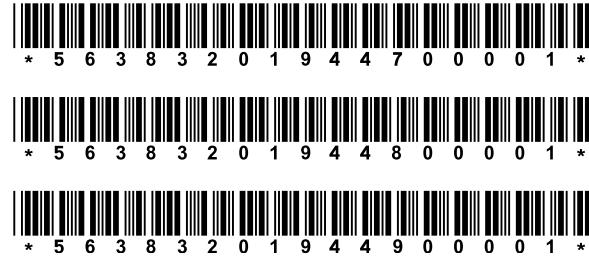
## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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 the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
3. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC?	NO
4. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC?	NO
5. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC?	NO
6. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC?	NO
7. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC?	NO
8. Will the Life PBR Statement of Exemption be filed with the state of domicile by July 1st and electronically with the NAIC with the second quarterly filing per the Valuation Manual (by August 15)? (2nd Quarterly Only). The response for 1st and 3rd quarters should be N/A. A NO response resulting with a barcode is only appropriate in the 2nd quarter.	N/A

**Explanations:**

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.
5. The data for this supplement is not required to be filed.
6. The data for this supplement is not required to be filed.
7. The data for this supplement is not required to be filed.
8. Not Applicable for 1st and 3rd Quarters

**Bar Code:**


Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**Overflow Page for Write-Ins**

**Additional Write-ins for Summary of Operations:**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
08.304. Canada Discontinuation.....	.....40,912	.....0	.....0
08.397. Summary of remaining write-ins for Line 8.3.....	.....40,912	.....0	.....0

Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**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	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Current year change in encumbrances.....	0	0
4. Total gain (loss) on disposals.....	0	0
5. Deduct amounts received on disposals.....	0	0
6. Total foreign exchange change in book/adjusted carrying value.....	0	0
7. Deduct current year's other-than-temporary impairment recognized.....	0	0
8. Deduct current year's depreciation.....	0	0
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.....	0	0
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

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

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase (decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium and depreciation.....	0	0
9. Total foreign exchange change in book/adjusted carrying value.....	0	0
10. Deduct current year's other-than-temporary impairment recognized.....	0	0
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.....	0	0
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.....	13,314,481	15,457,033
2. Cost of bonds and stocks acquired.....	0	1,622,571
3. Accrual of discount.....	2,064	6,896
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	(1,527)	(255,266)
6. Deduct consideration for bonds and stocks disposed of.....	128,965	3,670,350
7. Deduct amortization of premium.....	10,284	51,638
8. Total foreign exchange change in book/adjusted carrying value.....	34,395	202,468
9. Deduct current year's other-than-temporary impairment recognized.....	0	0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....	1,352	2,767
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	13,211,516	13,314,481
12. Deduct total nonadmitted amounts.....	0	0
13. Statement value at end of current period (Line 11 minus Line 12).....	13,211,516	13,314,481

**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).....	11,182,861	0	65,879	123,893	11,240,875			11,182,861
2. NAIC 2 (a).....	2,131,621	0	63,262	(97,718)	1,970,641			2,131,621
3. NAIC 3 (a).....	0	0	0	0	0			0
4. NAIC 4 (a).....	0	0	0	0	0			0
5. NAIC 5 (a).....	0	0	0	0	0			0
6. NAIC 6 (a).....	0	0	0	0	0			0
7. Total Bonds.....	13,314,482	0	129,141	26,175	13,211,516	0	0	13,314,482
<b>PREFERRED STOCK</b>								
8. NAIC 1.....	0	0	0	0	0			0
9. NAIC 2.....	0	0	0	0	0			0
10. NAIC 3.....	0	0	0	0	0			0
11. NAIC 4.....	0	0	0	0	0			0
12. NAIC 5.....	0	0	0	0	0			0
13. NAIC 6.....	0	0	0	0	0			0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	13,314,482	0	129,141	26,175	13,211,516	0	0	13,314,482

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

Q3102

**Sch. DA - Pt. 1**  
**NONE**

**Sch. DA - Verification**  
**NONE**

**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**

Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**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.....	147,294	235,839
2. Cost of cash equivalents acquired.....	179,488	1,617,397
3. Accrual of discount.....	0	0
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	0	0
6. Deduct consideration received on disposals.....	115,136	1,705,942
7. Deduct amortization of premium.....	0	0
8. Total foreign exchange change in book/ adjusted carrying value.....	0	0
9. Deduct current year's other-than-temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	211,646	147,294
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11).....	211,646	147,294

**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**

**Sch. D - Pt. 3**  
**NONE**

**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 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/Adjusted Carrying Value	10 Unrealized Valuation Increase (Decrease)	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	12	13 Current Year's Other-Than-Temporary Impairment Recognized	14	15								
38378K DB 2	GNMA 2013-43 B.....	.. 03/01/2019.	MBS PMT.....	.....1,200	.....1,200	.....1,220	.....1,200	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....4	04/16/2039.	1.....
912828 VA 5	US TREASURY N/B.....	.. 03/04/2019.	JP MORGAN.....	24,594	25,000	24,396	24,839	0	21	0	21	0	0	24,859	0	(266)	(266)	97	04/30/2020.	1.....		
0599999.	Total - Bonds - U.S. Government.....			25,794	26,200	25,616	26,039	0	21	0	21	0	0	26,059	0	(266)	(266)	101	XXX	XXX		
<b>Bonds - U.S. Government</b>																						
3128M4 WK 5	FHLMC G03050.....	.. 03/01/2019.	MBS PMT.....	.....641	.....641	.....684	.....641	.....0	(1)	0	(1)	0	.....0	.....641	0	0	0	0	0	0	0	0
3128M7 L4 6	FHLMC G05447.....	.. 03/01/2019.	MBS PMT.....	.....619	.....619	.....651	.....619	.....0	0	0	0	0	0	.....619	0	0	0	0	0	0	0	0
3128M8 AV 6	FHLMC G06020.....	.. 03/01/2019.	MBS PMT.....	.....290	.....290	.....316	.....290	.....0	0	0	0	0	0	.....290	0	0	0	0	0	0	0	0
3128MJ S3 5	FHLMC G08537.....	.. 03/01/2019.	MBS PMT.....	2,422	2,422	2,387	2,422	0	0	0	0	0	0	.....2,422	0	0	0	0	0	0	0	0
3128MJ UA 6	FHLMC G08576.....	.. 03/01/2019.	MBS PMT.....	1,296	1,296	1,299	1,296	0	0	0	0	0	0	.....1,296	0	0	0	0	0	0	0	0
3128MJ VV 9	FHLMC G08627.....	.. 03/01/2019.	MBS PMT.....	4,158	4,158	4,340	4,159	0	(2)	0	(2)	0	0	.....4,158	0	0	0	0	0	0	0	0
31292S B3 3	FHLMC C09058.....	.. 03/01/2019.	MBS PMT.....	.....1,211	.....1,211	.....1,264	.....1,211	0	(1)	0	(1)	0	0	.....1,211	0	0	0	0	0	0	0	0
3132GK F4 3	FHLMC Q04087.....	.. 03/01/2019.	MBS PMT.....	.....357	.....357	.....363	.....357	0	0	0	0	0	0	.....357	0	0	0	0	0	0	0	0
3132GV L6 7	FHLMC Q09949.....	.. 03/01/2019.	MBS PMT.....	1,076	1,076	1,129	1,076	0	0	0	0	0	0	.....1,076	0	0	0	0	0	0	0	0
3138AW 4W 0	FNMA #AJ5336.....	.. 03/01/2019.	MBS PMT.....	1,818	1,818	1,879	1,819	0	(1)	0	(1)	0	0	.....1,818	0	0	0	0	0	0	0	0
3138M2 A3 0	FNMA #AO9925.....	.. 03/01/2019.	MBS PMT.....	1,610	1,610	1,721	1,611	0	(1)	0	(1)	0	0	.....1,610	0	0	0	0	0	0	0	0
31398Q ZS 9	FHLMC 3745 AV.....	.. 03/01/2019.	MBS PMT.....	7,238	7,238	7,874	7,247	0	(9)	0	(9)	0	0	.....7,238	0	0	0	0	0	0	0	0
3140F9 WA 9	FNMA #BD2440.....	.. 03/01/2019.	MBS PMT.....	4,547	4,547	4,655	4,548	0	(1)	0	(1)	0	0	.....4,547	0	0	0	0	0	0	0	0
3140J5 NM 7	FNMA #BM1295.....	.. 03/01/2019.	MBS PMT.....	5,846	5,846	6,171	5,852	0	(6)	0	(6)	0	0	.....5,846	0	0	0	0	0	0	0	0
31417Y TT 4	FNMA #MA0561.....	.. 03/01/2019.	MBS PMT.....	1,336	1,336	1,391	1,337	0	(1)	0	(1)	0	0	.....1,336	0	0	0	0	0	0	0	0
31418C WV 2	FNMA #MA3359.....	.. 03/01/2019.	MBS PMT.....	4,976	4,976	4,826	4,975	0	2	0	2	0	0	.....4,976	0	0	0	0	0	0	0	0
31418R GS 4	FNMA #AD3808.....	.. 03/01/2019.	MBS PMT.....	378	378	400	379	0	0	0	0	0	0	.....378	0	0	0	0	0	0	0	0
3199999.	Total - Bonds - U.S. Special Revenue and Special Assessments.....			39,819	39,819	41,350	39,839	0	(21)	0	(21)	0	0	.....39,819	0	0	0	0	0	0	0	0
<b>Bonds - U.S. Special Revenue and Special Assessment</b>																						
92343V BC 7	VERIZON COMMUNICATIONS.....	.. 03/29/2019.	CALL at 102.180.....	.....63,352	.....62,000	.....63,849	.....63,376	.....0	(115)	0	(115)	0	0	.....63,262	0	(1,262)	(1,262)	2,244	11/01/2021.	2FE.....		
3899999.	Total - Bonds - Industrial and Miscellaneous.....			63,352	62,000	63,849	63,376	0	(115)	0	(115)	0	0	.....63,262	0	(1,262)	(1,262)	2,244	XXX	XXX		
8399997.	Total - Bonds - Part 4.....			128,965	128,019	130,815	129,254	0	(115)	0	(115)	0	0	.....129,140	0	(1,528)	(1,528)	2,585	XXX	XXX		
8399999.	Total - Bonds.....			128,965	128,019	130,815	129,254	0	(115)	0	(115)	0	0	.....129,140	0	(1,528)	(1,528)	2,585	XXX	XXX		
9999999.	Total - Bonds, Preferred and Common Stocks.....			128,965	XXX	130,815	129,254	0	(115)	0	(115)	0	0	.....129,140	0	(1,528)	(1,528)	2,585	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**

Statement as of March 31, 2019 of the **The Order Of United Commercial Travelers Of America**  
**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	
<b>Open Depositories</b>								
KEYBANK.....	CLEVELAND, OH USA.....		.....0.000	.....0	.....0	.....745,343	.....4,114	.....372,335
AXOS BANK.....	SAN DIEGO, CA USA.....		.....0.000	.....0	.....0	.....0	.....0	.....(945,311)
MODERN WOODMAN BANK.....	ROCK ISLAND, IL USA.....		.....0.300	.....1,304	.....0	.....(818,780)	.....(760,840)	.....0
ROYAL BANK.....	CALGARY, AB CANADA.....		.....0.000	.....0	.....0	.....60,140	.....(62,816)	.....(21,712)
RBC DEXIA.....	TORONTO, ON CANADA.....		.....0.000	.....534	.....0	.....175,677	.....177,926	.....130,286
0199999. Total Open Depositories.....		XXX	XXX	1,838	0	162,380	(641,616)	(464,402)
0399999. Total Cash on Deposit.....		XXX	XXX	1,838	0	162,380	(641,616)	(464,402)
0499999. Cash in Society's Office.....		XXX	XXX	XXX	XXX	2,114	2,114	2,112
0599999. Total Cash.....		XXX	XXX	1,838	0	164,494	(639,502)	(462,290)

**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 AMERN TREAS OBLIG FD.....		12/29/2017	1.050		100,184	.0	.526
8599999. Total - Exempt Money Market Mutual Funds as Identified by the SVO						100,184	.0	.526
<b>All Other Money Market Mutual Funds</b>								
31846V 20 3	FIRST AMERN GOVT OBLIG FD.....		03/29/2019	2.010		111,462	.0	.220
8699999. Total - All Other Money Market Mutual Funds						111,462	.0	.220
8899999. Total - Cash Equivalents						211,646	.0	.746