PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2021

OF THE CONDITION AND AFFAIRS OF THE

Infinity Casualty Insurance Company

NAIC Group Code 0215 (Current) 0215 (Prior) NAIC Company Code 21792 Employer's ID Number 58-1132392

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

Country of Domicile United States of America

Incorporated/Organized 06/13/1972 Commenced Business 09/01/1972

Statutory Home Office 1400 Provident Tower, One East Fourth Street, Cincinnati, OH, US 45202
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2201 4th Avenue North
(Street and Number)
Birmingham, AL, US 35203-3863, 205-870-4000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address Post Office Box 830189, Birmingham, AL, US 35283-0189
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 2201 4th Avenue North
(Street and Number)
Birmingham, AL, US 35203-3863, 205-870-4000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.infinityauto.com

Statutory Statement Contact Eugene Betz, 312-661-4600
(Name) (Area Code) (Telephone Number)
efasstatutoryreporting@kemper.com, 205-803-8080
(E-mail Address) (FAX Number)

OFFICERS

President	Matthew Joseph Varagona	Vice President & Treasurer/Controller	Timothy John Tuller #
Secretary	James Henry Romaker		

OTHER

DIRECTORS OR TRUSTEES

Bradley Thomas Camden	Timothy John Tuller #	Aditya NMI Mahajan
James Henry Romaker	Matthew Joseph Varagona	

State of Alabama
County of Jefferson SS:

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.

Matthew Joseph Varagona	James Henry Romaker	Timothy John Tuller
President	Secretary	Vice President & Treasurer/Controller

Subscribed and sworn to before me this
_____ day of October, 2021

a. Is this an original filing? ..... Yes [X] No [ ]
b. If no,
1. State the amendment number.....
2. Date filed .....
3. Number of pages attached.....

ASSETS

		Current Statement Date			4
		1	2	3	December 31
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
1.	Bonds	15,653,369		15,653,369	7,294,578
2.	Stocks:				
	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate:				
	4.1 Properties occupied by the company (less $ encumbrances)				
	4.2 Properties held for the production of income (less $ encumbrances)				
	4.3 Properties held for sale (less $ encumbrances)				
5.	Cash ($ 133), cash equivalents ($ 129,684) and short-term investments ($)	129,817		129,817	8,160,743
6.	Contract loans (including $ premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				35,000
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	15,783,186		15,783,186	15,490,321
13.	Title plants less $ charged off (for Title insurers only)				
14.	Investment income due and accrued	115,250		115,250	63,513
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	599,255		599,255	426,833
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $ earned but unbilled premiums)				
	15.3 Accrued retrospective premiums ($) and contracts subject to redetermination ($)				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	18,747		18,747	483,505
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon				11,571
18.2	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets ($)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care ($) and other amounts receivable				
25.	Aggregate write-ins for other than invested assets				
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	16,516,439		16,516,439	16,475,743
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)	16,516,439		16,516,439	16,475,743
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)				
2501.					
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)				

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Statement Date	2 December 31, Prior Year
1.	Losses (current accident year $)		
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)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		0
7.1	Current federal and foreign income taxes (including $ on realized capital gains (losses))	8,747	0
7.2	Net deferred tax liability	8,496	6,389
8.	Borrowed money $ and interest thereon $		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of $ 23,993,115 and including warranty reserves of $ and accrued accident and health experience rating refunds including $ 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)	599,255	457,932
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 $ certified)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates	9,156,852	9,537,722
20.	Derivatives		
21.	Payable for securities	81,302	
22.	Payable for securities lending		
23.	Liability for amounts held under uninsured plans		
24.	Capital notes $ and interest thereon $		
25.	Aggregate write-ins for liabilities		
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	9,854,652	10,002,043
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)	9,854,652	10,002,043
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock	2,500,000	2,500,000
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus	54,538,309	54,538,309
35.	Unassigned funds (surplus)	(50,376,522)	(50,564,609)
36.	Less treasury stock, at cost:		
	36.1 shares common (value included in Line 30 $)		
	36.2 shares preferred (value included in Line 31 $)		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	6,661,787	6,473,700
38.	Totals (Page 2, Line 28, Col. 3)	16,516,439	16,475,743
	DETAILS OF WRITE-INS		
2501.			
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)		
2901.			
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page		
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		
3201.			
3202.			
3203.			
3298.	Summary of remaining write-ins for Line 32 from overflow page		
3299.	Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)		

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 $ 40,938,660)	36,660,048	31,202,461	42,572,459
	1.2 Assumed (written $)			
	1.3 Ceded (written $ 40,938,660)	36,660,048	31,202,461	42,572,459
	1.4 Net (written $)			
	DEDUCTIONS:			
2.	Losses incurred (current accident year $):			
	2.1 Direct	17,465,544	14,231,160	20,849,614
	2.2 Assumed			
	2.3 Ceded	17,465,544	14,231,160	20,849,614
	2.4 Net			
3.	Loss adjustment expenses incurred			
4.	Other underwriting expenses incurred			
5.	Aggregate write-ins for underwriting deductions			
6.	Total underwriting deductions (Lines 2 through 5)			
7.	Net income of protected cells			
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)			
	INVESTMENT INCOME			
9.	Net investment income earned	209,942	132,715	178,118
10.	Net realized capital gains (losses) less capital gains tax of $ 3	12	1,302	1,095
11.	Net investment gain (loss) (Lines 9 + 10)	209,954	134,017	179,213
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered $ amount charged off $)			
13.	Finance and service charges not included in premiums			
14.	Aggregate write-ins for miscellaneous income			
15.	Total other income (Lines 12 through 14)			
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	209,954	134,017	179,213
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)	209,954	134,017	179,213
19.	Federal and foreign income taxes incurred	20,315		16,325
20.	Net income (Line 18 minus Line 19)(to Line 22)	189,639	134,017	162,888
	CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year	6,473,700	6,314,305	6,314,305
22.	Net income (from Line 20)	189,639	134,017	162,888
23.	Net transfers (to) from Protected Cell accounts			
24.	Change in net unrealized capital gains (losses) less capital gains tax of $			
25.	Change in net unrealized foreign exchange capital gain (loss)			
26.	Change in net deferred income tax	(4,726)	15,169	(7,444)
27.	Change in nonadmitted assets	3,174	4,506	3,951
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			
38.	Change in surplus as regards policyholders (Lines 22 through 37)	188,087	153,692	159,395
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	6,661,787	6,467,997	6,473,700
	DETAILS OF WRITE-INS			
0501.				
0502.				
0503.				
0598.	Summary of remaining write-ins for Line 5 from overflow page			
0599.	Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)			
1401.				
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page			
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)			
3701.				
3702.				
3703.				
3798.	Summary of remaining write-ins for Line 37 from overflow page			
3799.	Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)			

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	(31,099)		31,099
2.	Net investment income	191,189	165,707	190,481
3.	Miscellaneous income			
4.	Total (Lines 1 to 3)	160,090	165,707	221,580
5.	Benefit and loss related payments	(464,757)	(24)	484,108
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions		0	
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of $ ..... tax on capital gains (losses)	2,619		9,999
10.	Total (Lines 5 through 9)	(462,139)	(24)	494,107
11.	Net cash from operations (Line 4 minus Line 10)	622,228	165,731	(272,526)
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	80,225	1,244,602	1,431,328
	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	15		84
	12.7 Miscellaneous proceeds	116,302		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	196,541	1,244,602	1,431,412
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	8,471,999	42,392	1,099,805
	13.2 Stocks			
	13.3 Mortgage loans			
	13.4 Real estate			
	13.5 Other invested assets			
	13.6 Miscellaneous applications		35,000	35,000
	13.7 Total investments acquired (Lines 13.1 to 13.6)	8,471,999	77,392	1,134,805
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)	(8,275,458)	1,167,210	296,607
	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)	(377,696)	10,242,692	8,087,791
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(377,696)	10,242,692	8,087,791
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(8,030,926)	11,575,632	8,111,872
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	8,160,743	48,871	48,871
	19.2 End of period (Line 18 plus Line 19.1)	129,817	11,624,503	8,160,743

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

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Infinity Casualty Insurance Company ("Company") have been prepared in conformity with the National Association of Insurance Commissioners ("NAIC") Annual Statement Instructions and *Accounting Practices and Procedures Manual,* ("the NAIC Manual") and the laws of the State of Ohio.

The Ohio Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The NAIC Manual has been adopted as a component of prescribed or permitted practices by the State of Ohio. The Company has not adopted permitted accounting practices that differ from those found in the NAIC Manual, and accordingly the Company has no permitted accounting practices.

Net Income		SSAP#	F/S Page	F/S Line#	September 30, 2021	December 31, 2020
(1)	State Basis (Page 4, Line 20, Columns 1 & 3)	-	-	-	$ 189,639	$ 162,888
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP: None				-	-
(3)	State Permitted Practices that increase/(decrease) NAIC SAP: None				-	-
(4)	NAIC SAP (1-2-3=4)	-	-	-	$ 189,639	$ 162,888
Surplus						
(5)	State Basis (Page 3, Line 39, Columns 1 & 2)	-	-	-	$ 6,661,787	$ 6,473,700
(6)	State Prescribed Practices that increase/(decrease) NAIC SAP: None				-	-
(7)	State Permitted Practices that increase/(decrease) NAIC SAP: None				-	-
(8)	NAIC SAP (5-6-7=8)	-	-	-	$ 6,661,787	$ 6,473,700

C. Disclose all accounting policies that materially affect the assets, liabilities, capital and surplus or results of operations.

(2) Not applicable.

(6) Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair market value. The retrospective adjustment method is used to value all securities except for interest only securities or securities where the yield had become negative, that are valued using the prospective method.

D. Going Concern

Management has not identified any factors that would cast substantial doubt about the Company's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

No change.

3. Business Combinations and Goodwill

No change.

4. Discontinued Operations

No change.

5. Investments

D. Loan- Backed Securities

(1) Prepayment assumptions for single class and multi-class mortgage-backed/asset-backed securities were obtained from broker dealer survey values or pricing services.

(2) & (3) The Company has not recognized any other-than-temporary-impairment losses on loan-backed securities.

(4) The Company does not hold any loan-backed securities in an unrealized loss position.

(5) The Company regularly reviews its investment portfolio for factors that may indicate that a decline in fair value of an investment is other than temporary. Some factors considered in evaluating whether a decline in fair value is other than temporary include: 1) the Company's ability and intent to retain the investment for a period of time sufficient to allow for a recovery in value; 2) the duration and extent to which the fair value has been less than cost; and 3) the financial condition and prospects of the issuer. Losses arising from other than temporary declines in fair value are computed on a specific identification method and are reported in the Statement of Income in the period in which the decline was determined to be other than temporary.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

The Company had no dollar repurchase agreements or securities lending transactions.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company had no repurchase agreements accounted for as secured borrowing.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company had no reverse repurchase agreements accounted for as secured borrowing.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company had no repurchase agreements accounted for as a sale.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company had no reverse repurchase agreements accounted for as a sale.

M. Working Capital Finance Investments

The Company has no working capital finance investments.

N. Offsetting and Netting of Assets and Liabilities

The Company does not have derivative, repurchase, reverse purchase, securities borrowing or securities lending assets that are offset or netted in the financial statements.

R. Reporting Entity's Share of Cash Pool by Asset Type

The Company is not part of a cash pooling arrangement.

6. Joint Ventures, Partnerships and Limited Liability Companies No change.

7. Investment Income No change.

8. Derivative Instruments

The Company has no derivative instruments.

9. Income Taxes No change.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties No change.

11. Debt

B. The Company does not have Federal Home Loan Bank agreements.

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

A. Defined Benefit Plan:

(4) The Company does not sponsor any defined benefit plans. As such, the net periodic benefit cost recognized is $0 and each of the following components is $0:
(a) Service cost
(b) Interest cost
(c) Expected return on plan assets for the period
(d) Transition asset or obligation
(e) Gains and losses
(f) Prior service cost or credit
(g) Gain or loss recognized due to a settlement or curtailment
(h) Total net periodic benefit cost

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations No change.

14. Liabilities, Contingencies and Assessments No change**.**

15. Leases No change.

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk — No change.

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

B. Transfers and Servicing of Financial Assets:
The Company has no transfers or servicing of financial assets.

C. Wash Sales:
The Company has no wash sales.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans — No change.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators — No change.

20. Fair Value Measurement

A. Assets measured and reported at fair value after initial recognition:

(1) The reporting entity does not hold any assets or liabilities that are measured and reported at fair value on the statement of financial position.
(2) Not applicable.
(3) Not applicable.
(4) Not applicable.
(5) The reporting entity does not have any derivative assets or liabilities

C. Aggregate fair value for all financial instruments:

Type of Financial Instrument	Aggregate Fair Value	Admitted Value	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
Bonds	$ 16,161,262	$ 15,653,369	$ 2,464,628	$ 13,696,634	$ -	$ -
Cash Equivalents	$ 129,684	$ 129,684	$ 129,684	$ -	$ -	$ -

D. Not applicable because the entity has disclosed fair value for all financial instruments in Note 20C above.

21. Other Items — No change.

22. Events Subsequent

Subsequent events have been considered through November 11, 2021, for the statutory financial statements issued on November 11, 2021. The Company is not aware of any additional material events subsequent to September 30, 2021, which would require disclosure in or adjustment to these financial statements.

23. Reinsurance — No change.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

F. Risk-Sharing Provisions of the Affordable Care Act (ACA)
The Company did not write any accident and health insurance premiums that are subject to the Affordable Care Act risk-sharing provisions.

25. Changes in Incurred Losses and Loss Adjustment Expenses

Property and casualty insurance reserves are estimates based on historical experience patterns and current economic trends. Actual loss experience and loss trends are likely to differ from these historical experience patterns and economic conditions. Loss experience and loss trends emerge over several years from the dates of loss inception. The Company monitors such emerging loss trends. Upon concluding, based on the data available, that an emerging loss trend will continue, the Company adjusts its property and casualty insurance reserves to reflect such trend. These changes in loss trend are reflected in the results of the period of change and included in the Company's financial statements net of reinsurance. The business to which this development relates is not retrospectively rated; therefore, they are not subject to premium adjustments. As the Company losses are ultimately ceded to its affiliate, Trinity Universal Insurance Company, net reserves as of September 30, 2021 and December 31, 2020 were $0, and the Company experienced no reserve development.

26. Intercompany Pooling Arrangements — No change.

27. Structured Settlements — No change.

28. Health Care Receivables — No change.

29.	**Participating Policies**	No change.
30.	**Premium Deficiency Reserves**	No change.
31.	**High Deductibles**	No change.
32.	**Discounting of Liabilities for Unpaid Losses and Unpaid Loss Adjustment Expenses**	No change.
33.	**Asbestos/Environmental Reserves**	No change.
34.	**Subscriber Savings Accounts**	No change.
35.	**Multiple Peril Crop Insurance**	No change.

36. Financial Guaranty Insurance

B. Financial Guaranty Insurance:
The Company does not write financial guaranty insurance.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [X]

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

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

2.2 If yes, date of change: .....

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

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

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

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

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0000860748

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.

4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

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

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2016

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. 12/31/2016

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). 02/13/2018

6.4 By what department or departments?
Ohio Department of Insurance

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] N/A [X]

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

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

7.2 If yes, give full information:
Not Applicable

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
Not Applicable

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [X]

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

GENERAL INTERROGATORIES

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [X] No [ ]

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c) Compliance with applicable governmental laws, rules and regulations;

(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

Not Applicable

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).

Not Applicable

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).

Not Applicable

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: ..... $

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:

Not Applicable

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... $

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

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

14.2 If yes, please complete the following:

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

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ] N/A [ ]

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 the current statement date:

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

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

16.3 Total payable for securities lending reported on the liability page. ..... $

GENERAL INTERROGATORIES

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? ..... Yes [X] No [ ]

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

1 Name of Custodian(s)	2 Custodian Address
The Northern Trust Company	333 S. Wabash Avenue, Chicago, Illinois 60604

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes [ ] No [X]

17.4 If yes, give full information relating thereto:

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

17.5 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
Merastar Insurance Company	A

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 invested assets? ..... Yes [ ] No [X]

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 invested assets? ..... Yes [ ] No [X]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
N/A	Merastar Insurance Company	N/A	N/A	NO

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? ..... Yes [X] No [ ]

18.2 If no, list exceptions:
Not Applicable

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 of 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]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
    a. The shares were purchased prior to January 1, 2019.
    b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
    c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
    d. The fund only or predominantly holds bonds in its portfolio.
    e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
    f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

    Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? ..... Yes [ ] No [X]
   If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? ..... Yes [ ] No [X]

3.2 If yes, give full and complete information thereto.
Not Applicable

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:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1 Line of Business	2 Maximum Interest	3 Discount Rate	4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 TOTAL	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 TOTAL
TOTAL										

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 ..... %

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 ..... $

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

6.4 If yes, please provide the balance of the funds administered as of the reporting date ..... $

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

NONE

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Premiums Written 2 Current Year To Date	Direct Premiums Written 3 Prior Year To Date	Direct Losses Paid (Deducting Salvage) 4 Current Year To Date	Direct Losses Paid (Deducting Salvage) 5 Prior Year To Date	Direct Losses Unpaid 6 Current Year To Date	Direct Losses Unpaid 7 Prior Year To Date
1. Alabama AL	N			(133)			
2. Alaska AK	N						
3. Arizona AZ	L	10,106,587	11,367,004	7,431,853	6,162,490	7,297,076	6,640,430
4. Arkansas AR	N						
5. California CA	N			346			
6. Colorado CO	N						
7. Connecticut CT	N						
8. Delaware DE	N						
9. District of Columbia DC	N						
10. Florida FL	L			4,093	(3,695)		3,473
11. Georgia GA	L	30,459,375	23,455,172	10,542,581	7,783,515	11,677,973	11,926,889
12. Hawaii HI	N						
13. Idaho ID	N						
14. Illinois IL	L			315	(943)	(27)	86
15. Indiana IN	L						
16. Iowa IA	N						
17. Kansas KS	N						
18. Kentucky KY	N						
19. Louisiana LA	N						
20. Maine ME	N						
21. Maryland MD	N						
22. Massachusetts MA	N						
23. Michigan MI	N						
24. Minnesota MN	N						
25. Mississippi MS	N						
26. Missouri MO	N						
27. Montana MT	N						
28. Nebraska NE	N						
29. Nevada NV	N						
30. New Hampshire NH	N						
31. New Jersey NJ	N						
32. New Mexico NM	N						
33. New York NY	L						
34. North Carolina NC	N						
35. North Dakota ND	N						
36. Ohio OH	L						
37. Oklahoma OK	N						
38. Oregon OR	N						
39. Pennsylvania PA	L	372,697	463,180	179,081	372,069	371,013	478,078
40. Rhode Island RI	N						
41. South Carolina SC	N						
42. South Dakota SD	N						
43. Tennessee TN	L			(300)	(1,488)	(4)	(356)
44. Texas TX	N						
45. Utah UT	N						
46. Vermont VT	N						
47. Virginia VA	N						
48. Washington WA	L						
49. West Virginia WV	N						
50. Wisconsin WI	N						
51. Wyoming WY	N						
52. American Samoa AS	N						
53. Guam GU	N						
54. Puerto Rico PR	N						
55. U.S. Virgin Islands VI	N						
56. Northern Mariana Islands MP	N						
57. Canada CAN	N						
58. Aggregate Other Alien OT	XXX						
59. Totals	XXX	40,938,660	35,285,356	18,157,835	14,311,948	19,346,031	19,048,600
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX						
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX						

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG 10

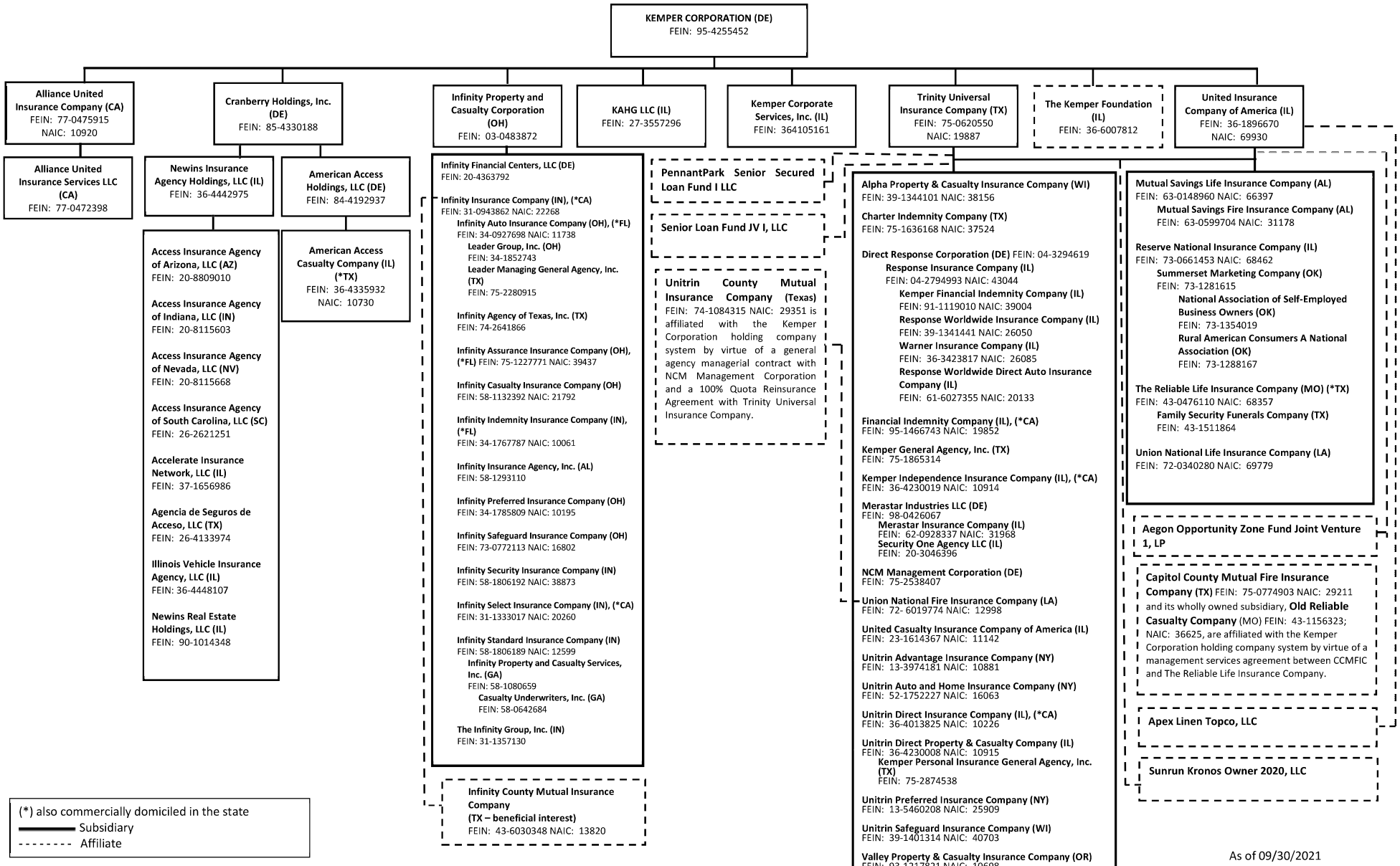
R - Registered - Non-domiciled RRGs

E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)

Q - Qualified - Qualified or accredited reinsurer.

D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile

N - None of the above - Not allowed to write business in the state 47


KEMPER CORPORATION (DE)
FEIN: 95-4255452
Alliance United Insurance Company (CA)
FEIN: 77-0475915
NAIC: 10920
Alliance United Insurance Services LLC (CA)
FEIN: 77-0472398
Cranberry Holdings, Inc. (DE)
FEIN: 85-4330188
Newins Insurance Agency Holdings, LLC (IL)
FEIN: 36-4442975
American Access Holdings, LLC (DE)
FEIN: 84-4192937
Access Insurance Agency of Arizona, LLC (AZ)
FEIN: 20-8809010
Access Insurance Agency of Indiana, LLC (IN)
FEIN: 20-8115603
Access Insurance Agency of Nevada, LLC (NV)
FEIN: 20-8115668
Access Insurance Agency of South Carolina, LLC (SC)
FEIN: 26-2621251
Accelerate Insurance Network, LLC (IL)
FEIN: 37-1656986
Agencia de Seguros de Acceso, LLC (TX)
FEIN: 26-4133974
Illinois Vehicle Insurance Agency, LLC (IL)
FEIN: 36-4448107
Newins Real Estate Holdings, LLC (IL)
FEIN: 90-1014348
American Access Casualty Company (IL) (*TX)
FEIN: 36-4335932
NAIC: 10730
Infinity Property and Casualty Corporation (OH)
FEIN: 03-0483872
Infinity Financial Centers, LLC (DE)
FEIN: 20-4363792
Infinity Insurance Company (IN), (*CA)
FEIN: 31-0943862 NAIC: 22268
Infinity Auto Insurance Company (OH), (*FL)
FEIN: 34-0927698 NAIC: 11738
Leader Group, Inc. (OH)
FEIN: 34-1852743
Leader Managing General Agency, Inc. (TX)
FEIN: 75-2280915
Infinity Agency of Texas, Inc. (TX)
FEIN: 74-2641866
Infinity Assurance Insurance Company (OH), (*FL) FEIN: 75-1227771 NAIC: 39437
Infinity Casualty Insurance Company (OH)
FEIN: 58-1132392 NAIC: 21792
Infinity Indemnity Insurance Company (IN), (*FL)
FEIN: 34-1767787 NAIC: 10061
Infinity Insurance Agency, Inc. (AL)
FEIN: 58-1293110
Infinity Preferred Insurance Company (OH)
FEIN: 34-1785809 NAIC: 10195
Infinity Safeguard Insurance Company (OH)
FEIN: 73-0772113 NAIC: 16802
Infinity Security Insurance Company (IN)
FEIN: 58-1806192 NAIC: 38873
Infinity Select Insurance Company (IN), (*CA)
FEIN: 31-1333017 NAIC: 20260
Infinity Standard Insurance Company (IN)
FEIN: 58-1806189 NAIC: 12599
Infinity Property and Casualty Services, Inc. (GA)
FEIN: 58-1080659
Casualty Underwriters, Inc. (GA)
FEIN: 58-0642684
The Infinity Group, Inc. (IN)
FEIN: 31-1357130
Infinity County Mutual Insurance Company
(TX – beneficial interest)
FEIN: 43-6030348 NAIC: 13820
KAHG LLC (IL)
FEIN: 27-3557296
Kemper Corporate Services, Inc. (IL)
FEIN: 364105161
PennantPark Senior Secured Loan Fund I LLC
Senior Loan Fund JV I, LLC
Unitrin County Mutual Insurance Company (Texas)
FEIN: 74-1084315 NAIC: 29351 is affiliated with the Kemper Corporation holding company system by virtue of a general agency managerial contract with NCM Management Corporation and a 100% Quota Reinsurance Agreement with Trinity Universal Insurance Company.
Trinity Universal Insurance Company (TX)
FEIN: 75-0620550
NAIC: 19887
The Kemper Foundation (IL)
FEIN: 36-6007812
United Insurance Company of America (IL)
FEIN: 36-1896670
NAIC: 69930
Alpha Property & Casualty Insurance Company (WI)
FEIN: 39-1344101 NAIC: 38156
Charter Indemnity Company (TX)
FEIN: 75-1636168 NAIC: 37524
Direct Response Corporation (DE) FEIN: 04-3294619
Response Insurance Company (IL)
FEIN: 04-2794993 NAIC: 43044
Kemper Financial Indemnity Company (IL)
FEIN: 91-1119010 NAIC: 39004
Response Worldwide Insurance Company (IL)
FEIN: 39-1341441 NAIC: 26050
Warner Insurance Company (IL)
FEIN: 36-3423817 NAIC: 26085
Response Worldwide Direct Auto Insurance Company (IL)
FEIN: 61-6027355 NAIC: 20133
Financial Indemnity Company (IL), (*CA)
FEIN: 95-1466743 NAIC: 19852
Kemper General Agency, Inc. (TX)
FEIN: 75-1865314
Kemper Independence Insurance Company (IL), (*CA)
FEIN: 36-4230019 NAIC: 10914
Merastar Industries LLC (DE)
FEIN: 98-0426067
Merastar Insurance Company (IL)
FEIN: 62-0928337 NAIC: 31968
Security One Agency LLC (IL)
FEIN: 20-3046396
NCM Management Corporation (DE)
FEIN: 75-2538407
Union National Fire Insurance Company (LA)
FEIN: 72- 6019774 NAIC: 12998
United Casualty Insurance Company of America (IL)
FEIN: 23-1614367 NAIC: 11142
Unitrin Advantage Insurance Company (NY)
FEIN: 13-3974181 NAIC: 10881
Unitrin Auto and Home Insurance Company (NY)
FEIN: 52-1752227 NAIC: 16063
Unitrin Direct Insurance Company (IL), (*CA)
FEIN: 36-4013825 NAIC: 10226
Unitrin Direct Property & Casualty Company (IL)
FEIN: 36-4230008 NAIC: 10915
Kemper Personal Insurance General Agency, Inc. (TX)
FEIN: 75-2874538
Unitrin Preferred Insurance Company (NY)
FEIN: 13-5460208 NAIC: 25909
Unitrin Safeguard Insurance Company (WI)
FEIN: 39-1401314 NAIC: 40703
Valley Property & Casualty Insurance Company (OR)
FEIN: 93-1217821 NAIC: 10698
Mutual Savings Life Insurance Company (AL)
FEIN: 63-0148960 NAIC: 66397
Mutual Savings Fire Insurance Company (AL)
FEIN: 63-0599704 NAIC: 31178
Reserve National Insurance Company (IL)
FEIN: 73-0661453 NAIC: 68462
Summerset Marketing Company (OK)
FEIN: 73-1281615
National Association of Self-Employed Business Owners (OK)
FEIN: 73-1354019
Rural American Consumers A National Association (OK)
FEIN: 73-1288167
The Reliable Life Insurance Company (MO) (*TX)
FEIN: 43-0476110 NAIC: 68357
Family Security Funerals Company (TX)
FEIN: 43-1511864
Union National Life Insurance Company (LA)
FEIN: 72-0340280 NAIC: 69779
Aegon Opportunity Zone Fund Joint Venture 1, LP
Capitol County Mutual Fire Insurance Company (TX) FEIN: 75-0774903 NAIC: 29211 and its wholly owned subsidiary, Old Reliable Casualty Company (MO) FEIN: 43-1156323; NAIC: 36625, are affiliated with the Kemper Corporation holding company system by virtue of a management services agreement between CCMFIC and The Reliable Life Insurance Company.
Apex Linen Topco, LLC
Sunrun Kronos Owner 2020, LLC
(*) also commercially domiciled in the state
Subsidiary
Affiliate
As of 09/30/2021

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)	*
	Kemper Corporation	00000	95-4255452		0000860748	New York Stock Exchange	Kemper Corporation	DE	UIP					N	
	Kemper Corporation	00000	37-1656986				Accelerate Insurance Network, LLC	IL	NIA	Newins Insurance Agency Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	20-8809010				Access Insurance Agency of Arizona, LLC	AZ	NIA	Newins Insurance Agency Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	20-8115603				Access Insurance Agency of Indiana, LLC	IN	NIA	Newins Insurance Agency Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	20-8115668				Access Insurance Agency of Nevada, LLC	NV	NIA	Newins Insurance Agency Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	26-2621251				Access Insurance Agency of South Carolina, LLC	SC	NIA	Newins Insurance Agency Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000					Aegon Opportunity Zone Fund Joint Venture 1, LP		NIA	United Insurance Company of America	Ownership	100.000	Kemper Corporation	N	1
	Kemper Corporation	00000	26-4133974				Agencia de Seguros de Acceso, LLC	TX	NIA	Newins Insurance Agency Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	10920	77-0475915				Alliance United Insurance Company	CA	IA	Kemper Corporation	Ownership	100.000	Kemper Corporation	Y	
	Kemper Corporation	00000	77-0472398				Alliance United Insurance Services, LLC	CA	NIA	Alliance United Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	38156	39-1344101				Alpha Property & Casualty Insurance Company	WI	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	10730	36-4335932				American Access Casualty Company	IL	IA	American Access Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	84-4192397			00000	American Access Holdings, LLC	DE	NIA	Cranberry Holdings, Inc.	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000				00000	Apex Linen Topco, LLC		NIA	United Insurance Company of America	Ownership	17.500	Kemper Corporation	N	2
0215	Kemper Corporation	29211	75-0774903			00000	Capitol County Mutual Fire Insurance Company	TX	IA	The Reliable Life Insurance Company	Management		Kemper Corporation	N	3
	Kemper Corporation	00000	58-0642684			00000	Casualty Underwriters, Inc.	GA	NIA	Infinity Property and Casualty Services, Inc.	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	37524	75-1636168			00000	Charter Indemnity Company	TX	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	85-4330188			00000	Cranberry Holdings, Inc.	DE	NIA	Kemper Corporation	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	04-3294619			00000	Direct Response Corporation	DE	NIA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	43-1511864	0215		10920	Family Security Funerals Company	TX	NIA	The Reliable Life Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	19852	95-1466743			00000	Financial Indemnity Company	IL	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	36-4448107	0215		38156	Illinois Vehicle Insurance Agency, LLC	IL	NIA	Newins Insurance Agency Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	74-2641866	0215		10730	Infinity Agency of Texas	TX	NIA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	39497	75-1227771			00000	Infinity Assurance Insurance Company	OH	IA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	11738	34-0927698			00000	Infinity Auto Insurance Company	OH	IA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	21792	58-1132392	0215		29211	Infinity Casualty Insurance Company	OH	RE	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	13820	43-6030348			00000	Infinity County Mutual Insurance Company	TX	IA	Infinity Insurance Company	Management		Kemper Corporation	N	4
	Kemper Corporation	00000	20-4363792	0215		37524	Infinity Financial Centers, LLC	DE	NIA	Infinity Property and Casualty Corporation	Ownership	100.000	Kemper Corporation	N	5
0215	Kemper Corporation	10061	34-1767787			00000	Infinity Indemnity Insurance Company	IN	IA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	58-1293110			00000	Infinity Insurance Agency, Inc.	AL	NIA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	22268	31-0943862			00000	Infinity Insurance Company	IN	UDP	Infinity Property and Casualty Corporation	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	10195	34-1785809	0215		19852	Infinity Preferred Insurance Company	OH	IA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	03-0483872			00000	Infinity Property and Casualty Corporation	OH	UIP	Kemper Corporation	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	58-1080659			00000	Infinity Property and Casualty Services, Inc.	GA	NIA	Infinity Standard Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	16802	73-0772113	0215		39497	Infinity Safeguard Insurance Company	OH	IA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	38873	58-1806192	0215		11738	Infinity Security Insurance Company	IN	IA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	20260	31-1333017	0215		21792	Infinity Select Insurance Company	IN	IA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	12599	58-1806189	0215		13820	Infinity Standard Insurance Company	IN	IA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	27-3557296			00000	KAHG LLC	IL	NIA	Kemper Corporation	Ownership	100.000	Kemper Corporation	N	5
	Kemper Corporation	00000	36-4105161	0215		10061	Kemper Corporate Services, Inc.	IL	NIA	Kemper Corporation	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	39004	91-1119010			00000	Kemper Financial Indemnity Company	IL	IA	Response Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	75-1865314	0215		22268	Kemper General Agency, Inc.	TX	NIA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	10914	36-4230019	0215		10195	Kemper Independence Insurance Company	IL	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	75-2874538			00000	Kemper Personal Insurance General Agency, Inc.	TX	NIA	Unitrin Direct Property & Casualty Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	34-1852743			00000	Leader Group, Inc.	OH	NIA	Infinity Auto Insurance Company	Ownership	100.000	Kemper Corporation	N	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
	Kemper Corporation	00000	75-2280915	0215		16802	Leader Managing General Agency, Inc.	TX	NIA	Infinity Auto Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	98-0426067	0215		38873	Merastar Industries LLC	DE	NIA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	5
0215	Kemper Corporation	31968	62-0928337	0215		20260	Merastar Insurance Company	IL	IA	Merastar Industries LLC	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	31178	63-0599704	0215		12599	Mutual Savings Fire Insurance Company	AL	IA	Mutual Savings Life Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	66397	63-0148960			00000	Mutual Savings Life Insurance Company	AL	IA	United Insurance Company of America	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	73-1354019			00000	National Association of Self-Employed Business Owners	OK	NIA	Summerset Marketing Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	75-2538407	0215		39004	NCM Management Corporation	DE	NIA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	36-4442975			00000	Newins Insurance Agency Holdings, LLC	IL	NIA	Cranberry Holdings, Inc.	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	36-4442975	0215		10914	Newins Real Estate Holdings, LLC	IL	NIA	Newins Insurance Agency Holdings, LLC	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	36625	43-1156323			00000	Old Reliable Casualty Company	MO	IA	Capitol County Mutual Fire Insurance Company	Ownership	100.000	Kemper Corporation	N	6
	Kemper Corporation	00000				00000	PennantPark Senior Secured Loan Fund I, LLC		NIA	Trinity Universal Insurance Company	Ownership	50.000	Kemper Corporation	N	7
0215	Kemper Corporation	68462	73-0661453			00000	Reserve National Insurance Company	IL	IA	United Insurance Company of America	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	43044	04-2794993			00000	Response Insurance Company	IL	IA	Direct Response Corporation	Ownership	100.000	Kemper Corporation	Y	
0215	Kemper Corporation	20133	61-6027355	0215		31968	Response Worldwide Direct Auto Insurance Company	IL	IA	Warner Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	26050	39-1341441	0215		31178	Response Worldwide Insurance Company	IL	IA	Response Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	73-1288167	0215		66397	Rural American Consumers a National Association	OK	NIA	Summerset Marketing Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	20-3046396			00000	Security One Agency LLC	IL	NIA	Merastar Industries LLC	Ownership	100.000	Kemper Corporation	N	5
	Kemper Corporation	00000				00000	Senior Loan Fund JV, I LLC		NIA	Trinity Universal Insurance Company	Ownership	50.000	Kemper Corporation	N	8
	Kemper Corporation	00000	73-1281615			00000	Summerset Marketing Company	OK	NIA	Reserve National Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000				00000	Sunrun Kronos Owner 2000, LLC		NIA	Trinity Universal Insurance Company	Ownership	22.500	Kemper Corporation	N	9
	Kemper Corporation	00000		0215		36625	Sunrun Kronos Owner 2000, LLC		NIA	United Insurance Company of America	Ownership	7.600	Kemper Corporation	N	
	Kemper Corporation	00000	31-1357130			00000	The Infinity Group, Inc.	IN	NIA	Infinity Insurance Company	Ownership	100.000	Kemper Corporation	N	
	Kemper Corporation	00000	36-6007812	0215		68462	The Kemper Foundation	IL	NIA	Kemper Corporation	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	68357	43-0476110	0215		43044	The Reliable Life Insurance Company	MO	IA	United Insurance Company of America	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	19887	75-0620550	0215		20133	Trinity Universal Insurance Company	TX	IA	Kemper Corporation	Ownership	100.000	Kemper Corporation	Y	
0215	Kemper Corporation	12998	72-6019774	0215		26050	Union National Fire Insurance Company	LA	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	69779	72-0340280			00000	Union National Life Insurance Company	LA	IA	United Insurance Company of America	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	11142	23-1614367			00000	United Casualty Insurance Company of America	IL	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	69930	36-1896670			00000	United Insurance Company of America	IL	IA	Kemper Corporation	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	10881	13-3974181			00000	Unitrin Advantage Insurance Company	NY	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	16063	52-1752227			00000	Unitrin Auto and Home Insurance Company	NY	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	29351	74-1084315			00000	Unitrin County Mutual Insurance Company	TX	IA	NCM Management Corporation	Management		Kemper Corporation	N	10
0215	Kemper Corporation	10226	36-4013825			00000	Unitrin Direct Insurance Company	IL	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	10915	36-4230008			00000	Unitrin Direct Property & Casualty Company	IL	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	25909	13-5460208	0215		68357	Unitrin Preferred Insurance Company	NY	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	40703	39-1401314	0215		19887	Unitrin Safeguard Insurance Company	WI	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	10698	93-1217821	0215		12998	Valley Property & Casualty Insurance Company	OR	IA	Trinity Universal Insurance Company	Ownership	100.000	Kemper Corporation	N	
0215	Kemper Corporation	26085	36-3423817	0215		69779	Warner Insurance Company	IL	IA	Direct Response Corporation	Ownership	100.000	Kemper Corporation	Y	

Asterisk	Explanation
1	Aegon Opportunity Fund Joint Venture 1, LLC, (Aegon) is an affiliate by virtue of United Insurance Company of America (United) having a majority partnership interest in Aegon.
2	Apex Linen Topco, LLC (Apex) is an affiliate by virtue of United having a 17.5% partnership interest in Apex.
3	Capitol County Mutual Fire Insurance Company (NAIC# 29211, domiciled in the state of Texas) is affiliated with The Reliable Life Insurance Company by virtue of a management agreement.
4	Infinity County Mutual Insurance Company (NAIC# 13820, domiciled in the state of Texas) is affiliated with Infinity Insurance Company by virtue of a management agreement.

Asterisk	Explanation
5	These entities are limited liability companies. Percentages relate to the owner's membership interest in the LLC.
6	Old Reliable Casualty Company (NAIC# 36625, domiciled in the state of Missouri) is affiliated by virtue of its ownership by Capitol County Mutual Fire Insurance Company.
7	PennantPark Senior Secured Loan Fund I, LLC (PSLL), is an affiliate by virtue of Trinity having 50% control of the board of PSSL, with the other 50% vested in PennantPark Floating Rate Capital, Ltd.
8	Senior Loan Fund JV, I LLC (SLFJV) is an affiliate by virtue of Trinity having 50% control of the board of SLFJV, with the other 50% vested in Oaktree Specialty Lending Corp.
9	Sunrun Kronos Owner 2020, LLC (Sunrun) is an affiliate by virtue of Trinity having a 22.9% partnership interest in Sunrun.
10	Unitrin County Mutual Insurance Company (NAIC# 29351, domiciled in the state of Texas) is affiliated with NCM Management Corp. by virtue of a management agreement.

PART 1 - LOSS EXPERIENCE

	Line of Business	Current Year to Date 1 Direct Premiums Earned	Current Year to Date 2 Direct Losses Incurred	Current Year to Date 3 Direct Loss Percentage	4 Prior Year to Date Direct Loss Percentage
1.	Fire	20,189			
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	76,152	20,545	27.0	39.7
17.2	Other liability - claims-made	25,261	6,769	26.8	20.5
17.3	Excess workers' compensation				
18.1	Products liability - occurrence				
18.2	Products liability - claims-made				
19.1,19.2	Private passenger auto liability	7,202,895	5,588,262	77.6	65.0
19.3,19.4	Commercial auto liability	22,497,456	7,053,189	31.4	32.8
21.	Auto physical damage	6,838,095	4,796,779	70.1	54.2
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	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				
35.	Totals	36,660,048	17,465,544	47.6	45.6
	DETAILS OF WRITE-INS				
3401.					
3402.					
3403.					
3498.	Summary of remaining write-ins for Line 34 from overflow page				
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)				

PART 2 - DIRECT PREMIUMS WRITTEN

	Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire	6,935	24,756	17,395
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	29,246	86,949	63,126
17.2	Other liability - claims-made	11,318	25,585	26,915
17.3	Excess workers' compensation			
18.1	Products liability - occurrence			
18.2	Products liability - claims-made			
19.1,19.2	Private passenger auto liability	1,530,394	7,388,557	8,557,748
19.3,19.4	Commercial auto liability	8,794,727	25,631,663	19,908,935
21.	Auto physical damage	2,555,358	7,781,149	6,711,237
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			
35.	Totals	12,927,979	40,938,660	35,285,356
	DETAILS OF WRITE-INS			
3401.				
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page			
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

Years in Which Losses Occurred	1 Prior Year-End Known Case Loss and LAE Reserves	2 Prior Year-End IBNR Loss and LAE Reserves	3 Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	4 2021 Loss and LAE Payments on Claims Reported as of Prior Year-End	5 2021 Loss and LAE Payments on Claims Unreported as of Prior Year-End	6 Total 2021 Loss and LAE Payments (Cols. 4+5)	7 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	8 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	9 Q.S. Date IBNR Loss and LAE Reserves	10 Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	11 Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	12 Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	13 Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2018 + Prior													
2. 2019													
3. Subtotals 2019 + Prior													
4. 2020													
5. Subtotals 2020 + Prior													
6. 2021	XXX	XXX	XXX	XXX			XXX				XXX	XXX	XXX
7. Totals													
8. Prior Year-End Surplus As Regards Policyholders	6,474										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.	2.	3.
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4.

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

Explanations:

1.

2.

3.

4.

Bar Codes:

1. Trusteed Surplus Statement [Document Identifier 490]

2. Supplement A to Schedule T [Document Identifier 455]

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

4. Director and Officer Supplement [Document Identifier 505]

OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

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

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

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

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1 Year to Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	7,294,578	7,635,776
2.	Cost of bonds and stocks acquired	8,471,999	1,099,805
3.	Accrual of discount	6,084	3,187
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		1,302
6.	Deduct consideration for bonds and stocks disposed of	80,225	1,431,328
7.	Deduct amortization of premium	39,067	14,164
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)	15,653,369	7,294,578
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	15,653,369	7,294,578

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)	14,923,956	281,034	76,714	(13,313)	17,225,035	14,923,956	15,114,963	15,455,255
2. NAIC 2 (a)	539,431			(1,025)	540,445	539,431	538,406	
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	15,463,387	281,034	76,714	(14,338)	17,765,480	15,463,387	15,653,369	15,455,255
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	15,463,387	281,034	76,714	(14,338)	17,765,480	15,463,387	15,653,369	15,455,255

(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 $; NAIC 2 $; NAIC 3 $ NAIC 4 $; NAIC 5 $; NAIC 6 $

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	8,160,741	48,871
2.	Cost of cash equivalents acquired	23,597,790	78,151,523
3.	Accrual of discount	825	1,771
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals	15	84
6.	Deduct consideration received on disposals	31,629,687	70,041,508
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)	129,684	8,160,741
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	129,684	8,160,741

Schedule A - Part 2 - Real Estate Acquired and Additions Made

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the 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, NAIC Designation Modifier and SVO Administrative Symbol
373385-GC-1	GEORGIA ST		09/30/2021	RAYMOND JAMES & ASSOCIATES INC.		81,034	85,000	268	1.A FE
1799999. Subtotal - Bonds - U.S. States, Territories and Possessions						81,034	85,000	268	XXX
184160-LK-3	CLAYTON CNTY GA HSG AUTH		08/06/2021	KEYBANC CAPITAL MARKETS INC.		200,000	200,000	188	1.A FE
3199999. Subtotal - Bonds - U.S. Special Revenues						200,000	200,000	188	XXX
8399997. Total - Bonds - Part 3						281,034	285,000	456	XXX
8399998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX
8399999. Total - Bonds						281,034	285,000	456	XXX
8999997. Total - Preferred Stocks - Part 3							XXX		XXX
8999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							XXX		XXX
9799997. Total - Common Stocks - Part 3							XXX		XXX
9799998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							XXX		XXX
9899999. Total - Preferred and Common Stocks							XXX		XXX
9999999 - Totals						281,034	XXX	456	XXX

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the 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 Ident-ification	Description	For-eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other Than Temporary Impairment Recog-nized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	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 Con-tractual Maturity Date	NAIC Desig-nation, NAIC Desig-nation Modifier and SVO Admini-strative Symbol
373384-UV-6	GEORGIA ST		07/01/2021	PREREFUNDED		75,000	75,000	86,012	76,439		(1,439)		(1,439)		75,000				3,750	07/01/2025	1.A FE
1799999. Subtotal - Bonds - U.S. States, Territories and Possessions						75,000	75,000	86,012	76,439		(1,439)		(1,439)		75,000				3,750	XXX	XXX
240471-NP-3	DEKALB CNTY GA HSG AUTH MF HSG		09/26/2021	SINKING FUND REDEMPTION		1,103	1,103	1,103	1,103						1,103				26	04/01/2036	1.A FE
24311P-AD-0	DECATUR GA HSG AUTH MF HSG REV		09/26/2021	SINKING FUND REDEMPTION		611	611	611	611						611				14	04/01/2036	1.A FE
3199999. Subtotal - Bonds - U.S. Special Revenues						1,714	1,714	1,714	1,714						1,714				40	XXX	XXX
8399997. Total - Bonds - Part 4						76,714	76,714	87,726	78,153		(1,439)		(1,439)		76,714				3,790	XXX	XXX
8399998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999. Total - Bonds						76,714	76,714	87,726	78,153		(1,439)		(1,439)		76,714				3,790	XXX	XXX
8999997. Total - Preferred Stocks - Part 4							XXX													XXX	XXX
8999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							XXX													XXX	XXX
9799997. Total - Common Stocks - Part 4							XXX													XXX	XXX
9799998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							XXX													XXX	XXX
9899999. Total - Preferred and Common Stocks							XXX													XXX	XXX
9999999 - Totals						76,714	XXX	87,726	78,153		(1,439)		(1,439)		76,714				3,790	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open

N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

SCHEDULE E - PART 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 of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Northern Trust ..... Chicago IL					133	133	133	XXX
0199998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX			133	133	133	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX						XXX
0399999. Total Cash on Deposit	XXX	XXX			133	133	133	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999. Total - Cash	XXX	XXX			133	133	133	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 and Accrued	9 Amount Received During Year
0599999. Total - U.S. Government Bonds								
1099999. Total - All Other Government Bonds								
1799999. Total - U.S. States, Territories and Possessions Bonds								
2499999. Total - U.S. Political Subdivisions Bonds								
3199999. Total - U.S. Special Revenues Bonds								
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds								
4899999. Total - Hybrid Securities								
5599999. Total - Parent, Subsidiaries and Affiliates Bonds								
6099999. Subtotal - SVO Identified Funds								
6599999. Subtotal - Unaffiliated Bank Loans								
7699999. Total - Issuer Obligations								
7799999. Total - Residential Mortgage-Backed Securities								
7899999. Total - Commercial Mortgage-Backed Securities								
7999999. Total - Other Loan-Backed and Structured Securities								
8099999. Total - SVO Identified Funds								
8199999. Total - Affiliated Bank Loans								
8299999. Total - Unaffiliated Bank Loans								
8399999. Total Bonds								
665278-40-4	NORTHERN INST GOVT MONEY MKT FUND		09/15/2021	0.000		129,684		
8699999. Subtotal - All Other Money Market Mutual Funds						129,684		
9999999 - Total Cash Equivalents						129,684		