



QUARTERLY STATEMENT

As of June 30, 2019
of the Condition and Affairs of the

North American Swiss Alliance

NAIC Group Code.... 0, 0 (Current Period) (Prior Period)	NAIC Company Code.... 56375	Employer's ID Number.... 34-0719168
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.... September 6, 1889	Commenced Business..... September 6, 1889	
Statutory Home Office	26777 Lorain Road, Suite 321 .. North Olmsted .. OH .. US .. 44070-3225 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	26777 Lorain Road, Suite 321 .. North Olmsted .. OH .. US .. 44070-3225 (Street and Number) (City or Town, State, Country and Zip Code)	440-777-7114 (Area Code) (Telephone Number)
Mail Address	26777 Lorain Road, Suite 321 .. North Olmsted .. OH .. US .. 44070-3225 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	26777 Lorain Road, Suite 321 .. North Olmsted .. OH .. US .. 44070-3225 (Street and Number) (City or Town, State, Country and Zip Code)	440-777-7114 (Area Code) (Telephone Number)
Internet Web Site Address	n/a	
Statutory Statement Contact	Lynn M. Kosin (Name) naswiss@sbcglobal.net (E-Mail Address)	440-777-7114 (Area Code) (Telephone Number) (Extension) (Fax Number)

OFFICERS

Name	Title	Name	Title
1. Jan A. Markowski	President	2. Lynn M. Kosin	Secretary/Treasurer
3. Donald P Robison	Vice-President	4.	
Kevin M. Ruedy	Financial Advisor		

OTHER

DIRECTORS OR TRUSTEES

Lynn M. Kosin	Kevin M. Ruedy	Jan A Markowski	Donald P. Robison
John J. Jencson	David E. Stucki	Darlene Kilchenmann	Thomas M. Vassallo

State of..... Ohio
County of.... Cuyahoga

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) Jan A. Markowski 1. (Printed Name) President (Title)	(Signature) Lynn M. Kosin 2. (Printed Name) Secretary/Treasurer (Title)	(Signature) Donald P Robison 3. (Printed Name) Vice-President (Title)
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Subscribed and sworn to before me
This _____ day of _____

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

Yes [X] No []

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	3,125,257		3,125,257	3,084,232
2. Stocks:				
2.1 Preferred stocks.....	250,139		250,139	268,889
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 (\$....58,386), cash equivalents (\$.....0) and short-term investments (\$.....0).....	58,386		58,386	68,993
6. Contract loans (including \$.....0 premium notes).....	4,069		4,069	4,069
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).....	3,437,851	0	3,437,851	3,426,183
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	47,964		47,964	47,277
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 \$.....0 earned but unbilled premiums).....			0	
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.....			0	
18.2 Net deferred tax asset.....			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.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	3,485,815	0	3,485,815	3,473,460
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	3,485,815	0	3,485,815	3,473,460

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.....				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).....	0	0	0	0

North American Swiss Alliance

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).....	2,537,791	2,552,791
2. Aggregate reserve for accident and health contracts (including \$.....0 Modco Reserve).....		
3. Liability for deposit-type contracts (including \$.....0 Modco Reserve).....		
4. Contract claims:		
4.1 Life.....	3,892	5,111
4.2 Accident and health.....		
5. Policyholders' dividends/refunds to members \$.....0 and coupons \$.....0 due and unpaid.....		
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).....	10,000	10,000
6.2 Policyholder's dividends/refunds to members not yet apportioned (including \$.....0 Modco).....		
6.3 Coupons and similar benefits (including \$.....0 Modco).....		
7. Amount provisionally held for deferred dividend policies not included in Line 6.....		
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums.....		
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....		
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.....		
9.3 Other amounts payable on reinsurance, including \$.....0 assumed and \$.....0 ceded.....		
9.4 Interest Maintenance Reserve.....	80,154	88,681
10. Commissions to agents due or accrued - life and annuity contracts \$.....0, accident and health \$.....0 and deposit-type contract funds \$.....0.....		
11. Commissions and expense allowances payable on reinsurance assumed.....		
12. General expenses due or accrued.....	3,375	
13. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves, net of reinsured allowances).....		
14. Taxes, licenses and fees due or accrued, excluding federal income taxes.....		
15.1 Current federal and foreign income taxes, including \$.....0 on realized capital gains (losses).....		
15.2 Net deferred tax liability.....		
16. Unearned investment income.....		
17. Amounts withheld or retained by reporting entity as agent or trustee.....	1,656	1,447
18. Amounts held for agents' account, including \$.....0 agents' credit balances.....		
19. Remittances and items not allocated.....		
20. Net adjustment in assets and liabilities due to foreign exchange rates.....		
21. Liability for benefits for employees and agents if not included above.....		
22. Borrowed money \$.....0 and interest thereon \$.....0.....		
23. Dividends to stockholders declared and unpaid.....		
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve.....	22,085	22,023
24.02 Reinsurance in unauthorized and certified (\$.....0) companies.....		
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....		
24.04 Payable to parent, subsidiaries and affiliates.....		
24.05 Drafts outstanding.....		
24.06 Liability for amounts held under uninsured plans.....		
24.07 Funds held under coinsurance.....		
24.08 Derivatives.....		
24.09 Payable for securities.....		
24.10 Payable for securities lending.....		
24.11 Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....	2,658,953	2,680,053
27. From Separate Accounts statement.....		
28. Total liabilities (Lines 26 and 27).....	2,658,953	2,680,053
29. Common capital stock.....		
30. Preferred capital stock.....		
31. Aggregate write-ins for other-than-special surplus funds.....	0	0
32. Surplus notes.....		
33. Gross paid in and contributed surplus.....		
34. Aggregate write-ins for special surplus funds.....	33,673	33,673
35. Unassigned funds (surplus).....	793,189	759,734
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 29 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 30 \$.....0).....		
37. Surplus (Total Lines 31 + 32 + 33 + 34 + 35 - 36) (including \$.....0 in Separate Accounts Statement).....	826,862	793,407
38. Totals of Lines 29, 30 and 37.....	826,862	793,407
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3).....	3,485,815	3,473,460

DETAILS OF WRITE-INS

2501.....		
2502.....		
2503.....		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
3101.....		
3102.....		
3103.....		
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. Relief and Benevolent Funds.....	33,673	33,673
3402.....		
3403.....		
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).....	33,673	33,673

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.....	11,735	7,941	17,265
2. Considerations for supplementary contracts with life contingencies.....			
3. Net investment income.....	82,247	82,690	158,514
4. Amortization of Interest Maintenance Reserve (IMR).....	.8,527	11,930	24,635
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....			
6. Commissions and expense allowances on reinsurance ceded.....			
7. Reserve adjustments on reinsurance ceded.....			
8. Miscellaneous Income:			
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....			
8.2 Charges and fees for deposit-type contracts.....	0	.13	.14
8.3 Aggregate write-ins for miscellaneous income.....			
9. Totals (Lines 1 to 8.3).....	102,509	102,574	200,428
10. Death benefits.....	20,090	21,039	54,550
11. Matured endowments (excluding guaranteed annual pure endowments).....	3,572	1,259	6,143
12. Annuity benefits.....			
13. Disability benefits and benefits under accident and health contracts.....			
14. Coupons, guaranteed annual pure endowments and similar benefits.....			
15. Surrender benefits and withdrawals for life contracts.....	10,327	9,405	12,786
16. Group conversions.....			
17. Interest and adjustments on contract or deposit-type contract funds.....			
18. Payments on supplementary contracts with life contingencies.....			
19. Increase in aggregate reserves for life and accident and health contracts.....	(15,000)	(15,000)	(4,209)
20. Totals (Lines 10 to 19).....	18,989	16,703	69,270
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....			
22. Commissions and expense allowances on reinsurance assumed.....			
23. General insurance expenses and fraternal expenses.....	49,179	63,210	101,571
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	2,160	2,430	3,597
25. Increase in loading on deferred and uncollected premiums.....			
26. Net transfers to or (from) Separate Accounts net of reinsurance.....			
27. Aggregate write-ins for deductions.....	0	0	0
28. Totals (Lines 20 to 27).....	70,328	82,343	174,438
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28).....	32,181	20,231	25,990
30. Dividends to policyholders and refunds to members.....	3,926	3,920	7,795
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	28,255	16,311	18,195
32. Federal and foreign income taxes incurred (excluding tax on capital gains).....			
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).....	28,255	16,311	18,195
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).....			
35. Net income (Line 33 plus Line 34).....	28,255	16,311	18,195
CAPITAL AND SURPLUS ACCOUNT			
36. Capital and surplus, December 31, prior year.....	.793,407	.751,522	.751,522
37. Net income (Line 35).....	28,255	16,311	18,195
38. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0.....	.5,262	18,139	14,093
39. Change in net unrealized foreign exchange capital gain (loss).....			
40. Change in net deferred income tax.....			
41. Change in nonadmitted assets.....			
42. Change in liability for reinsurance in unauthorized and certified companies.....			
43. Change in reserve on account of change in valuation basis, (increase) or decrease.....			
44. Change in asset valuation reserve.....	(62)	10,580	.9,597
45. Change in treasury stock.....			
46. Surplus (contributed to) withdrawn from Separate Accounts during period.....			
47. Other changes in surplus in Separate Accounts Statement.....			
48. Change in surplus notes.....			
49. Cumulative effect of changes in accounting principles.....			
50. Capital changes:			
50.1 Paid in.....			
50.2 Transferred from surplus (Stock Dividend).....			
50.3 Transferred to surplus.....			
51. Surplus adjustment:			
51.1 Paid in.....			
51.2 Transferred to capital (Stock Dividend).....			
51.3 Transferred from capital.....			
51.4 Change in surplus as a result of reinsurance.....			
52. Dividends to stockholders.....	0	0	0
53. Aggregate write-ins for gains and losses in surplus.....	33,455	45,030	41,885
54. Net change in capital and surplus (Lines 37 through 53).....			
55. Capital and surplus as of statement date (Lines 36 + 54).....	.826,862	.796,552	.793,407

DETAILS OF WRITE-INS

08.301.			
08.302. REFUNDS AND DISCOUNTS.....		.13	.14
08.303.			
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above).....	0	.13	.14
2701.			
2702.			
2703.			
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.			
5302.			
5303.			
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

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.....	11,735	7,941	17,265
2. Net investment income.....	91,506	90,364	177,194
3. Miscellaneous income.....		13	14
4. Total (Lines 1 through 3).....	103,241	98,318	194,473
5. Benefit and loss related payments.....	35,208	33,567	73,232
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	47,964	65,640	105,168
8. Dividends paid to policyholders.....	3,926	3,920	7,795
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....			
10. Total (Lines 5 through 9).....	87,098	103,127	186,195
11. Net cash from operations (Line 4 minus Line 10).....	16,143	(4,809)	8,278
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	50,000	25,842	56,199
12.2 Stocks.....	18,750	25,000	25,000
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).....	68,750	50,842	81,199
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	95,709	125,482	148,395
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).....	95,709	125,482	148,395
14. Net increase or (decrease) in contract loans and premium notes.....		139	182
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(26,959)	(74,779)	(67,378)
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).....	209	184	249
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	209	184	249
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).....	(10,607)	(79,404)	(58,851)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	68,993	127,844	127,844
19.2 End of period (Line 18 plus Line 19.1).....	58,386	48,440	68,993

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

20,001			
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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.....			
2. Ordinary life insurance.....	11,735	7,941	17,265
3. Ordinary individual annuities.....			
4. Credit life (group and individual).....			
5. Group life insurance.....			
6. Group annuities.....			
7. A&H - group.....			
8. A&H - credit (group and individual).....			
9. A&H - other.....			
10. Aggregate of all other lines of business.....	0	0	0
11. Subtotal (Lines 1 through 10).....	11,735	7,941	17,265
12. Fraternal (Fraternal Benefit Societies Only).....			
13. Subtotal (Lines 11 through 12).....	11,735	7,941	17,265
14. Deposit-type contracts.....			
15. Total (Lines 13 and 14).....	11,735	7,941	17,265

DETAILS OF WRITE-INS

1001.....			
1002.....			
1003.....			
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

	SSAP #	F/S Page	F/S Line #	Current Year to Date	2018
NET INCOME					
(1) North American Swiss Alliance Company state basis (Page 4, Line 35, Columns 1 & 3)	XXX	XXX	XXX	\$ 28,255	\$ 18,195
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 28,255	\$ 18,195
SURPLUS					
(5) North American Swiss Alliance Company state basis (Page 3, line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 826,862	\$ 793,407
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 826,862	\$ 793,407

The financial statements of North American Swiss Alliance are presented on the basis of accounting practices prescribed or permitted by the Ohio Insurance

Department.

The Ohio Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial a Fraternal Benefit Society, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Pr SAP, has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state has adopted certain prescribed accounting pr SAP. Specifically, 1) goodwill arising from the purchase of a subsidiary, controlled or affiliated entity is written off directly to surplus in the year it originates by goodwill in amounts not to exceed 10% of an insurer's capital and surplus may be capitalized and all amounts of goodwill are amortized to unrealized gains or periods not to exceed 10 years, and, 2) 100% of all fixed assets are admitted by Ohio domiciled Fraternal Benefit Societies. In NAIC SAP, fixed assets are not admitted has the right to permit other specific practices that deviate from prescribed practices.

A reconciliation of the Society's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Ohio results in no chan

C. Accounting Policy

Life premiums are recognized as income over the premium paying period of the related policies. If applicable, annuity considerations are recognized as revenue when received. If applicable, health premiums are earned ratable, over the term of the related insurance policies. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred.

The amount of dividends to be paid to policyholders is determined annually by the Society's Board of Directors. The aggregate amount of policyholders' dividends is related to actual interest, mortality, morbidity, and expense experience for the year and judgment as to the appropriate level of statutory surplus to be retained by the Society.

In addition, the society uses the following accounting policies:

(2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method
Bonds: Not backed by other loans at amortized cost using the interest method:
loan-backed bonds and structured securities at amortized cost using the interest method including anticipated prepayments at the date of purchase; significant changes in estimated cash flows from the original purchase assumptions are accounted for using the composit method. Bonds rated NAIC Class 6 are valued at market and the basis is reduced and a realized loss is recognized.

(6) Basis for Loan-Backed Securities and Adjustment Methodology
Loan backed securities are handled the same as bonds as described in item C(2) above.

D. Going Concern

After carefully evaluating the Alliance's ability to continue as a going concern, Alliance management is not aware of any conditions or events which raised substantial doubts concerning the Alliance's ability as a going concern as of the date of this filing.

Note 2 – Accounting Changes and Corrections of Errors

No significant changes

Note 3 – Business Combinations and Goodwill

No significant changes

Note 4 – Discontinued Operations

NOTES TO FINANCIAL STATEMENTS

No significant changes

Note 5 – Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans - NO mortgage loans
- B. Debt Restructuring- No debt restructuring
- C. Reverse Mortgages
 - (1) Description of Accounting Policies and Methods
NONE AS THE ALLIANCE HAS NO REVERSE MORTGAGES
- D. Loan-Backed Securities
 - (1) Description of Sources Used to Determine Prepayment Assumptions
NO LOAN BACKED SECURITIES
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions -The Alliance has no dollar repurchase agreements.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
 - (1) Company Policies or Strategies for Repo Programs
NONE AS ALLIANCE HAS NO REPURCHASE AGREEMENTS
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
 - Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions
 - (1) Company Policy or Strategies for Engaging in Repo Programs
NONE AS ALLIANCE HAS NO REVERSE PURCHASE AGREEMENTS
- H. Repurchase Agreements Transactions Accounted for as a Sale
 - Repurchase Transaction – Cash Taker – Overview of Sale Transactions
 - (1) Company Policy or Strategies for Engaging in Repo Programs
NONE AS ALLIANCE HAS NO REPURCHASE AGREEMENTS
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
 - Repurchase Transaction – Cash Provider – Overview of Sale Transactions
 - (1) Company Policy or Strategies for Engaging in Repo Programs
None as the Alliance does not have any Reverse Repurchase agreements.
- J. Real Estate
 - (1) Recognized Impairment Loss
NO REAL ESTATE OWNED
 - (2) Sold or Classified Real Estate Investments as Held for Sale
NOT APPLICABLE
 - (3) Changes to a Plan of Sale for an Investment in Real Estate
NOT APPLICABLE
 - (4) Retail Land Sales Operations
NOT APPLICABLE
 - (5) Real Estate Investments with Participating Mortgage Loan Features
NOT APPLICABLE
- K. Low-Income Housing Tax Credits (LIHTC)
 - (1) Number of Remaining Years of Unexpired Tax Credits and Holding Period for LIHTC Investments
NONE
 - (2) Amount of LIHTC and Other Tax Benefits Recognized
NOT APPLICABLE
 - (3) Balance of Investment Recognized
NOT APPLICABLE
 - (4) Regulatory Reviews
NOT APPLICABLE

NOTES TO FINANCIAL STATEMENTS

(5) LIHTC investments which Exceed 10% of Total Admitted Assets
NOT APPLICABLE

(6) Recognized Impairments
NOT APPLICABLE

(7) Amount and Nature of Write-Downs or Reclassifications
NOT APPLICABLE

L. Restricted Assets

(1) Restricted Assets (Including Pledged)
THERE ARE NO RESTRICTED ASSETS

M. Working Capital Finance Investments- The Alliance has no working capital finance investments.

NO WORKING CAPITAL INVESTMENTS

N. Offsetting and Netting of Assets and Liabilities

NO OFFSETTING ASSETS OR LIABILITIES

O. Structured Notes
NOT APPLICABLE

P. 5GI Securities - none

Q. Short Sales- not applicable

R. Prepayment Penalty and Acceleration Fees -none , not applicable

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

No significant changes

Note 7 – Investment Income

No significant changes

Note 8 – Derivative Instruments -No derivative instruments**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
NOT APPLICABLE

(1) Information on the Nature of the Agreement
NOT APPLICABLE

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans
The Alliance does not have any retirement plans, deferred compensation plans or post retirement plans for its officers or employees.**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

NOTES TO FINANCIAL STATEMENTS

The Alliance had no sales, transfers, or servicing financial assets in the quarter.

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

No significant changes

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

No significant changes

Note 20 – Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

There are no assets reported at fair value

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

There are no assets in Level 3.

(3) Policies when Transfers Between Levels are Recognized

Not applicable

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

Use of broker statements.

(5) Fair Value Disclosures

No changes

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements- NO Changes

C. Fair Value Level

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
BONDS	\$ 3,276,642	\$ 3,125,257	\$	\$ 3,276,642	\$	\$	\$
PREFERRED STOCKS	\$ 249,363	\$ 250,139	\$ 249,363	\$	\$	\$	\$
CASH	\$ 58,386	\$ 58,386	\$ 58,386	\$	\$	\$	\$
TOTAL	\$ 3,584,391	\$ 3,433,782	\$ 307,749	\$ 3,276,642	\$	\$	\$

D. Not Practicable to Estimate Fair Value- None

E. NAV Practical Expedient Investments -NONE

Note 21 – Other Items

No significant changes

Note 22 – Events Subsequent

Subsequent events have been considered through the quarter for these statutory financial statements. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

Note 23 – Reinsurance

No significant changes

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination -Not Applicable**Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**A. Change in Incurred Losses and Loss Adjustment Expenses
NO CHANGES OCCURRED IN THIS QUARTER.B. Information about Significant Changes in Methodologies and Assumptions
NO CHANGES OCCURRED IN THE METHODOLOGIES AND ASSUMPTIONS USED IN CALCULATING THE LIABILITY FOR UNPAID LOSSES.**Note 26 – Intercompany Pooling Arrangements**

No significant changes

Note 27 – Structured Settlements

No significant changes

Note 28 – Health Care Receivables

NOTES TO FINANCIAL STATEMENTS

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 [] No [X]

1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change:

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [] No [X]
If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]

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

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

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

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2014

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2014

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/18/2015

6.4 By what department or departments?

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 [X] No [] N/A []

6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

7.2 If yes, give full information:

8.1 Is the company a subsidiary of a bank holding company regulated 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):

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 []

If no, attach a description with this statement.

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

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$ 0

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$ 0

16.3 Total payable for securities lending reported on the liability page:

\$ 0

17. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes [X] No []

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

1	2
Name of Custodian(s)	Custodian Address
WELLS FARGO ADVISORS	950 MAIN AVE STE 300 CLEVELAND, OH 44113

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)

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
DONALD ROBISON, VICE-PRESIDENT	1

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

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

Yes [X] No []

18.2 If no, list exceptions:

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]

North American Swiss Alliance

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	\$.....
1.11 Farm mortgages.....	\$.....
1.12 Residential mortgages.....	\$.....
1.13 Commercial mortgages.....	\$.....
1.14 Total mortgages in good standing.....	\$.....0
1.2 Long-term mortgages in good standing with restructured terms	\$.....
1.21 Total mortgages in good standing with restructured terms.....	\$.....
1.3 Long-term mortgage loans upon which interest is overdue more than three months	\$.....
1.31 Farm mortgages.....	\$.....
1.32 Residential mortgages.....	\$.....
1.33 Commercial mortgages.....	\$.....
1.34 Total mortgages with interest overdue more than three months.....	\$.....0
1.4 Long-term mortgage loans in process of foreclosure	\$.....
1.41 Farm mortgages.....	\$.....
1.42 Residential mortgages.....	\$.....
1.43 Commercial mortgages.....	\$.....
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	\$.....
1.61 Farm mortgages.....	\$.....
1.62 Residential mortgages.....	\$.....
1.63 Commercial mortgages.....	\$.....
1.64 Total mortgages foreclosed and transferred to real estate.....	\$.....0
2. Operating Percentages:	
2.1 A&H loss percent.....	
2.2 A&H cost containment percent.....	
2.3 A&H expense percent excluding cost containment expenses.....	
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.....	\$.....
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.....	\$.....
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 [] 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 []

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

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
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NONE

North American Swiss Alliance

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, Etc.	Active Status (a)	Life Insurance Premiums	Direct Business Only				
			Life Contracts		A&H Insurance Premiums, Including Policy Membership and Other Fees	Other Considerations	Total Columns 2 through 5
			2	3			
1. Alabama.....	AL	.....	.....	.....	.....	.....	0
2. Alaska.....	AK	.....	.....	.....	.....	.....	0
3. Arizona.....	AZ	.....	.....	.....	.....	.....	0
4. Arkansas.....	AR	.....	.....	.....	.....	.....	0
5. California.....	CA	.....	.....	.....	.....	.....	0
6. Colorado.....	CO	.....	.....	.....	.....	.....	0
7. Connecticut.....	CT	.....	.....	.....	.....	.....	0
8. Delaware.....	DE	.....	.....	.....	.....	.....	0
9. District of Columbia.....	DC	.....	.....	.....	.....	.....	0
10. Florida.....	FL	.....	.....	.....	.....	.....	0
11. Georgia.....	GA	.....	.....	.....	.....	.....	0
12. Hawaii.....	HI	.....	.....	.....	.....	.....	0
13. Idaho.....	ID	.....	.....	.....	.....	.....	0
14. Illinois.....	IL	.....	.....	.....	.....	.....	0
15. Indiana.....	IN	.....	.....	.....	.....	.....	0
16. Iowa.....	IA	.....	.....	.....	.....	.....	0
17. Kansas.....	KS	.....	.....	.....	.....	.....	0
18. Kentucky.....	KY	.....	.....	.....	.....	.....	0
19. Louisiana.....	LA	.....	.....	.....	.....	.....	0
20. Maine.....	ME	.....	.....	.....	.....	.....	0
21. Maryland.....	MD	.....	.....	.....	.....	.....	0
22. Massachusetts.....	MA	.....	.....	.....	.....	.....	0
23. Michigan.....	MI	.....	.....	.....	.....	.....	0
24. Minnesota.....	MN	.....	.....	.....	.....	.....	0
25. Mississippi.....	MS	.....	.....	.....	.....	.....	0
26. Missouri.....	MO	.....	.....	.....	.....	.....	0
27. Montana.....	MT	.....	.....	.....	.....	.....	0
28. Nebraska.....	NE	.....	.....	.....	.....	.....	0
29. Nevada.....	NV	.....	.....	.....	.....	.....	0
30. New Hampshire.....	NH	.....	.....	.....	.....	.....	0
31. New Jersey.....	NJ	.....	.....	.....	.....	.....	0
32. New Mexico.....	NM	.....	.....	.....	.....	.....	0
33. New York.....	NY	.....	.....	.....	.....	.....	0
34. North Carolina.....	NC	.....	.....	.....	.....	.....	0
35. North Dakota.....	ND	.....	.....	.....	.....	.....	0
36. Ohio.....	OH	L.....7,809	.....	.....	.....	.....	7,809
37. Oklahoma.....	OK	.....	.....	.....	.....	.....	0
38. Oregon.....	OR	.....	.....	.....	.....	.....	0
39. Pennsylvania.....	PA	.....	.....	.....	.....	.....	0
40. Rhode Island.....	RI	.....	.....	.....	.....	.....	0
41. South Carolina.....	SC	.....	.....	.....	.....	.....	0
42. South Dakota.....	SD	.....	.....	.....	.....	.....	0
43. Tennessee.....	TN	.....	.....	.....	.....	.....	0
44. Texas.....	TX	.....	.....	.....	.....	.....	0
45. Utah.....	UT	.....	.....	.....	.....	.....	0
46. Vermont.....	VT	.....	.....	.....	.....	.....	0
47. Virginia.....	VA	.....	.....	.....	.....	.....	0
48. Washington.....	WA	.....	.....	.....	.....	.....	0
49. West Virginia.....	WV	.....	.....	.....	.....	.....	0
50. Wisconsin.....	WI	.....	.....	.....	.....	.....	0
51. Wyoming.....	WY	.....	.....	.....	.....	.....	0
52. American Samoa.....	AS	.....	.....	.....	.....	.....	0
53. Guam.....	GU	.....	.....	.....	.....	.....	0
54. Puerto Rico.....	PR	.....	.....	.....	.....	.....	0
55. US Virgin Islands.....	VI	.....	.....	.....	.....	.....	0
56. Northern Mariana Islands.....	MP	.....	.....	.....	.....	.....	0
57. Canada.....	CAN	.....	.....	.....	.....	.....	0
58. Aggregate Other Alien.....	OT	XXX.....0	0	0	0	0	0
59. Subtotal.....		XXX.....7,809	0	0	0	7,809	0
90. Reporting entity contributions for employee benefit plans.....		XXX.....	.....	.....	.....	.....	0
91. Dividends or refunds applied to purchase paid-up additions and annuities.....		XXX.....	3,926	.....	.....	3,926	.....
92. Dividends or refunds applied to shorten endowment or premium paying period.....		XXX.....	.....	.....	.....	.....	0
93. Premium or annuity considerations waived under disability or other contract provisions.....		XXX.....	.....	.....	.....	.....	0
94. Aggregate other amounts not allocable by State.....		XXX.....	0	0	0	0	0
95. Totals (Direct Business).....		XXX.....	11,735	0	0	0	11,735
96. Plus Reinsurance Assumed.....		XXX.....	.....	.....	.....	.....	0
97. Totals (All Business).....		XXX.....	11,735	0	0	0	11,735
98. Less Reinsurance Ceded.....		XXX.....	.....	.....	.....	.....	0
99. Totals (All Business) less Reinsurance Ceded.....		XXX.....	11,735	0	0	0	11,735

DETAILS OF WRITE-INS

58001.....	XXX.....	.....	.....	.....	.....	0	0
58002.....	XXX.....	.....	.....	.....	.....	0	0
58003.....	XXX.....	.....	.....	.....	.....	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
9402.....	XXX.....	.....	.....	.....	.....	0	0
9403.....	XXX.....	.....	.....	.....	.....	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.....
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....R - Registered - Non-domiciled RRGs.....
Q - Qualified - Qualified or accredited reinsurer.....
N - None of the above - Not allowed to write business in the state.....

0

0

55

Sch. Y - Pt. 1
NONE

Sch. Y Pt. 1A
NONE

North American Swiss Alliance

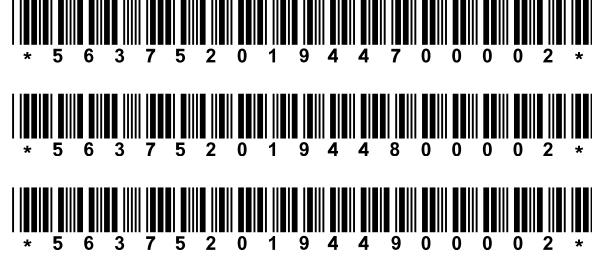
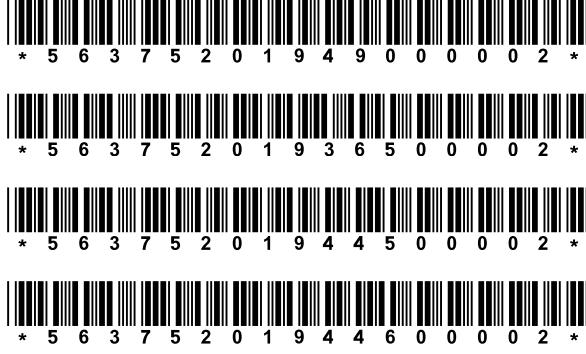
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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.	YES.

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.

Bar Code:

North American Swiss Alliance
Overflow Page for Write-Ins

NONE

North American Swiss Alliance

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	.0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Current year change in encumbrances.....		
4. Total gain (loss) on disposals.....		
5. Deduct amounts received on disposals.....		
6. Total foreign exchange change in book/adjusted carrying value.....		
7. Deduct current year's other-than-temporary impairment recognized.....		
8. Deduct current year's depreciation.....		
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	.0	.0
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	.0	.0

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	.0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	.0	.0
12. Total valuation allowance.....		
13. Subtotal (Line 11 plus Line 12).....	.0	.0
14. Deduct total nonadmitted amounts.....		
15. Statement value at end of current period (Line 13 minus Line 14).....	.0	.0

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	.0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and depreciation.....		
9. Total foreign exchange change in book/adjusted carrying value.....		
10. Deduct current year's other-than-temporary impairment recognized.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	.0	.0
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	.0	.0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	3,353,121	3,291,070
2. Cost of bonds and stocks acquired.....	95,709	148,395
3. Accrual of discount.....	714	882
4. Unrealized valuation increase (decrease).....	5,262	14,093
5. Total gain (loss) on disposals.....		1,199
6. Deduct consideration for bonds and stocks disposed of.....	68,750	81,199
7. Deduct amortization of premium.....	10,660	21,319
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).....	3,375,396	3,353,121
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	3,375,396	3,353,121

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	1,773,125	41,318	35,000	59,320	1,773,125	1,838,763		1,791,923
2. NAIC 2 (a).....	1,235,693			(64,776)	1,235,693	1,170,917		1,182,462
3. NAIC 3 (a).....	111,265			4,312	111,265	115,577		109,848
4. NAIC 4 (a).....						0		
5. NAIC 5 (a).....						0		
6. NAIC 6 (a).....						0		
7. Total Bonds.....	3,120,083	41,318	35,000	(1,144)	3,120,083	3,125,257	0	3,084,233
PREFERRED STOCK								
8. NAIC 1.....	25,000				25,000	25,000		25,000
9. NAIC 2.....	225,139				225,139	225,139		243,889
10. NAIC 3.....						0		
11. NAIC 4.....						0		
12. NAIC 5.....						0		
13. NAIC 6.....						0		
14. Total Preferred Stock.....	250,139	0	0	0	250,139	250,139	0	268,889
15. Total Bonds and Preferred Stock.....	3,370,222	41,318	35,000	(1,144)	3,370,222	3,375,396	0	3,353,122

(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

Sch. E - Pt. 2 Verification
NONE

Sch. A Pt. 2
NONE

Sch. A Pt. 3
NONE

Sch. B - Pt. 2
NONE

Sch. B - Pt. 3
NONE

Sch. BA - Pt. 2
NONE

Sch. BA - Pt. 3
NONE

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation and Administrative Symbol/Market Indicator (a)
Bonds - Industrial and Miscellaneous									
889184 AD 9	TOLEDO HOSPITAL/THE SECURED AGM.....		06/26/2019.....	TOLEDO HOSPITAL.....		41,319	35,000	240	1FE.....
3899999.	Total - Bonds - Industrial and Miscellaneous.....					41,319	35,000	240	XXX.....
8399997.	Total - Bonds - Part 3.....					41,319	35,000	240	XXX.....
8399999.	Total - Bonds.....					41,319	35,000	240	XXX.....
9999999.	Total - Bonds, Preferred and Common Stocks.....					41,319	XXX	240	XXX.....

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

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SCHEDULE D - PART 4

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

1 CUSIP Identification	2 Description	3 F o r eig n	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest / Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation and Admini- strative Symbol/ Market Indicator (a)			
										11 Unrealized Valuation Increase (Decrease)	12 Current Year's (Amortization) / Accretion	13 Current Year's Other-Than- Temporary Impairment Recognized	14	15										
Bonds - Industrial and Miscellaneous																								
594918	AC	8	MICROSOFT CORP SR .....	..	06/01/2019.	MATURED.....			35,000	35,000	35,218	35,000					0	35,000			0	06/01/2019.	1FE.....	
3899999.			Total - Bonds - Industrial and Miscellaneous.....						35,000	35,000	35,218	35,000	0	0	0	0	0	35,000	0	0	0	0	XXX	XXX
8399997.			Total - Bonds - Part 4.....						35,000	35,000	35,218	35,000	0	0	0	0	0	35,000	0	0	0	0	XXX	XXX
8399999.			Total - Bonds.....						35,000	35,000	35,218	35,000	0	0	0	0	0	35,000	0	0	0	0	XXX	XXX
9999999.			Total - Bonds, Preferred and Common Stocks.....						35,000	XXX	35,218	35,000	0	0	0	0	0	35,000	0	0	0	0	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 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount or interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	

Open Depositories

KEY BANK -CHECKING.....	CLEVELAND , OH.....				10,460	4,658	1,436	XXX
WELLS FARGO -CASH SWEEP.....	CLEVELAND , OH.....	0.010	.21		27,633	22,959	19,311	XXX
GBU ACCOUNT.....	PITTSBURGH , PA.....	3.000	.327		37,213	37,213	37,639	XXX
0199999. Total Open Depositories.....	XXX	XXX	.348	.0	75,306	64,830	58,386	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	.348	.0	75,306	64,830	58,386	XXX
0599999. Total Cash.....	XXX	XXX	.348	.0	75,306	64,830	58,386	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due & Accrued	9 Amount Received During Year
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NONE