



QUARTERLY STATEMENT

As of June 30, 2019

of the Condition and Affairs of the

Excess Share Insurance Corporation

NAIC Group Code.....3590, 3590 (Current Period) (Prior Period)	NAIC Company Code..... 10003	Employer's ID Number..... 31-1383517
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... August 17, 1993	Commenced Business..... December 22, 1993	
Statutory Home Office	5656 Frantz Rd. .. Dublin .. OH 43017 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	5656 Frantz Rd. .. Dublin .. OH 43017 (Street and Number) (City or Town, State, Country and Zip Code)	614-764-1900 (Area Code) (Telephone Number)
Mail Address	5656 Frantz Rd. .. Dublin .. OH 43017 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	5656 Frantz Rd. .. Dublin .. OH 43017 (Street and Number) (City or Town, State, Country and Zip Code)	614-764-1900 (Area Code) (Telephone Number)
Internet Web Site Address	www.excessshare.com	
Statutory Statement Contact	Curtis Lee Robson (Name) crobson@americanshare.com (E-Mail Address)	614-764-1900-133 (Area Code) (Telephone Number) (Extension) 614-764-1493 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. Dennis Roy Adams	President	2. Curtis Lee Robson	Secretary
3. Curtis Lee Robson	Treasurer	4.	

OTHER

DIRECTORS OR TRUSTEES

Dennis Roy Adams	Curtis Lee Robson	Thaddeus Joseph Angelle	Bradley Dale Swartzentruber
William Arthur Herring			

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)	(Signature)	(Signature)
Dennis Roy Adams	Curtis Lee Robson	Curtis Lee Robson
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Secretary	Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This 15th day of August, 2019	b. If no:	1. State the amendment number
		2. Date filed
		3. Number of pages attached

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1. Bonds.....	47,915,454		47,915,454	49,903,278
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
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 (\$.....1,010,641), cash equivalents (\$.....6,577,933) and short-term investments (\$.....0).....	7,588,574		7,588,574	4,476,324
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).....	55,504,028	0	55,504,028	54,379,602
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	259,614		259,614	206,851
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....			0	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....597,210 earned but unbilled premiums).....	597,210		597,210	571,470
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....	3,652		3,652	5,052
18.2 Net deferred tax asset.....	506,000	506,000	0	
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.....	262,500	262,500	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	57,133,004	768,500	56,364,504	55,162,975
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	57,133,004	768,500	56,364,504	55,162,975

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. Prepaid Expenses.....	262,500	262,500	0	
2502.			0	
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).....	262,500	262,500	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
		Current Statement Date	December 31 Prior Year
1.	Losses (current accident year \$.....0).....	2,386,000	2,356,000
2.	Reinsurance payable on paid losses and loss adjustment expenses.....		
3.	Loss adjustment expenses.....		
4.	Commissions payable, contingent commissions and other similar charges.....		
5.	Other expenses (excluding taxes, licenses and fees).....	51,133	86,600
6.	Taxes, licenses and fees (excluding federal and foreign income taxes).....		
7.1	Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....		
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 \$.....0 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).....		
10.	Advance premium.....		
11.	Dividends declared and unpaid:		
11.1	Stockholders.....		
11.2	Policyholders.....		
12.	Ceded reinsurance premiums payable (net of ceding commissions).....		
13.	Funds held by company under reinsurance treaties.....		
14.	Amounts withheld or retained by company for account of others.....		
15.	Remittances and items not allocated.....		
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.....	156,408	176,642
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.....	31,215,000	30,055,000
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	33,808,541	32,674,242
27.	Protected cell liabilities.....		
28.	Total liabilities (Lines 26 and 27).....	33,808,541	32,674,242
29.	Aggregate write-ins for special surplus funds.....	0	0
30.	Common capital stock.....	2,500,000	2,500,000
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.....	4,200,000	4,200,000
35.	Unassigned funds (surplus).....	15,855,963	15,788,733
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).....	22,555,963	22,488,733
38.	Totals (Page 2, Line 28, Col. 3).....	56,364,504	55,162,975

DETAILS OF WRITE-INS

2501.	Premium Deposits.....	30,755,000	29,755,000
2502.	Premium Deposit Refunds Due.....	460,000	300,000
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).....	31,215,000	30,055,000
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

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$1,205,269).....	1,205,269	1,171,796	2,313,074
1.2 Assumed..... (written \$0).....			
1.3 Ceded..... (written \$200,705).....	200,705	172,430	344,629
1.4 Net..... (written \$1,004,564).....	1,004,564	999,366	1,968,445
DEDUCTIONS:			
2. Losses incurred (current accident year \$0):			
2.1 Direct.....	30,000	30,000	60,000
2.2 Assumed.....			
2.3 Ceded.....			
2.4 Net.....	30,000	30,000	60,000
3. Loss adjustment expenses incurred.....			
4. Other underwriting expenses incurred.....	1,075,353	837,883	1,798,112
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	1,105,353	867,883	1,858,112
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(100,789)	131,483	110,333
INVESTMENT INCOME			
9. Net investment income earned.....	478,669	375,533	807,560
10. Net realized capital gains (losses) less capital gains tax of \$0.....			
11. Net investment gain (loss) (Lines 9 + 10).....	478,669	375,533	807,560
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$0 amount charged off \$0).....	0		
13. Finance and service charges not included in premiums.....			
14. Aggregate write-ins for miscellaneous income.....	0	0	0
15. Total other income (Lines 12 through 14).....	0	0	0
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	377,880	507,016	917,893
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).....	377,880	507,016	917,893
19. Federal and foreign income taxes incurred.....	79,400	113,000	207,300
20. Net income (Line 18 minus Line 19) (to Line 22).....	298,480	394,016	710,593
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	22,488,733	21,778,140	21,778,140
22. Net income (from Line 20).....	298,480	394,016	710,593
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$0.....			
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....		6,500	14,500
27. Change in nonadmitted assets.....	(231,250)	(194,000)	(14,500)
28. Change in provision for reinsurance.....			
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.....			
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).....	67,230	206,516	710,593
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	22,555,963	21,984,656	22,488,733

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.			
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).....	0	0	0
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

Excess Share Insurance Corporation
CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	978,824	957,936	1,939,915
2. Net investment income.....	420,080	332,418	792,553
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	1,398,904	1,290,354	2,732,468
5. Benefit and loss related payments.....			
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	1,110,820	847,148	1,785,012
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	78,000	129,232	228,232
10. Total (Lines 5 through 9).....	1,188,820	976,380	2,013,244
11. Net cash from operations (Line 4 minus Line 10).....	210,084	313,974	719,224
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	6,000,000	7,000,000	10,000,000
12.2 Stocks.....			
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....			
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	6,000,000	7,000,000	10,000,000
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	4,006,350	7,961,060	11,960,090
13.2 Stocks.....			
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....			
13.7 Total investments acquired (Lines 13.1 to 13.6).....	4,006,350	7,961,060	11,960,090
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).....	1,993,650	(961,060)	(1,960,090)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....	908,516	358,985	1,091,119
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	908,516	358,985	1,091,119
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	3,112,250	(288,101)	(149,747)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	4,476,324	4,626,071	4,626,071
19.2 End of period (Line 18 plus Line 19.1).....	7,588,574	4,337,970	4,476,324

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

20.0001			
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NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

- A. Accounting Practices
The financial statements of Excess Share Insurance Corporation (the Company, or ESI) are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance and in accordance with the NAIC Statutory Principles (NAIC SAP). All of the Company's significant statutory accounting practices are prescribed practices.
- | | SSAP
| F/S
Page | F/S
Line # | Current Year to Date | 2018 |
|--|-----------|-------------|---------------|----------------------|---------------|
| NET INCOME | | | | | |
| (1) Excess Share Insurance Corporation Company state basis
(Page 4, Line 20, Columns 1 & 2) | XXX | XXX | XXX | \$ 298,480 | \$ 710,593 |
| (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 | \$ 298,480 | \$ 710,593 |
| SURPLUS | | | | | |
| (5) Excess Share Insurance Corporation Company state basis
(Page 3, line 37, Columns 1 & 2) | XXX | XXX | XXX | \$ 22,555,963 | \$ 22,488,733 |
| (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 | \$ 22,555,963 | \$ 22,488,733 |
- B. Use of Estimates in the Preparation of the Financial Statement
The preparation of financial statements in conformity with NAIC SAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.
- C. Accounting Policy
No significant changes for 1,3,4,5,7 and 9
- (2). Investments – The Company accounts for its investments in bonds at amortized cost. Bonds consist of obligations issued and guaranteed by the U.S. Government or its agencies. The Company utilizes the level-yield method to amortize premiums and accrete discounts over the stated maturity period of the related investment and is reported in net investment income.

Gains or losses on investments sold are based on the specific identification method and are included in investment income net of tax. Investment purchases and sales are recorded on the trade date. Interest income is accrued when earned.

The Company employs a systematic methodology that considers available evidence in evaluating potential other-than-temporary impairment of investments. In the event that the cost of an investment exceeds its fair value, the Company evaluates, among other factors, the magnitude and duration of the decline in fair value; the financial health of and business outlook for the issuer; changes to the debt rating of the issuer, or specific security, by a rating agency; and the performance of the underlying assets. For debt investments, the ability and intent to hold the security, and the probability that the Company will be unable to collect all amounts due according to contractual terms of a debt security in effect at the date of acquisition is assessed. Once a decline in fair value of an investment security is determined to be other than temporary, an impairment charge is recorded to net realized capital gains and losses, in the statement of income, and a new cost basis in the investment is established.
- (6) Federal Income Taxes – The Company files a Federal income tax return separate from its Parent. The total income taxes of \$78,000 and \$228,232 were paid during 2019 and 2018, respectively.

The Company accounts for deferred income taxes using the asset and liability method, which requires the recognition of deferred tax assets and liabilities for the expected future tax consequences of events that have been included in the financial statements. Deferred tax assets that are not anticipated to be realized within three years are treated as non-admitted assets in the accompanying statutory-basis financial statements. All of the Company's deferred tax assets (\$506,000 at June 30, 2019 and December 31, 2018, relating primarily to its reserve for guaranty losses) are treated as non-admitted assets.
- (8) Reinsurance – Effective February 1, 2017 the Company and its Parent (the “Companies”) entered into a renewal reinsurance agreement with an authorized U.S. third-party reinsurer, for a two-year term through February 1, 2019, to reinsure their excess share insurance program. The renewal agreement had substantially the same terms and conditions as the prior reinsurance agreement that expired on February 1, 2017, including a single layer of aggregate reinsurance coverage of \$7,500,000, aggregate retention of \$7,500,000 and annual premiums of \$375,000, which are allocated between the Companies pro rata based on their monthly excess insurance in force.

Effective February 1, 2019, the Companies entered into a reinsurance agreement with an unauthorized Bermuda reinsurer, wholly-owned by a U.S. insurer and approved as a trustee reinsurer in Ohio and other states, for a two-year term through February 1, 2021. This agreement provides a single layer of aggregate reinsurance coverage of \$9,000,000, per policy year, aggregate retention of \$9,000,000 and annual premiums of \$450,000, which are allocated between the Companies pro rata based on their monthly excess insurance in force.
- D. Going Concern
Based upon an evaluation of relevant conditions and events, management does not have substantial doubt about the Company's ability to continue as a going concern.

Note 2 – Accounting Changes and Corrections of Errors
No significant changes

Note 3 – Business Combinations and Goodwill
Does not apply.

NOTES TO FINANCIAL STATEMENTS

Note 4 – Discontinued Operations

Does not apply

Note 5 – Investments

- A. Mortgage Loans
Does not apply
- B. Debt Restructuring
Does not apply
- C. Reverse Mortgages
Does not apply
- D. Loan-Backed Securities
Does not apply
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
Does not apply
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
Does not apply
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions
Does not apply
- H. Repurchase Agreements Transactions Accounted for as a Sale
Repurchase Transaction – Cash Taker – Overview of Sale Transactions
Does not apply
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Repurchase Transaction – Cash Provider – Overview of Sale Transactions
Does not apply
- J. Real Estate
Does not apply
- K. Low-Income Housing Tax Credits (LIHTC)
Does not apply
- L. Restricted Assets

(1) **Restricted Assets (Including Pledged)**

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted							Current Year			
	Current Year					6 Total From Prior Year	7 Increase/ (Decrease) (5 minus 6)	8 Total Nonadmitted Restricted	9 Total Admitted Restricted (5 minus 8)	Percentage	
	1 Total General Account (G/A)	2 G/A Supporting Protected Cell Account Activity (a)	3 Total Protected Cell Account Restricted Assets	4 Protected Cell Account Assets Supporting G/A Activity (b)	5 Total (1 plus 3)					10	11
										Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown	\$	\$	\$	\$	\$	\$	\$	\$	\$	%	%
b. Collateral held under security lending arrangements										%	%
c. Subject to repurchase agreements										%	%
d. Subject to reverse repurchase agreements										%	%
e. Subject to dollar repurchase agreements										%	%
f. Subject to dollar reverse repurchase agreements										%	%
g. Placed under option contracts										%	%
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock										%	%
i. FHLB capital stock										%	%
j. On deposit with states	3,021,989				3,021,989	3,030,450	(8,461)		3,021,989	5.3%	5.4%
k. On deposit with other regulatory bodies										%	%
l. Pledged as collateral to FHLB (including assets backing funding agreements)										%	%
m. Pledged as collateral not captured in other categories										%	%
n. Other restricted assets										%	%
o. Total Restricted Assets	\$ 3,021,989	\$	\$	\$	\$ 3,021,989	\$ 3,030,450	\$ (8,461)	\$	\$ 3,021,989	5.3%	5.4%

- (a) Subset of column 1
- (b) Subset of column 3
- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28

NOTES TO FINANCIAL STATEMENTS

- (2)

Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contacts that Share Similar Characteristics, Such as Reinsurance and Derivatives, are Reported in the Aggregate) - None
- (3)

Detail of Other Restricted Assets (Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives, are Reported in the Aggregate) - None
- (4)

Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements - None
- M.

Working Capital Finance Investments - Does not apply.
- N.

Offsetting and Netting of Assets and Liabilities - Does not apply.
- O.

Structured Notes - Does not apply.
- P.

5* Securities - Does not apply.
- Q.

Short Sales - Does not apply.
- R.

Prepayment Penalty and Acceleration Fees - Does not apply.

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies
Does not apply

- Note 7 – Investment Income

A.

The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued: The Company does not admit investment income due and accrued if amounts are over 90 days past due (180 days for mortgage loans).
- B.

The total amount excluded - Does not apply

Note 8 – Derivative Instruments
Does not apply

Note 9 – Income Taxes

- A.

Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

	Current		Year	to Date	2018			Change	
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
a. Gross deferred tax assets	\$ 506,000	\$	\$ 506,000	\$ 506,000	\$	\$ 506,000	\$	\$	\$
b. Statutory valuation allowance adjustment									
c. Adjusted gross deferred tax assets (1a-1b)	\$ 506,000	\$	\$ 506,000	\$ 506,000	\$	\$ 506,000	\$	\$	\$
d. Deferred tax assets nonadmitted	506,000		506,000	506,000		506,000			
e. Subtotal net admitted deferred tax asset (1c-1d)	\$	\$	\$	\$	\$	\$	\$	\$	\$
f. Deferred tax liabilities									
g. Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)	\$	\$	\$	\$	\$	\$	\$	\$	\$

2. Admission Calculation Components SSAP No. 101

	Current		Year	to Date	2018			Change	
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below)									
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date									
2. Adjusted gross deferred tax			3,383,394			3,373,310			10,084

NOTES TO FINANCIAL STATEMENTS

	Current Year		to Date	2018			Change		
	1	2	3	4	5	6	7	8	9
	Ordinary	Capital	(Col 1+2) Total	Ordinary	Capital	(Col 4+5) Total	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
assets allowed per limitation threshold									
c. Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities									
d. Deferred tax assets admitted as the result of application of SSAP 101. Total (2(a)+2(b)+2(c))	\$	\$	\$	\$	\$	\$	\$	\$	\$

3. Other Admissibility Criteria

	Current Year to Date	2018
a. Ratio percentage used to determine recovery period and threshold limitation amount	2,774.2%	2,765.9%
b. Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 22,555,963	\$ 22,488,733

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

	Current Year to Date		2018		Change	
	1	2	3	4	5	6
	Ordinary	Capital	Ordinary	Capital	(Col. 1-3) Ordinary	(Col. 2-4) Capital
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 506,000	\$	\$ 506,000	\$	\$	\$
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$	\$	\$	\$	\$	\$
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%	%	%	%

(b) Does the company's tax planning strategies include the use of reinsurance? NO

The ratio percentage presented above for June 30, 2019 and December 31, 2018 represents the ratio of the Company's adjusted statutory surplus and capital to its authorized control level of risk-based capital. The Company's tax planning strategies did not include the use of reinsurance-related tax planning strategies. The impact of tax planning strategies at June 30, 2019 and 2018, are as follows:

	2019			2018			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
Adjusted gross DTAs (% of total adjusted gross	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Net admitted adjusted DTAs (% of total net admitted adjusted gross DTAs)	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

B. Deferred Tax Liabilities

There were no unrecognized DTLs at June 30, 2019 and December 31, 2018.

C. Current and Deferred Income Taxes

1. Current Income Tax

	1	2	3
	Current Year to Date	2018	(Col 1-2) Change
a. Federal	\$ 79,400	\$ 207,300	\$ (127,900)
b. Foreign	\$	\$	\$
c. Subtotal	\$ 79,400	\$ 207,300	\$ (127,900)
d. Federal income tax on net capital gains	\$	\$	\$
e. Utilization of capital loss carry-forwards	\$	\$	\$
f. Other	\$	\$	\$

NOTES TO FINANCIAL STATEMENTS

	1	2	3
	Current Year to Date	2018	(Col 1-2) Change
g. Federal and Foreign income taxes incurred	\$ 79,400	\$ 207,300	\$ (127,900)

2. Deferred Tax Assets

	1	2	3
	Current Year to Date	2018	(Col 1-2) Change
a. Ordinary:			
1. Discounting of unpaid losses	\$	\$	\$
2. Unearned premium reserve			
3. Policyholder reserves			
4. Investments			
5. Deferred acquisition costs			
6. Policyholder dividends accrual			
7. Fixed assets			
8. Compensation and benefits accrual			
9. Pension accrual			
10. Receivables - nonadmitted			
11. Net operating loss carry-forward			
12. Tax credit carry-forward			
13. Other (items <=5% and >5% of total ordinary tax assets)	506,000	506,000	
Other (items listed individually >5%of total ordinary tax assets)			
99. Subtotal	506,000	506,000	
b. Statutory valuation allowance adjustment			
c. Nonadmitted	506,000	506,000	
d. Admitted ordinary deferred tax assets (2a99-2b-2c)			
e. Capital:			
1. Investments	\$	\$	\$
2. Net capital loss carry-forward			
3. Real estate			
4. Other (items <=5% and >5% of total capital tax assets)			
Other (items listed individually >5% of total capital tax assets)			
99. Subtotal	\$	\$	\$
f. Statutory valuation allowance adjustment			
g. Nonadmitted			
h. Admitted capital deferred tax assets (2e99-2f-2g)			
i. Admitted deferred tax assets (2d+2h)	\$	\$	\$

3. Deferred Tax Liabilities - None

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate:
The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The significant items causing this difference at June 30, 2019 and December 31, 2018, were as follows:

Description	At June 30, 2019		
	Pre-Tax Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 377,880	\$ 79,355	21.0%
Other amounts	215	45	21.0%
Total	\$ 378,095	\$ 79,400	21.0%
Federal income taxes incurred expense		\$ 79,400	21.0%
Tax on capital gains		-	-
Change in net deferred income tax benefit		-	-
Total statutory income taxes incurred		\$ 79,400	21.0%

Description	At December 31, 2018		
	Pre-Tax Amount	Tax Effect	Effective Tax Rate
Income before taxes	\$ 917,893	\$ 192,758	21.0%
Other amounts	202	42	21.0%
Total	\$ 918,095	\$ 192,800	21.0%
Federal income taxes incurred expense		\$ 207,300	22.6%
Tax on capital gains		-	-
Change in net deferred income tax benefit		(14,500)	-1.6%
Total statutory income taxes incurred		\$ 192,800	21.0%

NOTES TO FINANCIAL STATEMENTS

E. The Company had no net operating loss carryforwards and no capital loss carryforwards at June 30, 2019 and December 31, 2018. Federal income taxes incurred and available for recoupment in the event of future operating losses were \$79,400 for 2019 and \$207,300 for 2018 as shown below. At June 30, 2019, the Company had no deposits admitted under Internal Revenue Code Section 6603.

Year	Ordinary	Capital	Total
2019	\$ 79,400	-	\$ 79,400
2018	207,300	-	207,300
2017	N/A	-	N/A
Total	\$ 286,700	-	\$ 286,700

F. The Company files a stand-alone federal income tax return separate from that of its parent, American Mutual Share Insurance Corporation.

G. At June 30 2019, the Company had no tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

H. Repatriation Transition Tax (RTT) - RTT owed under the TCJA - None

I. Alternative Minimum Tax (AMT Credit) - None.

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

Monthly cost sharing services fee increased from \$102,950 in 2018 to \$122,000 in 2019. No other significant changes.

Note 11 – Debt

Does not apply

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

Does not apply

Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

No significant changes

Note 14 – Liabilities, Contingencies and Assessments

The Company has no liabilities, contingent commitments, guarantees or similar obligations, and is not aware of any assessments or gain contingencies.

Note 15 – Leases

Does not apply

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

Does not apply

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

Does not apply

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

Does not apply

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

Does not apply

Note 20 – Fair Value Measurements

A. Fair Value Measurements

With regard to the Company's financial assets that are disclosed at fair value, which is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date, the Company uses various valuation approaches, including quoted market prices and discounted cash flows. The Accounting Standards Codification ("ASC") and SSAP No. 100 "*Fair Value Measurement*" establishes a hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring that the most observable inputs be used when available. Observable inputs are obtained from independent sources and can be validated by a third party, whereas, unobservable inputs reflect assumptions regarding what a third party would use in pricing an asset or liability. The fair value hierarchy is broken down into three levels based on the reliability of inputs as follows:

Level 1 - Valuations based on quoted prices in active markets for identical instruments that the Company is able to access. Since valuations are based on quoted prices that are readily and regularly available in an active market, valuation of these products does not entail a significant degree of judgment.

Level 2 - Valuations based on quoted prices in active markets for instruments that are similar, or quoted prices in markets that are not active for identical or similar instruments, and model-derived valuations in which all significant inputs and significant value drivers are observable in active markets.

Level 3 - Valuations based on inputs that are unobservable and significant to the overall fair value measurement.

Reclassification of certain financial instruments may occur when observability of inputs change. There were no transfers between assets carried at fair value classified within Level 1 and Level 2 of the fair value hierarchy during the periods ended June 30, 2019 and December 31, 2018.

There were no purchases, sales, transfers into, or transfers out of assets carried at fair value and classified within Level 3 of the fair value hierarchy during the periods ended June 30, 2019 and December 31, 2018.

The Company does not have any material financial assets or liabilities carried at fair value.

There were no assets or liabilities measured and reported at fair value on a non-recurring basis in 2019 or 2018.

Fair Value of Financial Instruments:

NOTES TO FINANCIAL STATEMENTS

The following methods and assumptions were used to estimate the fair value of financial instruments.

Level 1 - Financial assets include cash and cash equivalents. Unadjusted quoted prices for these securities are provided by an independent pricing service.

Level 2 - Financial assets include US Treasury and US Government agency bonds. Prices are provided using third-party pricing services, such as model-based pricing methods that utilize observable market data as inputs. Broker-dealer bids or quotes of securities with similar characteristics may also be used.

(1) Fair Value Measurements at Reporting Date

Description for Each Type of Asset or Liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
Assets at Fair Value					
Bonds	\$	\$ 47,758,145	\$	\$	\$ 47,758,145
Cash and cash equivalents	\$ 6,988,574	\$ 600,000	\$	\$	\$ 7,588,574
Total	\$ 6,988,574	\$ 48,358,145	\$	\$	\$ 55,346,719
Liabilities at Fair Value					
	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements - Does not apply.

C. Fair Value Level - Does not apply.

D. Not Practicable to Estimate Fair Value - Does not apply.

E. NAV Practical Expedient Investments - Does not apply.

Note 21 – Other Items
Does not apply

Note 22 – Events Subsequent

The Company evaluated all events or transactions that occurred after June 30, 2019 and through August 15, 2019, the date the financial statements were available to be issued by the Company. During this period, the Company did not have any material recognizable or non-recognizable subsequent events.

A.	Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	Yes [] No [X]	
		2019	2018
B.	ACA fee assessment payable for the upcoming year		
C.	ACA fee assessment paid		
D.	Premium written subject to ACA 9010 assessment		
E.	Total adjusted capital before surplus adjustment (Five-Year Historical Line 28)		
F.	Total adjusted capital (Five-Year Historical Line 28 minus 22B above)		
G.	Authorized control level (Five-Year Historical Line 29)		
H.	Would reporting the ACA assessment as of current year to date have triggered an RBC action level (YES/NO)?	Yes [] No [X]	

Note 23 – Reinsurance
Does not appy

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination
Does not apply

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

The Company writes only one line of business, “Other” (excess share insurance) and sets loss reserves on a prudent basis for potential claims events. Excess insurance claims events are infrequent (rare) but potentially severe and as a result, upon consultation with the Company’s independent actuary, the Company provides annual loss reserve additions so that cumulative loss reserves are within an actuarially accepted range. Further, since the Company has no specific loss events identified, for which a loss reserve would normally be established, all of the Company’s loss reserves are unallocated IBNR loss reserves. As a result, for purposes of Schedule P, in any given year the cumulative loss reserves held are considered to have occurred as follows: (1) 60% in current year; (2) 30% in the previous year; and (3)10% in the second previous year and have been allocated as such in Schedule P, which is comparable to methods used by other insurance companies with infrequent claims events. Since claims events are rare (infrequent but potentially severe), the typical year shows favorable development. A summary of the favorable loss development for the Company’s single line of business (“Other”) follows (dollars in thousands):

NOTES TO FINANCIAL STATEMENTS

	Col. 1	Col. 2	Col. 3	Col. 4	Col. 5
Year of Development	Prior Year (2018) Loss Reserves Allocated	Current Year (2019) Loss Reserves Allocated	Current Calendar Year (2019) Losses and LAE Incurred (Col 2 - Col 1)	Schedule P Part 2 Unfavorable (Favorable) Development (Col 2 - Col 1)	Gross Losses Incurred for Unallocated IBNR Loss Reserves (Col 3 - Col 4)
2016	\$ 235	N/A		\$ (235)	
2017	707	238		(469)	
2018	1,414	716		(698)	
2019	N/A	1,432		N/A	
Total Loss Reserves	<u>\$ 2,356</u>	<u>\$ 2,386</u>	<u>\$ 30</u>	<u>\$ (1,402)</u>	<u>\$ 1,432</u>

No additional premiums have been accrued as a result of the impact of the changes in the provision for incurred loss and LAE expenses attributable to insured events of prior years.

Note 26 – Intercompany Pooling Arrangements
Does not apply

Note 27 – Structured Settlements
Does not apply

Note 28 – Health Care Receivables
Does not apply

Note 29 – Participating policies
Does not apply

Note 30 – Premium Deficiency Reserves

The Company provides deposit insurance to participating credit unions generally for up to \$250,000 in excess of the insurance limit imposed by the credit union's primary insurer. Credit unions insured under the Company's excess insurance contract are required to maintain a premium deposit with the Company equal to 1% of the aggregate limits of liability. The premium deposits are recorded as a liability by the Company and are non-interest bearing. The investment earnings therefrom in addition to a monthly risk-based premium charge are used to fund the Company's deposit insurance program. The premium deposits are at-risk to the insured credit unions and ultimately can act as a reserve that is available to pay claims if needed. The aggregate of premium deposits that are available to pay claims are \$30,755,000 at June 30, 2019. Therefore the Company has determined there is not a need for a premium deficiency reserve and none has been recorded at June 30, 2019. This evaluation was completed on August 5, 2019. The Company considers investment income when evaluating the need for premium deficiency reserves.

1.

Liability carried for premium deficiency reserve:

\$0
2.

Date of most recent evaluation of this liability:

August 5, 2019
3.

Was anticipated investment income utilized in the calculation?

Yes [X] No []

Note 31 – High Deductibles
Does not apply

Note 32 – Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses
Does not apply

Note 33 – Asbestos/Environmental Reserves
Does not apply

Note 34 – Subscriber Savings Accounts
Does not apply

Note 35 – Multiple Peril Crop Insurance
Does not apply

Note 36 – Financial Guaranty Insurance
Does not apply

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?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes [☒ X] No [☐]

3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [☐] No [☒ X]

3.3

If the response to 3.2 is yes, provide a brief description of those changes.

3.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [☐] No [☒ X]

3.5

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

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.

Yes [☐] No [☒ X]

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	3
Name of Entity	NAIC Company Code	State of Domicile

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes [☐] No [☐] N/A [☒ X]

6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2017

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.

12/31/2017

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).

05/16/2019

6.4

By what department or departments?
Ohio Department 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	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	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?

(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.

Yes [☒ X] No [☐]

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 ☒

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 ☒

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 ☒

14.2 If yes, please complete the following:

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

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes ☐ No ☒

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 ☒ No ☐

17.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian Address
CITIZENS INVESTMENT MGT. SVC	P.O. BOX 9587, PROVIDENCE, RHODE ISLAND 0294
US BANK INSTITUTIONAL TRUST	425 EAST WALNUT ST., CINNCINATTI, OHIO 45202

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

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes ☐ No ☒

17.4 If yes, give full and complete information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets?

Yes ☐ 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 ☒

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

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes ☒ 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?

If yes, attach an explanation.

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

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?

If yes, attach an explanation.

Yes [] No [X]

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 Maximum 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	0
Total	XXX	XXX	0	0	0	0	0	0	0	0

5.

Operating Percentages:

5.1 A&H loss percent

5.2 A&H cost containment percent

5.3 A&H expense percent excluding cost containment expenses

0.000%

0.000%

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 []

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1	2	3	4	5	6	7
NAIC Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating

NONE

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...	71,933	70,289				
2.	Alaska.....AK	...N...						
3.	Arizona.....AZ	...N...						
4.	Arkansas.....AR	...L...	16,076	11,177				
5.	California.....CA	...N...						
6.	Colorado.....CO	...L...	7,280	4,865				
7.	Connecticut.....CT	...N...						
8.	Delaware.....DE	...L...	13,877	12,788				
9.	District of Columbia.....DC	...L...	34,806	25,900				
10.	Florida.....FL	...L...	63,760	65,545				
11.	Georgia.....GA	...L...	11,852	10,406				
12.	Hawaii.....HI	...L...	4,460					
13.	Idaho.....ID	...L...	39,462	34,927				
14.	Illinois.....IL	...L...	65,848	92,415				
15.	Indiana.....IN	...L...	73,373	65,307				
16.	Iowa.....IA	...L...	11,948	13,049				
17.	Kansas.....KS	...L...	1,284	2,324				
18.	Kentucky.....KY	...L...	27,305	21,610				
19.	Louisiana.....LA	...N...						
20.	Maine.....ME	...L...	28,880	26,296				
21.	Maryland.....MD	...L...	38,719	31,528				
22.	Massachusetts.....MA	...N...						
23.	Michigan.....MI	...L...	61,065	64,962				
24.	Minnesota.....MN	...L...	52,461	43,802				
25.	Mississippi.....MS	...N...						
26.	Missouri.....MO	...L...	21,780	20,119				
27.	Montana.....MT	...N...						
28.	Nebraska.....NE	...N...						
29.	Nevada.....NV	...L...	36,831	39,074				
30.	New Hampshire.....NH	...L...	34,164	45,198				
31.	New Jersey.....NJ	...L...	32,035	27,749				
32.	New Mexico.....NM	...N...						
33.	New York.....NY	...N...						
34.	North Carolina.....NC	...L...	12,540	7,108				
35.	North Dakota.....ND	...L...	2,728	2,072				
36.	Ohio.....OH	...L...	134,445	146,130				
37.	Oklahoma.....OK	...L...	16,425	16,026				
38.	Oregon.....OR	...L...	5,487	5,042				
39.	Pennsylvania.....PA	...L...	83,678	76,737				
40.	Rhode Island.....RI	...N...						
41.	South Carolina.....SC	...L...	17,473	14,546				
42.	South Dakota.....SD	...N...						
43.	Tennessee.....TN	...L...	20,632	18,675				
44.	Texas.....TX	...L...	96,791	96,454				
45.	Utah.....UT	...L...						
46.	Vermont.....VT	...N...						
47.	Virginia.....VA	...N...						
48.	Washington.....WA	...L...	65,871	59,676				
49.	West Virginia.....WV	...N...						
50.	Wisconsin.....WI	...N...						
51.	Wyoming.....WY	...N...						
52.	American Samoa.....AS	...N...						
53.	Guam.....GU	...N...						
54.	Puerto Rico.....PR	...N...						
55.	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	2,386,000	2,326,000
59.	Totals.....	...XXX...	1,205,269	1,171,796	0	0	2,386,000	2,326,000

DETAILS OF WRITE-INS

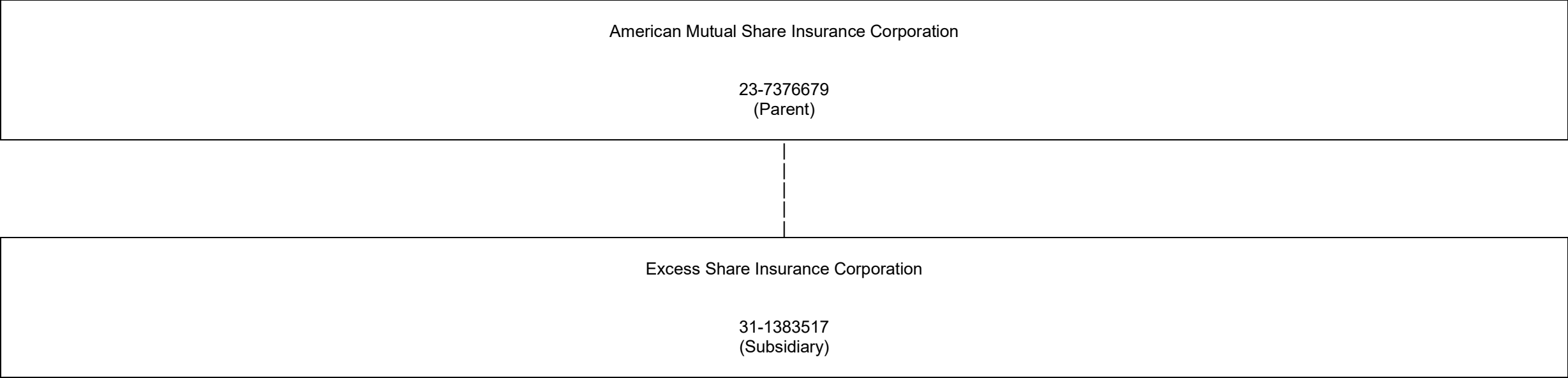
58001. Unassigned.....	...XXX...					2,386,000	2,326,000
58002.....	...XXX...						
58003.....	...XXX...						
58998. Summary of remaining write-ins for Line 58 from overflow page....	...XXX...	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....	...XXX...	0	0	0	0	2,386,000	2,326,000

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	33	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).....	0	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.....	24

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	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)	*
Members															
03590	American Mutual Share Ins....	10003...	31-1383517..	.....	.....	.....	Excess Share Insurance Corporation.....	OH.....	RE.....	American Mutual Share Insurance Corporation	Ownership.....	100.000	American Mutual Share Insurance Corporation	Y.....	.....
03590	American Mutual Share Ins....	12700...	23-7376679..	.....	.....	.....	American Mutual Share Insurance Corporation..	OH.....	UDP.....	American Mutual Share Insurance Corporation	Ownership.....	100.000	American Mutual Share Insurance Corporation	Y.....	.....

Excess Share Insurance Corporation
PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....			0.000	
2. Allied lines.....			0.000	
3. Farmowners multiple peril.....			0.000	
4. Homeowners multiple peril.....			0.000	
5. Commercial multiple peril.....			0.000	
6. Mortgage guaranty.....			0.000	
8. Ocean marine.....			0.000	
9. Inland marine.....			0.000	
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.....			0.000	
17.1. Other liability-occurrence.....			0.000	
17.2. Other liability-claims made.....			0.000	
17.3. Excess workers' compensation.....			0.000	
18.1. Products liability-occurrence.....			0.000	
18.2. Products liability-claims made.....			0.000	
19.1, 19.2. Private passenger auto liability.....			0.000	
19.3, 19.4. Commercial auto liability.....			0.000	
21. Auto physical damage.....			0.000	
22. Aircraft (all perils).....			0.000	
23. Fidelity.....			0.000	
24. Surety.....			0.000	
26. Burglary and theft.....			0.000	
27. Boiler and machinery.....			0.000	
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.....	1,205,269	30,000	2.489	2.560
35. Totals.....	1,205,269	30,000	2.489	2.560
DETAILS OF WRITE-INS				
3401. Guaranty of Share Deposits in Credit Unions.....	1,205,269	30,000	2.489	2.560
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).....	1,205,269	30,000	2.489	2.560

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....			
2. Allied lines.....			
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....			
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....			
10. Financial guaranty.....			
11.1. Medical professional liability - occurrence.....			
11.2. Medical professional liability - claims made.....			
12. Earthquake.....			
13. Group accident and health.....			
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1. Other liability-occurrence.....			
17.2. Other liability-claims made.....			
17.3. Excess workers' compensation.....			
18.1. Products liability-occurrence.....			
18.2. Products liability-claims made.....			
19.1 19.2. Private passenger auto liability.....			
19.3 19.4. Commercial auto liability.....			
21. Auto physical damage.....			
22. Aircraft (all perils).....			
23. Fidelity.....			
24. Surety.....			
26. Burglary and theft.....			
27. Boiler and machinery.....			
28. Credit.....			
29. International.....			
30. Warranty.....			
31. Reinsurance-nonproportional assumed property.....	XXX	XXX	XXX
32. Reinsurance-nonproportional assumed liability.....	XXX	XXX	XXX
33. Reinsurance-nonproportional assumed financial lines.....	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business.....	603,778	1,205,269	1,171,796
35. Totals.....	603,778	1,205,269	1,171,796
DETAILS OF WRITE-INS			
3401. Guaranty of Share Deposits in Credit Unions.....	603,778	1,205,269	1,171,796
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).....	603,778	1,205,269	1,171,796

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2019 Loss and LAE Payments on Claims Reported as of Prior Year-End	2019 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2019 Loss and LAE Payments (Cols. 4 + 5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year-End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year-End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols. 7 + 8 + 9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 4 + 7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/Deficiency (Cols. 5 + 8 + 9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/Deficiency (Cols. 11 + 12)
1. 2016 + Prior.....		235	235			0				0	0	(235)	(235)
2. 2017.....		707	707			0			238	238	0	(469)	(469)
3. Subtotals 2017 + Prior.....	0	942	942	0	0	0	0	0	238	238	0	(704)	(704)
4. 2018.....		1,414	1,414			0			716	716	0	(698)	(698)
5. Subtotals 2018 + Prior.....	0	2,356	2,356	0	0	0	0	0	954	954	0	(1,402)	(1,402)
6. 2019.....	XXX	XXX	XXX	XXX		0	XXX		1,432	1,432	XXX	XXX	XXX
7. Totals.....	0	2,356	2,356	0	0	0	0	0	2,386	2,386	0	(1,402)	(1,402)
8. Prior Year- End's Surplus As Regards Policyholders	22,489										Col. 11, Line 7 As % of Col. 1, Line 7	Col. 12, Line 7 As % of Col. 2, Line 7	Col. 13, Line 7 As % of Col. 3, Line 7
											1. ....0.0 %	2. ....(59.5)%	3. ....(59.5)%
													Col. 13, Line 7 Line 8
													4.(6.2)%

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

Excess Share Insurance Corporation
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

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.....	49,903,278	47,935,427
2. Cost of bonds and stocks acquired.....	4,006,350	11,960,090
3. Accrual of discount.....	6,449	7,761
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration for bonds and stocks disposed of.....	6,000,000	10,000,000
7. Deduct amortization of premium.....	623	
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).....	47,915,454	49,903,278
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	47,915,454	49,903,278

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

	1	2	3	4	5	6	7	8
NAIC Designation	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	48,912,411	1,000,000	2,000,000	3,043	48,912,411	47,915,454		49,903,278
2. NAIC 2 (a).....						0		
3. NAIC 3 (a).....						0		
4. NAIC 4 (a).....						0		
5. NAIC 5 (a).....						0		
6. NAIC 6 (a).....						0		
7. Total Bonds.....	48,912,411	1,000,000	2,000,000	3,043	48,912,411	47,915,454	0	49,903,278
PREFERRED STOCK								
8. NAIC 1.....						0		
9. NAIC 2.....						0		
10. NAIC 3.....						0		
11. NAIC 4.....						0		
12. NAIC 5.....						0		
13. NAIC 6.....						0		
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	48,912,411	1,000,000	2,000,000	3,043	48,912,411	47,915,454	0	49,903,278

(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.

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

SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	3,146,384	3,088,160
2. Cost of cash equivalents acquired.....	7,439,135	16,334,788
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	4,007,586	16,276,564
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).....	6,577,933	3,146,384
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	6,577,933	3,146,384

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	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation and Administrative Symbol/Market Indicator (a)
Bonds - SVO Identified Funds									
3134GT DW 0	FHLMC DEB DTD 04-30-2019.....		04/03/2019.....	FIFTH THIRD SECURITIES.....		1,000,000	1,000,000		1
8199999	Total - Bonds - SVO Identified Funds.....					1,000,000	1,000,000	0	XXX
8399997	Total - Bonds - Part 3.....					1,000,000	1,000,000	0	XXX
8399999	Total - Bonds.....					1,000,000	1,000,000	0	XXX
9999999	Total - Bonds, Preferred and Common Stocks.....					1,000,000	XXX	0	XXX

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

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation and Admini- strative Symbol/ Market Indicator (a)
Bonds - SVO Identified Funds																					
3134GS H4 0	FHLMC DEB DTD 12-20-2018.....	..	06/20/2019.	FIFTH THIRD SECURITIES.....		2,000,000	2,000,000	2,000,000	2,000,000	.....	.....	.....	.....0	.....	.....2,000,000	.....	.....	.....0	31,500	.....	1.....
81999999.	Total - Bonds - SVO Identified Funds.....					2,000,000	2,000,000	2,000,000	2,000,000	0	0	0	0	0	2,000,000	0	0	0	31,500	XXX	XXX
83999997.	Total - Bonds - Part 4.....					2,000,000	2,000,000	2,000,000	2,000,000	0	0	0	0	0	2,000,000	0	0	0	31,500	XXX	XXX
83999999.	Total - Bonds.....					2,000,000	2,000,000	2,000,000	2,000,000	0	0	0	0	0	2,000,000	0	0	0	31,500	XXX	XXX
99999999.	Total - Bonds, Preferred and Common Stocks.....					2,000,000	XXX	2,000,000	2,000,000	0	0	0	0	0	2,000,000	0	0	0	31,500	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

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount or interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
CORPORATE CHECKING.....	US BANK;COLUMBUS, OHIO.....				928,834	1,376,313	410,641	XXX
CD #1811230747465 Due 7/9/2019.....	WELLS FARGO;FLORIDA.....	SD.....	126	28	500,000	500,000	500,000	XXX
CD #140506967 Due 6/11/2020.....	REGIONS BANK;ARKANSAS.....	SD.....	6	3	50,000	50,000	50,000	XXX
CD #140506968 Due 6/11/2020.....	REGIONS BANK;ARKANSAS.....	SD.....	6	3	50,000	50,000	50,000	XXX
0199999. Total Open Depositories.....	XXX	XXX	139	34	1,528,834	1,976,313	1,010,641	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	139	34	1,528,834	1,976,313	1,010,641	XXX
0599999. Total Cash.....	XXX	XXX	139	34	1,528,834	1,976,313	1,010,641	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1			2				3	4	5	6	7	8	9
CUSIP			Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year			
Exempt Money Market Mutual Funds as Identified by the SVO													
31846V	45	0	FIRST AMERICAN US TREASURY MMF		12/31/2019.....			2,781,141	2,593	10,334			
31846V	45	0	FIRST AMERICAN US TREASURY MMF	SD	12/31/2019.....			11,540	20	109			
31846V	45	0	FIRST AMERICAN US TREASURY MMF		12/31/2019.....			3,560,252	5,179	29,237			
31846V	41	9	FIRST AMERICAN TREASURY OBLIGATIONS FU	SD	12/31/2019.....			200,000	348	2,105			
94975H	29	6	WELL FARGO TREASURY PLUS MM INST	SD	12/31/2019.....			25,000	140	272			
8599999. Total - Exempt Money Market Mutual Funds as Identified by the SVO								6,577,933	8,280	42,056			
8899999. Total - Cash Equivalents								6,577,933	8,280	42,056			