



QUARTERLY STATEMENT
 AS OF MARCH 31, 2023
 OF THE CONDITION AND AFFAIRS OF THE
Obsidian Insurance Company

NAIC Group Code..... 4982..... 4982..... NAIC Company Code..... 35602.... Employer's ID Number..... 31-0926059.....
 (Current) (Prior)

Organized under the Laws of..... OH..... State of Domicile or Port of Entry..... OH.....
 Country of Domicile..... US.....
 Incorporated/Organized..... 02/09/1978..... Commenced Business..... 03/01/1978.....
 Statutory Home Office..... 41 S. HIGH STREET, SUITE 1700..... COLUMBUS, OH, US 43215.....
 Main Administrative Office..... 1330 AVENUE OF THE AMERICAS, STE 23A.....
 NEW YORK, NY, US 10019..... 800-684-5428.....
 (Telephone Number)

Mail Address..... 1330 AVENUE OF THE AMERICAS, STE 23A..... NEW YORK, NY, US 10019.....
 Primary Location of Books and
 Records..... 1330 AVENUE OF THE AMERICAS, STE 23A.....
 NEW YORK, NY, US 10019..... 800-684-5428.....
 (Telephone Number)

Internet Website Address..... WWW.OBSIDIANSPECIALTY.COM.....
 Statutory Statement Contact..... WENDY DOBRINDT..... 646-493-6054.....
 (Telephone Number)

WDOBRINDT@OBSIDIANSPECIALTY.COM.....
 (E-Mail Address) (Fax Number)

OFFICERS

..... WILLIAM JEWETT, CHIEF EXECUTIVE OFFICER..... CRAIG RAPPAPORT, CHIEF FINANCIAL OFFICER, TREASURER....
 EMILY CANELO, CHIEF LEGAL OFFICER, SECRETARY.....

DIRECTORS OR TRUSTEES

..... WILLIAM JEWETT..... EMILY CANELO.....
 CRAIG RAPPAPORT..... J. RYAN CLARK.....
 SCOTT NIEHAUS.....

State of Connecticut
 County of Middlesex 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.

x WILLIAM JEWETT WILLIAM JEWETT
 CHIEF EXECUTIVE OFFICER

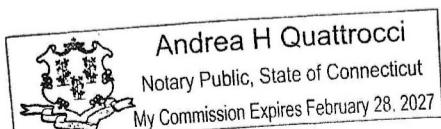
x EMILY CANELO EMILY CANELO
 CHIEF LEGAL OFFICER, SECRETARY

x CRAIG RAPPAPORT CRAIG RAPPAPORT
 CHIEF FINANCIAL OFFICER, TREASURER

Subscribed and sworn to before me
 this 15th day of
May, 2023

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

x Andrea H. Quattroci



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.....	22,484,025		22,484,025	22,602,930
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 (\$ 2,260,241), cash equivalents (\$ 3,551,476) and short-term investments (\$).....	5,811,717		5,811,717	5,251,048
6. Contract loans (including \$ premium notes).....				
7. Derivatives.....				
8. Other invested assets.....				
9. Receivables for securities.....				
10. Securities lending reinvested collateral assets.....				
11. Aggregate write-ins for invested assets.....				
12. Subtotals, cash and invested assets (Lines 1 to 11).....	28,295,742		28,295,742	27,853,978
13. Title plants less \$ charged off (for Title insurers only).....				
14. Investment income due and accrued.....	143,336		143,336	119,328
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	43,668	434	43,234	174,217
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums).....	7,845,563		7,845,563	5,112,092
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$).....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	1,479,750		1,479,750	1,588,513
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.....				—
18.2 Net deferred tax asset.....	539,571		539,571	571,317
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.....	19,631,881		19,631,881	18,103,393
24. Health care (\$) and other amounts receivable.....				
25. Aggregate write-ins for other-than-invested assets.....	278,765	20,769	257,996	108,689
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	58,258,276	21,203	58,237,073	53,631,527
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....				
28. Total (Lines 26 and 27).....	58,258,276	21,203	58,237,073	53,631,527
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. RECEIVABLE.....	257,996		257,996	108,689
2502. PREPAID EXPENSES.....	20,769	20,769	—	—
2503.....				
2598. Summary of remaining write-ins for Line 25 from overflow page.....				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	278,765	20,769	257,996	108,689

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ 1,076,366)	4,346,914	3,351,211
2. Reinsurance payable on paid losses and loss adjustment expenses	3,327,487	2,669,441
3. Loss adjustment expenses	1,872,063	1,341,087
4. Commissions payable, contingent commissions and other similar charges	2,074,760	2,479,072
5. Other expenses (excluding taxes, licenses and fees)	37,968	81,391
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	98,412	78,389
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	195	
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ 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)	4,345,346	4,284,654
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	10,730,224	7,747,986
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	221,611	646,289
20. Derivatives		
21. Payable for securities		
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	3,332,567	3,233,410
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	30,387,547	25,912,930
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	30,387,547	25,912,930
29. Aggregate write-ins for special surplus funds		
30. Common capital stock	3,591,990	3,591,990
31. Preferred capital stock		
32. Aggregate write-ins for other-than-special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	23,408,012	23,408,012
35. Unassigned funds (surplus)	849,524	718,595
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)	27,849,526	27,718,597
38. Totals (Page 2, Line 28, Col. 3)	58,237,073	53,631,527
Details of Write-Ins		
2501. DEFERRED CEDING FEES	3,332,567	3,233,410
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)	3,332,567	3,233,410
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 \$ 9,945,002)	6,142,059	1,734,637	12,620,029
1.2. Assumed (written \$ 2,264,465)	2,203,773	1,008,584	6,127,235
1.3. Ceded (written \$ 9,945,002)	6,142,059	1,734,637	12,620,029
1.4. Net (written \$ 2,264,465)	2,203,773	1,008,584	6,127,235
Deductions:			
2. Losses incurred (current accident year \$1,105,678):			
2.1. Direct	4,123,009	1,057,610	7,100,950
2.2. Assumed	1,172,972	526,790	3,202,180
2.3. Ceded	4,123,009	1,057,610	7,100,950
2.4. Net	1,172,972	526,790	3,202,180
3. Loss adjustment expenses incurred	1,011,754	438,743	2,547,533
4. Other underwriting expenses incurred	36,490	(181,448)	2,420,656
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	2,221,216	784,085	8,170,369
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	(17,443)	224,499	(2,043,134)
Investment Income			
9. Net investment income earned	168,615	108,613	501,886
10. Net realized capital gains (losses) less capital gains tax of \$			1
11. Net investment gain (loss) (Lines 9 + 10)	168,615	108,613	501,887
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		150,000	805,022
15. Total other income (Lines 12 through 14)		150,000	805,022
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	151,172	483,112	(736,225)
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)	151,172	483,112	(736,225)
19. Federal and foreign income taxes incurred	31,746	101,454	392,896
20. Net income (Line 18 minus Line 19) (to Line 22)	119,426	381,658	(1,129,121)
Capital and Surplus Account			
21. Surplus as regards policyholders, December 31 prior year	27,718,597	27,981,991	27,981,991
22. Net income (from Line 20)	119,426	381,658	(1,129,121)
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$			
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	–		842,433
27. Change in nonadmitted assets	11,503		(32,706)
28. Change in provision for reinsurance		56,000	56,000
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)	130,929	437,658	(263,394)
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	27,849,526	28,419,649	27,718,597
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. SERVICE INCOME		150,000	805,022
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)		150,000	805,022
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.....	2,646,229	639,578	10,162,744
2. Net investment income.....	160,250	111,133	628,572
3. Miscellaneous income.....		150,000	805,022
4. Total (Lines 1 to 3).....	2,806,479	900,711	11,596,338
5. Benefit and loss related payments.....	(589,540)	262,131	(248,759)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	944,979	(203,595)	4,100,558
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	(195)	1	388,097
10. Total (Lines 5 through 9).....	355,244	58,537	4,239,896
11. Net cash from operations (Line 4 minus Line 10).....	2,451,235	842,174	7,356,442
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	103,261	333,816	943,189
12.2 Stocks.....			
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....		(5)	
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).....	103,261	333,811	943,189
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....			
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).....	—	—	—
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).....	103,261	333,811	943,189
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).....	(1,993,827)	(745,541)	(5,846,936)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	(1,993,827)	(745,541)	(5,846,936)
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).....	560,669	430,444	2,452,695
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	5,251,048	2,798,353	2,798,353
19.2 End of period (Line 18 plus Line 19.1).....	5,811,717	3,228,797	5,251,048

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

20.0001.....			
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Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Obsidian Insurance Company (the "Company" or "OIC") have been prepared in conformity with the statutory accounting practices prescribed or permitted by the State of Ohio Department of Insurance ("the Department"). The Department requires insurance companies domiciled in the State of Ohio to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP) subject to any deviations prescribed or permitted by the Ohio Department of Insurance. The Company has no prescribed or permitted practices exceptions.

	SSAP #	F/S Page	F/S Line #	03/31/2023	12/31/2022
Net Income					
(1) State basis (Page 4, Line 20, Columns 1 & 3).....	XXX.....	XXX.....	XXX.....	\$ 119,426	\$ (1,129,121)
(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.....	\$ 119,426	\$ (1,129,121)
Surplus					
(5) State basis (Page 3, Line 37, Columns 1 & 2).....	XXX.....	XXX.....	XXX.....	\$ 27,849,526	\$ 27,718,597
(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.....	\$ 27,849,526	\$ 27,718,597

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with NAIC SAP requires management to make estimates and assumptions that affects the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of the premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance assumed.

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

Net investment income earned consists primarily in interest and dividends less investment related expense. Interest is recognized on an accrual basis and dividends are recognized on an ex-dividend basis. Net realized capital gains (losses) are recognized on a first in first out basis when sold, redeemed or otherwise disposed. Realized capital losses include write-downs for impairments considered to be other than temporary.

In addition, the Company uses the following accounting policies:

- (1) Short term investments are stated at amortized value using the interest method. Non-investment grade short-term investments are stated at the lower of amortized value or fair value.
- (2) Investment grade bonds not backed by other loans are stated at amortized value using the interest method. Non-investment grade bonds with NAIC designation of 3 through 6 are stated at the lower amortized value or fair value.
- (3) Common stocks, other than investments in stocks of subsidiaries and affiliates are stated at fair value.
- (4) Investment grade redeemable preferred stocks are stated at amortized value. Investment grade perpetual preferred stocks are stated at fair value. Non investment grade preferred stocks are stated at the lower of amortized value or fair value.
- (5) First lien mortgage loans on real estate are stated at their estimated fair value. See Note 5A.
- (6) Loan-backed securities are stated at either amortized cost or the lower of amortized or fair value. The retrospective adjustment method is used to value all securities.
- (7) The Company has no investments in subsidiary or affiliated companies.
- (8) Investments in joint ventures, most partnerships and limited liability companies are stated at the underlying audited GAAP equity value.
- (9) The Company does not hold investments in derivative instruments as defined by SSAP No. 31.
- (10) The Company does not anticipate investment income as a factor in premium deficiency calculations.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.
- (12) There have been no changes to the Company's capitalization policy.
- (13) The Company has no pharmaceutical rebate receivables.

D. Going Concern

Management does not have any doubt about the Company's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors - Not Applicable

Notes to the Financial Statements

3. Business Combinations and Goodwill - Not Applicable

4. Discontinued Operations - Not Applicable

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans - Not Applicable
- B. Debt Restructuring - Not Applicable
- C. Reverse Mortgages - Not Applicable
- D. Loan-Backed Securities
 - (1) Prepayment assumptions for loan-backed and structured securities were obtained from our investment software vendor through an independent third-party source.
 - (2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) - Not Applicable
 - (3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities - Not Applicable
 - (4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss

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

a.	The aggregate amount of unrealized losses:	
1.	Less than 12 months.....	\$.....(1,682)
2.	12 months or longer.....	.....(1,051,857)
b.	The aggregate related fair value of securities with unrealized losses:	
1.	Less than 12 months.....	\$..... 47,783
2.	12 months or longer.....	..... 7,023,113
- (5) Support for concluding impairments are not other-than-temporary - No Significant Changes
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - Not Applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale - Not Applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - Not Applicable
- J. Real Estate - Not Applicable
- K. Low-Income Housing Tax Credits (LIHTC) - Not Applicable

Notes to the Financial Statements

5. Investments (Continued)

L. Restricted Assets

(1) Restricted assets (including pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted							Current Year			
	Current Year							Current Year			
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity	Total (1 + 3)	Total From Prior Year	Increase / (Decrease) (5 - 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5-8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets, %	Admitted to Total Assets, %
a. Subject to contractual obligation for which liability is not shown	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	%.....	%.....
b. Collateral held under security lending agreements											
c. Subject to repurchase agreements											
d. Subject to reverse repurchase agreements											
e. Subject to dollar repurchase agreements											
f. Subject to dollar reverse repurchase agreements											
g. Placed under option contracts											
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock											
i. FHLB capital stock											
j. On deposit with states	8,479,142				8,479,142		8,508,545	(29,403)		8,479,142	14.554
k. On deposit with other regulatory bodies											
l. Pledged as collateral to FHLB (including assets backing funding agreements)											
m. Pledged as collateral not captured in other categories											
n. Other restricted assets											
o. Total restricted assets (Sum of a through n)	\$ 8,479,142	\$	\$	\$	\$ 8,479,142	\$ 8,508,545	\$ (29,403)	\$	\$ 8,479,142	14.554 %	14.560 %

- (2) Detail of assets pledged as collateral not captured in other categories (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - Not Applicable
- (3) Detail of other restricted assets (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - Not Applicable
- (4) Collateral received and reflected as assets within the reporting entity's financial statements - Not Applicable

M. Working Capital Finance Investments - Not Applicable

N. Offsetting and Netting of Assets and Liabilities - Not Applicable

O. 5GI Securities - Not Applicable

P. Short Sales - Not Applicable

Q. Prepayment Penalty and Acceleration Fees - Not Applicable

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

Asset Type	Percent Share
(1) Cash.....	38.900 %
(2) Cash Equivalents.....	61.100 %
(3) Short-Term Investments.....	%
(4) Total.....	100.000 %

6. Joint Ventures, Partnerships and Limited Liability Companies - Not Applicable

7. Investment Income - No Significant Changes

8. Derivative Instruments - Not Applicable

9. Income Taxes - No Significant Changes

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of Relationships - No Significant Changes

B. Detail of Related Party Transactions - No Significant Changes

Notes to the Financial Statements

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties (Continued)

- C. Transactions With Related Party Who Are Not Reported on Schedule Y - Not Applicable
- D. Amounts Due From or To Related Parties

The Company reported \$19,631,881 due from affiliates and \$221,611 due to Obsidian Insurance Holdings, Inc. at March 31, 2023. As of March 31, 2022, the company reported \$9,209,531, due from affiliates and \$151,650 due to Obsidian Insurance Holdings, Inc. The Company's Administrative Services and Cost-Sharing Agreement requires that those intercompany balances be settled in 45 days.

- E. Material Management or Services Contracts and Cost-Sharing Arrangements

Effective October 1, 2020 and amended July 30, 2021, Obsidian Insurance Company (NAIC #35602), Obsidian Pacific Insurance Company (formerly Western Home Insurance Company at time of filing) (NAIC #26395), Obsidian Specialty Insurance Company (NAIC #16871) and Obsidian Insurance Holdings, Inc. entered into a Cost Sharing and Service Agreement, which has been approved by the Delaware Department of Insurance, Ohio Department of Insurance and Minnesota Department of Commerce, Obsidian Pacific Insurance Company's domiciliary regulator at the time of filing, and the California Department of Insurance. The name change from Western Home Insurance Company to Obsidian Pacific Insurance Company was effectuated on February 24, 2022. Effective September 30, 2022, Obsidian Pacific Insurance Company redomiciled to Delaware from Minnesota.

- F. Guarantees or Contingencies - Not Applicable
- G. Nature of Relationships that Could Affect Operations - Not Applicable
- H. Amount Deducted for Investment in Upstream Company - Not Applicable
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets - Not Applicable
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - Not Applicable
- K. Foreign Subsidiary Value Using CARVM - Not Applicable
- L. Downstream Holding Company Value Using Look-Through Method - Not Applicable
- M. All SCA Investments - Not Applicable
- N. Investment in Insurance SCAs - Not Applicable
- O. SCA and SSAP No. 48 Entity Loss Tracking - Not Applicable

11. Debt - Not Applicable

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

- A. Defined Benefit Plan - Not Applicable
- B. Investment Policies and Strategies of Plan Assets - Not Applicable
- C. Fair Value of Each Class of Plan Assets - Not Applicable
- D. Expected Long-Term Rate of Return for the Plan Assets - Not Applicable
- E. Defined Contribution Plans - Not Applicable
- F. Multiemployer Plans - Not Applicable
- G. Consolidated/Holding Company Plans

The Company participates in a 401(k)-plan sponsored by Obsidian Insurance Holdings, Inc. (OIH) for substantially all employees of OIH. The Company has no legal obligation for benefits under this plan. The Company is charged for its allocable share of expense for this plan based on its allocated and/or direct salary costs in accordance with its Administrative and Cost-Sharing Agreement. The aggregate total cost of the 401(k) savings plan is \$532,283 since inception.

- H. Postemployment Benefits and Compensated Absences - Not Applicable
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - Not Applicable

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- A. The number of shares of each class of capital stock authorized, issued and outstanding as of the balance sheet date and the par value of each class.

The Company has 12,100 shares authorized with a par value of \$900 per share, 3,991 shares are issued and outstanding. All shares are Class A shares.

- B. Dividend Rate of Preferred Stock - Not Applicable
- C. Dividend restrictions, if any, and an indication if the dividends are cumulative.

Without the prior approval of the Ohio Department of Insurance, dividends are subject to Ohio insurance code 3901.34.

- D. The dates and amounts of dividends paid. Note for each payment whether the dividend was ordinary or extraordinary.

There was an extraordinary dividend of \$58 million paid on August 24, 2020.

- E. The portion of the reporting entity's profits that may be paid as ordinary dividends to stockholders.

Within the limitations of (C) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

- F. Surplus Restrictions - Not Applicable
- G. Surplus Advances - Not Applicable

Notes to the Financial Statements

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations (Continued)

- H. Stock Held for Special Purposes - Not Applicable
- I. Changes in Special Surplus Funds - Not Applicable
- J. Unassigned Funds (Surplus)

The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is (\$2,405,598).

- K. Company-Issued Surplus Debentures or Similar Obligations - Not Applicable
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations

The impact of any restatement due to prior quasi-reorganization is as follows:

The Company, through approval of the Commissioner of Insurance of the State of Ohio, reset its December 31, 2019 unassigned surplus funds to \$0 via quasi-reorganization pursuant to the provisions of SSAP 72. The impact of the restatement due to the quasi-reorganization is as follows:

	Change in Year Surplus	Change in Gross Paid-in and Contributed Surplus
Pre Quasi-Reorganization 2019	\$ (9,080,493)	\$ 15,000,000
Post Quasi-Reorganization	-	5,919,507

- M. The effective date of a quasi-reorganization for a period of ten years following the reorganization.

See note 13.L.

14. Liabilities, Contingencies and Assessments - No Significant Changes

15. Leases - Not Applicable

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - Not Applicable

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - Not Applicable

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - Not Applicable

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - Not Applicable

20. Fair Value Measurements

A. Fair Value Measurement

(1) Fair value measurements at reporting date

The Company has categorized its assets and liabilities that are reported on the balance sheet at fair value into the three-level fair value hierarchy as reflected in the table below. The three-level fair value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined. The three levels are defined as follows:

- Level 1 - Quoted prices in active markets for identical assets and liabilities: This category is for items measured at fair value on a recurring basis includes exchange-trade stocks. The fair value of these stocks is based on quoted prices in active markets.
- Level 2 Significant observable inputs: The estimated fair values for some of these items are determined by independent pricing services using observable inputs. Others are based on quotes from markets which are not considered actively traded. This category is for items measured at fair value on a recurring basis may include long term bonds.
- Level 3 - Significant unobservable inputs: The estimated fair values for these items may be determined by various parties using methods that are not available to the Company, or that may be unavailable to the general public. This category is for items measured at fair value on a recurring basis may include limited partnerships or other invested assets.

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Bonds.....	\$ 5,055,750	\$ 15,235,570	\$	\$	\$ 20,291,320
Cash Equivalent.....	3,551,476				3,551,476
Cash.....	2,260,241				2,260,241
Total assets at fair value/NAV.....	<u>\$ 10,867,467</u>	<u>\$ 15,235,570</u>	<u>\$</u>	<u>\$</u>	<u>\$ 26,103,037</u>
b. Liabilities at fair value					
Total liabilities at fair value.....	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

(2) Fair value measurements in Level 3 of the fair value hierarchy - Not Applicable

(3) Policy on transfers into and out of Level 3 - Not Applicable

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

Bonds carried at fair value categorized as Level 2 were valued using a market approach. These valuations were determined to be Level 2 valuations as quoted market prices for similar instruments in an active market were utilized. This was accomplished by the use of matrix pricing. Matrix pricing takes quoted prices of bonds with similar features and applies analytic methods to determine the fair value of bonds held. Features that are inputs into the analysis include duration, credit quality, tax status and call and sinking fund features.

Notes to the Financial Statements

20. Fair Value Measurements (Continued)

Preferred stocks carried at fair value categorized as Level 2 were valued using a market approach. These valuations were determined to be Level 2 valuations because either quoted markets prices for similar instruments in an active market were utilized via matrix pricing as described above or because quoted markets prices for identical instruments trading in an inactive market were utilized.

Common stocks carried at fair value categorized as Level 2 were valued using a market approach. These valuations were determined to be Level 2 valuations because of quoted markets prices for identical instruments trading in an inactive market were utilized. When an equity instrument is illiquid due to limited trading activity, the use of quoted markets prices for identical instruments was determined by the Company to the most reliable method to determine fair value.

- (5) Derivatives - Not Applicable
- B. Other Fair Value Disclosures - Not Applicable
- C. Fair Values for All Financial Instruments by Level 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds.....	\$ 20,291,320	\$ 22,484,025	\$ 5,055,750	\$ 15,235,570	\$	\$	\$
Cash Equivalent.....	3,551,476	3,551,476	3,551,476	.....	.....	.....	.....
Cash.....	2,260,241	2,260,241	2,260,241	.....	.....	.....	.....

- D. Not Practicable to Estimate Fair Value - Not Applicable
- E. Nature and Risk of Investments Reported at NAV - Not Applicable

21. Other Items - Not Applicable

22. Events Subsequent

The Company has no material subsequent events through May 15, 2023.

23. Reinsurance

- A. Unsecured Reinsurance Recoverables

The Company does have unsecured aggregate recoverables for paid and unpaid losses, including IBNR, loss adjustment expenses and unearned premium from individual reinsurers authorized or unauthorized, that exceeds 3% of capital and surplus.

Individual Reinsurers with Unsecured Reinsurance Recoverables Exceeding 3% of Policyholder Surplus

Individual Reinsurers Who Are Members of a Group

NAIC Group Code	FEIN	Reinsurer Name	Unsecured Amount
5001.....	13-2997499.....	SiriusPoint America Insurance Co.....	\$ 2,923,599
0922.....	95-2769232.....	Insurance Company Of The West.....	3,963,447
0361.....	13-4924125.....	Munich Reinsurance America Inc.....	1,750,111

All Members of the Groups Shown above with Unsecured Reinsurance Recoverables

NAIC Group Code	FEIN	Reinsurer Name	Unsecured Amount
5001.....	13-2997499.....	SiriusPoint America Insurance Co.....	\$ 2,923,599
0922.....	95-2769232.....	Insurance Company Of The West.....	3,963,447
0361.....	13-4924125.....	Munich Reinsurance America Inc.....	1,750,111
Total.....	.....	.....	\$ 8,637,157

- B. Reinsurance Recoverable in Dispute - Not Applicable

- C. Reinsurance Assumed and Ceded

- (1) Maximum amount of return commission that would have been due reinsurers if all of the company's reinsurance was canceled or if the company's insurance assumed was canceled

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates.....	\$ 4,345,346	\$	\$ 1,358,782	\$	\$ 2,986,564	\$
b. All other.....	.....	.....	14,358,773	754,872	(14,358,773)	(754,872)
c. Total (a+b).....	\$ 4,345,346	\$	\$ 15,717,555	\$ 754,872	\$ (11,372,209)	\$ (754,872)
d. Direct unearned premium reserve.....	.....	.....	.....	15,717,555	.....	.....

- (2) The additional or return commission, predicated on loss experience or on any other form of profit sharing arrangements in this statement as a result of existing contractual arrangements is accrued as follows:

Reinsurance

	Direct	Assumed	Ceded	Net
a. Contingent commission.....	\$ 306,702	\$ (938,619)	\$ 306,702	\$ (938,619)
b. Sliding scale adjustments.....	.....	.....	.....	.....
c. Other profit commission arrangements.....	.....	.....	.....	.....
d. Total (a+b+c).....	\$ 306,702	\$ (938,619)	\$ 306,702	\$ (938,619)

- (3) Risks attributed to each of the company's protected cells - Not Applicable

- D. Uncollectible Reinsurance - Not Applicable

Notes to the Financial Statements

23. Reinsurance (Continued)

- E. Commutation of Ceded Reinsurance - Not Applicable
- F. Retroactive Reinsurance - Not Applicable
- G. Reinsurance Accounted for as a Deposit - Not Applicable
- H. Disclosures for the Transfer of Property and Casualty Run-Off Agreements - Not Applicable
- I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - Not Applicable
- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation - Not Applicable
- K. Reinsurance Credit - Not Applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination - Not Applicable

25. Changes in Incurred Losses and Loss Adjustment Expenses

- A. Reasons for Changes in the Provision for Incurred Loss and Loss Adjustment Expenses Attributable to Insured Events of Prior Years

Net incurred losses and loss adjustment expenses attributable to insured events of prior years decreased \$356,021 since December 31, 2022. Changes are the result of ongoing analysis of recent loss development trends in the various lines of business. Original estimates are increased and decreased, as additional information becomes known regarding individual claims.

- B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Losses and Loss Adjustment Expenses - Not Applicable

26. Intercompany Pooling Arrangements

- A. The Current Pooling Participation Percentages are:

- Obsidian Specialty Insurance Company (NAIC #16871): 34%
- Obsidian Insurance Company (NAIC #35602): 36%
- Obsidian Pacific Insurance Company (NAIC #26395): 30%

Obsidian Specialty Insurance Company is the lead entity.

- B. Effective October 1, 2020 and amended July 30, 2021, Obsidian Insurance Company (NAIC #35602), Obsidian Pacific Insurance Company (formerly Western Home Insurance Company at time of filing) (NAIC #26395) and Obsidian Specialty Insurance Company (NAIC #16871) entered into a Reinsurance Pooling Agreement, which has been approved by the Delaware Department of Insurance, Ohio Department of Insurance and Minnesota Department of Commerce, Obsidian Pacific Insurance Company's domiciliary regulator at the time of filing. The name change from Western Home Insurance Company to Obsidian Pacific Insurance Company was effectuated on February 24, 2022. Effective September 30, 2022, Obsidian Pacific Insurance Company redomiciled from Minnesota to Delaware.

- C. Not Applicable

- D. Not Applicable

- E. Not Applicable

- F. Under the Reinsurance Pooling Agreement net premium, net losses and net reserves after taking into account all third-party reinsurance of each company are 100% ceded to the pool and then assumed by member companies proportionally per the agreement. Each company is jointly and severally liable.

- G. As of March 31, 2023, the total amount under the Reinsurance Pooling Agreement due from the pool was \$13,965,426.

27. Structured Settlements - Not Applicable

28. Health Care Receivables - Not Applicable

29. Participating Policies - Not Applicable

30. Premium Deficiency Reserves - Not Applicable

31. High Deductibles - Not Applicable

32. Discounting of Liabilities For Unpaid Losses or Unpaid Loss Adjustment Expenses - Not Applicable

33. Asbestos/Environmental Reserves - Not Applicable

34. Subscriber Savings Accounts - Not Applicable

35. Multiple Peril Crop Insurance - Not Applicable

36. Financial Guaranty Insurance - Not Applicable

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?..... NO.....

1.2 If yes, has the report been filed with the domiciliary state?.....

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?..... NO.....

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.....
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?..... NO.....

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?..... 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.....

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?..... NO.....

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

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?..... NO.....
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. 12/31/2020.....

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. 12/31/2020.....

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). 03/03/2022.....

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.....

6.6 Have all of the recommendations within the latest financial examination report been complied with?..... YES.....

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?..... NO.....

7.2 If yes, give full information

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... NO.....

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?..... NO.....

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 affiliates primary federal regulator.

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

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

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?..... NO.....

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?..... YES.....
10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:..... \$ 19,631,881.....

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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.) NO

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

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

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? NO

14.2 If yes, please complete the following:

	1	2
	Prior Year-End Book / Adjusted Carrying Value	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? NO

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? 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 \$

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

1	2
Name of Custodian(s)	Custodian Address
US BANK, N.A.....	50 S. 16TH STREET, SUITE 2000, PHILA, PA 19102.....
BANK OF OKLAHOMA.....	ONE WILLIAMS CENTER, TULSA, OK 74172.....
FIRST HORIZON ADVISORS.....	165 MADISON AVENUE, SUITE 1400, MEMPHIS, TN 38103.....
TD BANK.....	2035 LIMESTONE ROAD, WILMINGTON, DELAWARE 19808.....
AVENU INSIGHTS & ANALYTICS.....	100 HANCOCK STREET, 10TH FLOOR, QUINCY, MA 02171.....

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? NO

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
NEW ENGLAND ASSET MANAGEMENT, INC.....	U

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

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

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

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
105900.....	NEW ENGLAND ASSET MANAGEMENT, INC.....	KUR85E5PS4GQFZFC130.....	SEC.....	DS.....

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

- 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.
- Issuer or obligor is current on all contracted interest and principal payments.
- The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? NO

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- The security was purchased prior to January 1, 2018.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- 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.
- 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? NO

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:

- The shares were purchased prior to January 1, 2019.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- 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.
- The fund only or predominantly holds bonds in its portfolio.
- 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.
- 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? NO

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

If yes, attach an explanation.

Per the agreement, participation shares are adjusted annually based on prior yearend surplus.....

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? NO

If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? NO

3.2 If yes, give full and complete information thereto

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero? NO

4.2 If yes, complete the following schedule:

			Total Discount				Discount Taken During Period			
1 Line of Business	2 Maximum Interest	3 Disc. 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?..... NO

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?..... NO

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

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?.....

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
U.S. Insurers						
23680.....	52-2301683.....	Odyssey Reinsurance Company.....	CT.....	Authorized.....		
All Other Insurers						
	AA-3190186.....	White Rock Insurance (SAC) Ltd.....	BMU.....	Unauthorized.....		

SCHEDULE T – EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

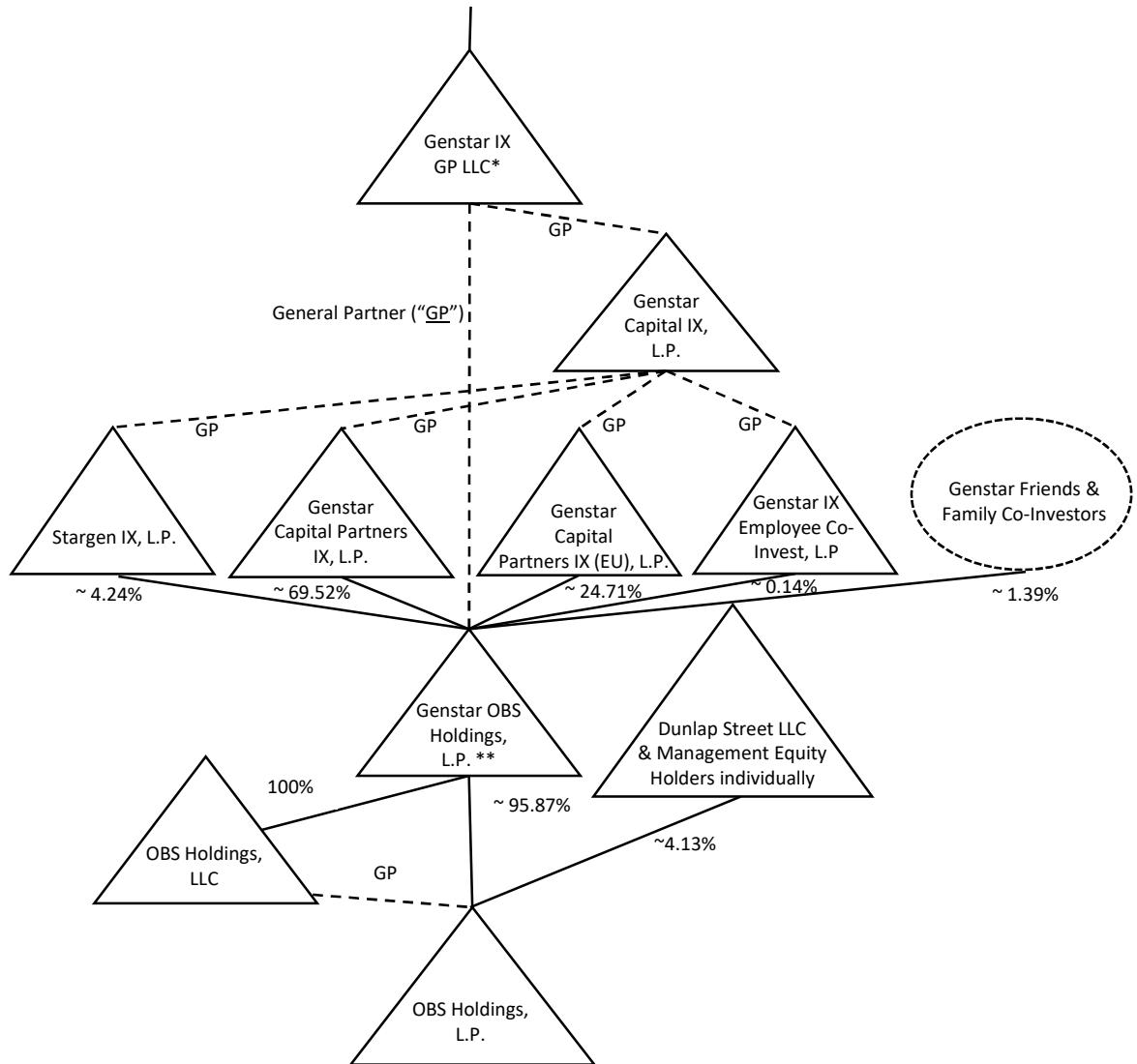
States, Etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama.....	AL	L	148,531	208,764	2,000	2,893	265,937
2. Alaska.....	AK	L					62,888
3. Arizona.....	AZ	L	215,740	257,050	20,037	3,640	422,070
4. Arkansas.....	AR	L	72,037	93,778			52,649
5. California.....	CA	N			19,978		25,000
6. Colorado.....	CO	L	9,775				16,792
7. Connecticut.....	CT	L	7,859	1,315			24,442
8. Delaware.....	DE	L	6,121	723			5,937
9. District of Columbia.....	DC	L					1,247
10. Florida.....	FL	L			3,953		150,300
11. Georgia.....	GA	L	2,143,128	1,595,011	205,815		3,728,798
12. Hawaii.....	HI	L					162,639
13. Idaho.....	ID	L	2,210	2,564			1,856
14. Illinois.....	IL	L	2,585,824	58,157	20,196		1,672,169
15. Indiana.....	IN	L	304,463	166,801	25,413		698,288
16. Iowa.....	IA	L	125,485	139,533	368		278,098
17. Kansas.....	KS	L	731,642				54,478
18. Kentucky.....	KY	L	273,437	2,199	492		146,111
19. Louisiana.....	LA	L	4,154	2,263			792
20. Maine.....	ME	L	6,225				3,581
21. Maryland.....	MD	L	37,899	54,044	33,820	3,000,000	85,470
22. Massachusetts.....	MA	L	1,185				(2,954,660)
23. Michigan.....	MI	L	441,950	100,851	6,190		942,848
24. Minnesota.....	MN	L	982	425,593			54,893
25. Mississippi.....	MS	L	120,809	113,586			137,275
26. Missouri.....	MO	L	171,031	4,917	(2,000)		160,642
27. Montana.....	MT	L	14,999				8,057
28. Nebraska.....	NE	L	24,621	12,911			1,459
29. Nevada.....	NV	L	24,628				6,413
30. New Hampshire.....	NH	L					360
31. New Jersey.....	NJ	L	188,987		8,231		9,286
32. New Mexico.....	NM	L	8,244	12,902	44,538		111,356
33. New York.....	NY	L	27,446	11,240			6,776
34. North Carolina.....	NC	L	59,934	60,203			187,964
35. North Dakota.....	ND	L					13,028
36. Ohio.....	OH	L	530,232	116,385	40,642	13,168,488	877,352
37. Oklahoma.....	OK	L	189,318	396			(13,051,969)
38. Oregon.....	OR	L	13,154	2,408			39,360
39. Pennsylvania.....	PA	L	111,478	2,096	844		143
40. Rhode Island.....	RI	L	1,203	949			3,860
41. South Carolina.....	SC	L	321,523	302,342	1,052	900	755
42. South Dakota.....	SD	L	(169)	1,285	5,274		19,244
43. Tennessee.....	TN	L	179,731	73,869	5,898	240,000	342
44. Texas.....	TX	L	632,926	621,424	178,413	64,213	1,951,609
45. Utah.....	UT	L	177,934	4,388			118,831
46. Vermont.....	VT	N					6,206
47. Virginia.....	VA	N					1,580
48. Washington.....	WA	L	6,322	333	12,778		120
49. West Virginia.....	WV	L	4,757	4,504			2,221
50. Wisconsin.....	WI	L	17,247	12,498			5,433
51. Wyoming.....	WY	L					80
52. American Samoa.....	AS	N					112,500
53. Guam.....	GU	N					17,834
54. Puerto Rico.....	PR	N					(1,076)
55. US Virgin Islands.....	VI	N					
56. Northern Mariana Islands.....	MP	N					
57. Canada.....	CAN	N					
58. Aggregate Other Alien.....	OT	XXX					
59. Totals.....		XXX	9,945,002	4,467,282	633,932	16,480,134	13,034,220
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

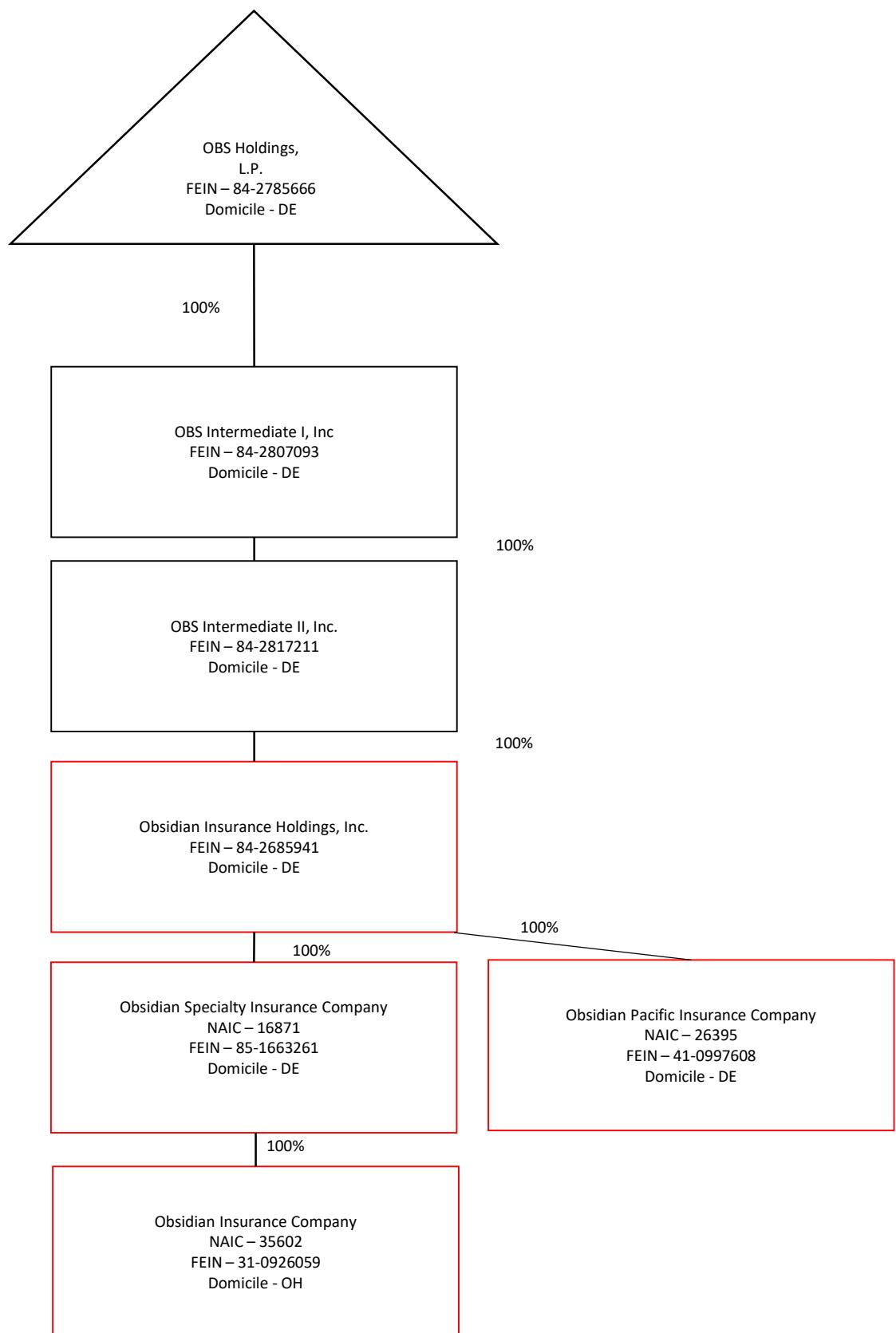
1. L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 48..... 4. Q – Qualified - Qualified or accredited reinsurer..... –
 Domestic Surplus Lines Insurer (DSL) – Reporting entities

2. R – Registered – Non-domiciled RRGs..... – 5. D – authorized to write surplus lines in the state of domicile..... –
 3. E – Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than the state of domicile - see DSL)..... – 6. N – None of the above - Not allowed to write business in the state..... 9

Obsidian Structure Chart



Obsidian Structure Chart



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
	Genstar IX GP LLC		83-3208310				Genstar IX GP LLC	DE	UIP	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	
	Genstar Capital IX LP		83-3126286				Genstar IX GP LLC	DE	UIP	Genstar IX GP LLC	OWNERSHIP	69.520	Genstar IX GP LLC	NO	
	Genstar Capital Partners IX		83-3170510				Genstar Capital IX LP	DE	NIA	Genstar IX GP LLC	OWNERSHIP	24.710	Genstar IX GP LLC	NO	
	Genstar Capital Ptnrs IX (EU)		83-3159360				Genstar Capital IX LP	DE	NIA	Genstar IX GP LLC	OWNERSHIP	4.240	Genstar IX GP LLC	NO	
	Stargen IX LP		83-3191143				Genstar Capital IX LP	DE	NIA	Genstar IX GP LLC	OWNERSHIP	0.140	Genstar IX GP LLC	NO	
	Genstar IX Empl Co-Invest		84-2772105				Genstar Capital IX LP	DE	NIA	Genstar IX GP LLC	OWNERSHIP	4.130		NO	
	Dunlap Street, LLC		82-3964017				Dunlap Street, LLC	NJ	NIA						
	Genstar OBS Holdings LP		84-2776568				Genstar IX GP LLC	DE	UIP	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	
	OBS Holdings LLC		32-0606181				Genstar OBS Holdings LP	DE	NIA	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	
	OBS Holdings LP		84-2785666				Genstar OBS Holdings LP	DE	UIP	Genstar IX GP LLC	OWNERSHIP	95.870	Genstar IX GP LLC	NO	
	OBS Intermediate I, Inc.		84-2807093				OBS Holdings LP	DE	UIP	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	
	OBS Intermediate II, Inc.		84-2817211				OBS Intermediate I, Inc.	DE	UIP	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	
	Obsidian Insurance Holdings, Inc.		84-2685941				OBS Intermediate II, Inc.	DE	UIP	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	
4982	Obsidian Specialty Insurance Company	16871	85-1663261				Obsidian Insurance Holdings, Inc.	DE	UDP	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	
4982	Obsidian Insurance Company	35602	31-0926059				Obsidian Specialty Insurance Company	OH	RE	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	
4982	Obsidian Pacific Insurance Company	26395	41-0997608				Obsidian Insurance Holdings, Inc.	DE	IA	Genstar IX GP LLC	OWNERSHIP	100.000	Genstar IX GP LLC	NO	

PART 1 – LOSS EXPERIENCE

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....	473,853	306,691	64.723	53.448
2.1. Allied lines.....				
2.2. Multiple peril crop.....				
2.3. Federal flood.....				
2.4. Private crop.....				
2.5. Private flood.....				
3. Farmowners multiple peril.....				
4. Homeowners multiple peril.....				
5.1. Commercial multiple peril (non-liability portion).....				
5.2. Commercial multiple peril (liability portion).....				
6. Mortgage guaranty.....				
8. Ocean marine.....				
9. Inland marine.....	414,028	182,255	44.020	58.267
10. Financial guaranty.....				
11.1. Medical professional liability - occurrence.....				
11.2. Medical professional liability - claims made.....				
12. Earthquake.....				
13.1. Comprehensive (hospital and medical) individual.....				
13.2. Comprehensive (hospital and medical) group.....	44,810	18,955	42.301	
14. Credit accident and health.....				
15.1. Vision only.....				
15.2. Dental only.....				
15.3. Disability income.....				
15.4. Medicare supplement.....				
15.5. Medicaid Title XIX.....				
15.6. Medicare Title XVIII.....				
15.7. Long-term care.....				
15.8. Federal employees health benefits plan.....				
15.9. Other health.....				
16. Workers' compensation.....				
17.1. Other liability occurrence.....	478,195	176,109	36.828	40.768
17.2. Other liability-claims made.....	63,136	3,926	6.218	55.751
17.3. Excess workers' compensation.....				
18.1. Products liability - occurrence.....				
18.2. Products liability - claims made.....	115	39	33.913	
19.1. Private passenger auto no-fault (personal injury protection).....	81,076	98,199	121.120	
19.2. Other private passenger auto liability.....				
19.3. Commercial auto no-fault (personal injury protection).....				
19.4. Other commercial auto liability.....	4,378,150	3,133,008	71.560	70.712
21.1. Private passenger auto physical damage.....	94,630	144,269	152.456	100.632
21.2. Commercial auto physical damage.....	114,066	59,558	52.214	47.501
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.....	6,142,059	4,123,009	67.127	60.970
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	923,879	923,879	169,824
2.1 Allied lines			
2.2 Multiple peril crop			
2.3 Federal flood			
2.4 Private crop			
2.5 Private flood			
3. Farmowners multiple peril			
4. Homeowners multiple peril			
5.1 Commercial multiple peril (non-liability portion)			
5.2 Commercial multiple peril (liability portion)			
6. Mortgage guaranty			
8. Ocean marine			
9. Inland marine	419,308	419,308	110,196
10. Financial guaranty			
11.1 Medical professional liability - occurrence			
11.2 Medical professional liability - claims made			
12. Earthquake			
13.1 Comprehensive (hospital and medical) individual	63,183	63,183	
13.2 Comprehensive (hospital and medical) group			
14. Credit accident and health			
15.1 Vision only			
15.2 Dental only			
15.3 Disability income			
15.4 Medicare supplement			
15.5 Medicaid Title XIX			
15.6 Medicare Title XVIII			
15.7 Long-term care			
15.8 Federal employees health benefits plan			
15.9 Other health			
16. Workers' compensation			
17.1 Other liability occurrence	486,960	486,960	79,894
17.2 Other liability-claims made	1,145	1,145	921,221
17.3. Excess workers' compensation			
18.1. Products liability - occurrence			
18.2. Products liability - claims made			
19.1 Private passenger auto no-fault (personal injury protection)	(1,626)	(1,626)	
19.2 Other private passenger auto liability	(27,365)	(27,365)	69,067
19.3 Commercial auto no-fault (personal injury protection)			
19.4 Other commercial auto liability	7,980,432	7,980,432	2,962,693
21.1 Private passenger auto physical damage	(33,711)	(33,711)	
21.2 Commercial auto physical damage	132,795	132,795	154,385
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	9,945,000	9,945,000	4,467,280
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 2023 Loss and LAE Payments on Claims Reported as of Prior Year End	5 2023 Loss and LAE Payments on Claims Unreported as of Prior Year End	6 Total 2023 Loss and LAE Payments (Cols. 4+5)	7 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	8 Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of 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. 2020 + Prior.....			1	1					18	18		17	17
2. 2021.....	261	381	642	37		37	300	423	723	76	42	118	
3. Subtotals 2021 + prior.....	261	382	643	37		37	300	441	741	76	59	135	
4. 2022.....	755	3,294	4,049	266		266	907	2,393	3,300	418	(901)	(483)	
5. Subtotals 2022 + prior.....	1,016	3,676	4,692	303		303	1,207	2,834	4,041	494	(842)	(348)	
6. 2023.....	XXX	XXX	XXX	XXX	354	354	XXX	159	2,019	2,178	XXX	XXX	XXX
7. Totals.....	1,016	3,676	4,692	303	354	657	1,207	159	4,853	6,219	494	(842)	(348)
8. Prior Year-End Surplus As Regards Policyholders.....		27,719									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
											48.622 %	(22.905)%	(7.417)%
													Col. 13, Line 7 / Line 8 (1.255)%

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?	YES
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

August Filing

5. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A
---	-----

EXPLANATION:

1.
2.
3. **THIS IS NOT APPLICABLE TO THE COMPANY.**
4. **THIS IS NOT APPLICABLE T**
5.

BARCODES:

1. 
3 5 6 0 2 2 0 2 3 4 9 0 0 0 0 0 1
2.
3. 
3 5 6 0 2 2 0 2 3 3 6 5 0 0 0 0 1
4. 
3 5 6 0 2 2 0 2 3 5 0 5 0 0 0 0 1
5.

OVERFLOW PAGE FOR WRITE-INS

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 comm. 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.....	22,602,935	23,633,042
2. Cost of bonds and stocks acquired.....		
3. Accrual of discount.....	3,894	15,201
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration for bonds and stocks disposed of.....	103,263	943,189
7. Deduct amortization of premium.....	19,537	102,119
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).....	22,484,029	22,602,935
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	22,484,029	22,602,935

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)	22,103,298		103,263	(15,681)	21,984,354			22,103,298
2. NAIC 2 (a)	499,632			39	499,671			499,632
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	22,602,930		103,263	(15,642)	22,484,025			22,602,930
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 & Preferred Stock	22,602,930		103,263	(15,642)	22,484,025			22,602,930

(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 \$

(SI-03) Schedule DA - Part 1

NONE

(SI-03) Schedule DA - Verification - Short-Term Investments

NONE

(SI-04) Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

(SI-04) Schedule DB - Part B - Verification - Futures Contracts

NONE

(SI-05) Schedule DB - Part C - Section 1

NONE

(SI-06) Schedule DB - Part C - Section 2

NONE

(SI-07) Schedule DB - Verification

NONE

SCHEDULE E – PART 2 – VERIFICATION
(Cash Equivalents)

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	3,301,823	1,929,783
2. Cost of cash equivalents acquired.....	9,245,243	30,762,054
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		(1)
6. Deduct consideration received on disposals.....	8,995,590	29,390,012
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).....	3,551,476	3,301,823
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	3,551,476	3,301,823

(E-01) Schedule A - Part 2

NONE

(E-01) Schedule A - Part 3

NONE

(E-02) Schedule B - Part 2

NONE

(E-02) Schedule B - Part 3

NONE

(E-03) Schedule BA - Part 2

NONE

(E-03) Schedule BA - Part 3

NONE

(E-04) Schedule D - Part 3

NONE

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	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, NAIC Designation Modifier and SVO Administrative Symbol			
										11 Unrealized Valuation Increase / (Decrease)	12 Current Year's (Amortization) / Accretion	13 Current Year's Other-Than- Temporary Impairment Recognized	14 Total Change in B. / A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B./A.C.V.										
Bonds: U.S. Governments																								
36207J-ZR-7	GOVERNMENT NATL MTG ASSOC #433752		03/01/2023	MBS PAYDOWN	XXX	147	147	149	147												2	05/15/2028	1.A FE	
36208W-CM-3	GNMA POOL 462776		03/01/2023	MBS PAYDOWN	XXX	257	257	257	257												3	07/15/2028	1.A FE	
36209N-CP-5	GNMA POOL 476278		03/01/2023	MBS PAYDOWN	XXX	184	184	186	184												2	05/15/2028	1.A FE	
36295Q-VU-1	GOVERNMENT NATL MTG ASSOC #677527		03/01/2023	MBS PAYDOWN	XXX	1,053	1,053	1,061	1,053												11	11/15/2037	1.A FE	
36295X-ZZ-1	GNMA POOL 683960		03/01/2023	MBS PAYDOWN	XXX	100	100	101	100												1	02/15/2038	1.A FE	
36296K-MW-9	GNMA POOL 693473		03/01/2023	MBS PAYDOWN	XXX	174	174	175	174												2	06/15/2038	1.A FE	
0109999999	Bonds: U.S. Governments					1,915	1,915	1,929	1,915												21	XXX	XXX	
Bonds: U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																								
3133KG-P4-4	UMBS - POOL RA1343		03/01/2023	MBS PAYDOWN	XXX	26,377	26,377	27,692	26,385			(8)		(8)							110	09/01/2049	1.A FE	
31346Y-XK-4	UMBS - POOL QA5182		03/01/2023	MBS PAYDOWN	XXX	19,786	19,786	20,868	19,793			(6)		(6)							92	12/01/2049	1.A FE	
FEDERAL NATIONAL MTG ASSOC #254637																								
31371K-ZA-2	MBS PAYDOWN		03/01/2023	MBS PAYDOWN	XXX	1,630	1,630	1,755	1,632			(2)		(2)							15	02/01/2033	1.A FE	
31384V-V3-3	UMBS - POOL 535334		03/01/2023	MBS PAYDOWN	XXX	160	160	166	160												2	06/01/2030	1.A FE	
31400W-SW-1	UMBS - POOL 699933		03/01/2023	MBS PAYDOWN	XXX	1,872	1,872	1,886	1,872												17	04/01/2033	1.A FE	
31406U-K3-1	UMBS - POOL 820314		03/01/2023	MBS PAYDOWN	XXX	677	677	666	677												6	08/01/2035	1.A FE	
3140KA-RE-8	UMBS - POOL BP3184		03/01/2023	MBS PAYDOWN	XXX	17,015	17,015	18,010	17,020			(5)		(5)							81	03/01/2050	1.A FE	
3140QB-S7-4	UMBS - POOL CA4141		03/01/2023	MBS PAYDOWN	XXX	4,475	4,475	4,931	4,477			(2)		(2)							20	09/01/2049	1.A FE	
31411W-4N-4	UMBS - POOL 917129		03/01/2023	MBS PAYDOWN	XXX	221	221	218	221												2	06/01/2037	1.A FE	
31414S-YU-1	UMBS - POOL 975123		03/01/2023	MBS PAYDOWN	XXX	30	30	30	30												50	05/01/2038	1.A FE	
31418D-2V-3	UMBS - POOL MA4387		03/01/2023	MBS PAYDOWN	XXX	14,974	14,974	15,286	14,978			(4)		(4)							49	07/01/2041	1.A FE	
31418D-NA-6	UMBS - POOL MA3984		03/01/2023	MBS PAYDOWN	XXX	14,129	14,129	14,689	14,135			(6)		(6)							59	04/01/2035	1.A FE	
0909999999 - Bonds: U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																								
0909999999						101,346	101,346	106,197	101,380			(33)		(33)							453	XXX	XXX	
2509999997	Subtotals - Bonds - Part 4					103,261	103,261	108,126	103,295			(33)		(33)							474	XXX	XXX	
2509999998	Summary Item from Part 5 for Bonds (N/A to Quarterly)																							
2509999999	Subtotals - Bonds					103,261	103,261	108,126	103,295			(33)		(33)							474	XXX	XXX	
6009999999	Totals					103,261	103,261	108,126	103,295			(33)		(33)							474	XXX	XXX	

(E-06) Schedule DB - Part A - Section 1

NONE

(E-06) Schedule DB - Part A - Section 1 - Description of Hedged Risk(s)

NONE

(E-06) Schedule DB - Part A - Section 1 - Financial or Economic Impact of The Hedge at the End of the Reporting Period

NONE

(E-07) Schedule DB - Part B - Section 1

NONE

(E-07) Schedule DB - Part B - Section 1 - Broker Name

NONE

(E-07) Schedule DB - Part B - Section 1 - Description of Hedged Risk(s)

NONE

(E-07) Schedule DB - Part B - Section 1 - Financial or Economic Impact of The Hedge at the End of the Reporting Period

NONE

(E-08) Schedule DB - Part D - Section 1

NONE

(E-09) Schedule DB - Part D - Section 2 - Collateral Pledged By Reporting Entity

NONE

(E-09) Schedule DB - Part D - Section 2 - Collateral Pledged To Reporting Entity

NONE

(E-10) Schedule DB - Part E

NONE

(E-11) Schedule DL - Part 1

NONE

(E-12) Schedule DL - Part 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 of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
TD BANK -					1,578,527	1,878,539	2,260,241	XXX
0199998 - Deposits in depositories that do not exceed the allowable limit in any one depository (see Instructions) - Open Depositories								XXX
0199999 - Total Open Depositories				1,578,527	1,878,539	2,260,241	XXX	
0299998 - Deposits in depositories that do not exceed the allowable limit in any one depository (see Instructions) - Suspended Depositories								XXX
0299999 - Total Suspended Depositories								XXX
0399999 - Total Cash on Deposit				1,578,527	1,878,539	2,260,241	XXX	
0499999 - Cash in Company's Office		XXX	XXX					XXX
0599999 - Total				1,578,527	1,878,539	2,260,241	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
Exempt Money Market Mutual Funds – as Identified by SVO								
31846V-41-9	FIRST AM TREAS OBLI-INS INV		03/01/2022	XXX		300,000		3,000
233809-30-0	FIDELITY INVESTMENTS TREASURY ONLY MMF		03/13/2023	XXX		18,566		
31846V-54-2	FIRST AMER TREASURY OBLIG-Z		03/13/2023	XXX		3,144,988		
82099999999 – Exempt Money Market Mutual Funds – as Identified by SVO						3,463,554		3,000
Other Cash Equivalents								
XXX	TD BANK DEPOSIT SWEEP TIMING WITH NEAM	0				87,934		
XXX	TIMING DIFFERENCE WITH NEAM					(12)		
85099999999 – Other Cash Equivalents						87,922		
86099999999 – Total Cash Equivalents						3,551,476		3,000

**SUPPLEMENT "A" TO SCHEDULE T**

Exhibit of Medical Professional Liability Premiums Written Allocated
Allocated by States And Territories

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama.....	AL.							
2. Alaska.....	AK.							
3. Arizona.....	AZ.							
4. Arkansas.....	AR.							
5. California.....	CA.							
6. Colorado.....	CO.							
7. Connecticut.....	CT.							
8. Delaware.....	DE.							
9. District of Columbia.....	DC.							
10. Florida.....	FL.							
11. Georgia.....	GA.							
12. Hawaii.....	HI.							
13. Idaho.....	ID.							
14. Illinois.....	IL.							
15. Indiana.....	IN.							
16. Iowa.....	IA.							
17. Kansas.....	KS.							
18. Kentucky.....	KY.							
19. Louisiana.....	LA.							
20. Maine.....	ME.							
21. Maryland.....	MD.							
22. Massachusetts.....	MA.							
23. Michigan.....	MI.							
24. Minnesota.....	MN.							
25. Mississippi.....	MS.							
26. Missouri.....	MO.							
27. Montana.....	MT.							
28. Nebraska.....	NE.							
29. Nevada.....	NV.							
30. New Hampshire.....	NH.							
31. New Jersey.....	NJ.							
32. New Mexico.....	NM.							
33. New York.....	NY.							
34. North Carolina.....	NC.							
35. North Dakota.....	ND.							
36. Ohio.....	OH.					7	1	
37. Oklahoma.....	OK.							
38. Oregon.....	OR.							
39. Pennsylvania.....	PA.							
40. Rhode Island.....	RI.							
41. South Carolina.....	SC.							
42. South Dakota.....	SD.							
43. Tennessee.....	TN.							
44. Texas.....	TX.							
45. Utah.....	UT.							
46. Vermont.....	VT.							
47. Virginia.....	VA.							
48. Washington.....	WA.							
49. West Virginia.....	WV.							
50. Wisconsin.....	WI.							
51. Wyoming.....	WY.							
52. American Samoa.....	AS.							
53. Guam.....	GU.							
54. Puerto Rico.....	PR.							
55. US Virgin Islands.....	VI.							
56. Northern Mariana Islands.....	MP.							
57. Canada.....	CAN.							
58. Aggregate Other Alien.....	OT.							
59. Totals.....						7	1	
Details of Write-Ins								
58001.....								
58002.....								
58003.....								
58998. Summary of remaining write-ins for Line 58 from overflow page.....								
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above).....								

**SUPPLEMENT "A" TO SCHEDULE T**

Exhibit of Medical Professional Liability Premiums Written Allocated
Allocated by States And Territories

States, Etc.	1 Direct Premiums Written	2 Direct Premiums Earned	Direct Losses Paid		5 Direct Losses Incurred	Direct Losses Unpaid		8 Direct Losses Incurred But Not Reported
			3 Amount	4 Number of Claims		6 Amount Reported	7 Number of Claims	
1. Alabama.....	AL.							
2. Alaska.....	AK.							
3. Arizona.....	AZ.							
4. Arkansas.....	AR.							
5. California.....	CA.							
6. Colorado.....	CO.							
7. Connecticut.....	CT.							
8. Delaware.....	DE.							
9. District of Columbia.....	DC.							
10. Florida.....	FL.							
11. Georgia.....	GA.							
12. Hawaii.....	HI.							
13. Idaho.....	ID.							
14. Illinois.....	IL.							
15. Indiana.....	IN.							
16. Iowa.....	IA.							
17. Kansas.....	KS.							
18. Kentucky.....	KY.							
19. Louisiana.....	LA.							
20. Maine.....	ME.							
21. Maryland.....	MD.							
22. Massachusetts.....	MA.							
23. Michigan.....	MI.							
24. Minnesota.....	MN.							
25. Mississippi.....	MS.							
26. Missouri.....	MO.							
27. Montana.....	MT.							
28. Nebraska.....	NE.							
29. Nevada.....	NV.							
30. New Hampshire.....	NH.							
31. New Jersey.....	NJ.							
32. New Mexico.....	NM.							
33. New York.....	NY.							
34. North Carolina.....	NC.							
35. North Dakota.....	ND.							
36. Ohio.....	OH.					610,007	3	
37. Oklahoma.....	OK.							
38. Oregon.....	OR.							
39. Pennsylvania.....	PA.							
40. Rhode Island.....	RI.							
41. South Carolina.....	SC.							
42. South Dakota.....	SD.							
43. Tennessee.....	TN.							
44. Texas.....	TX.							
45. Utah.....	UT.							
46. Vermont.....	VT.							
47. Virginia.....	VA.							
48. Washington.....	WA.							
49. West Virginia.....	WV.							
50. Wisconsin.....	WI.							
51. Wyoming.....	WY.							
52. American Samoa.....	AS.							
53. Guam.....	GU.							
54. Puerto Rico.....	PR.							
55. US Virgin Islands.....	VI.							
56. Northern Mariana Islands.....	MP.							
57. Canada.....	CAN.							
58. Aggregate Other Alien.....	OT.							
59. Totals.....						610,007	3	
Details of Write-Ins								
58001.....								
58002.....								
58003.....								
58998. Summary of remaining write-ins for Line 58 from overflow page.....								
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above).....								

(Supp-455.OP) Supplement "A" to Schedule T - Exhibit of Medical Professional Liability Premiums Written

NONE

(Supp-455.OP) Write-Ins for Line 58 - Other Alien

NONE

(Supp-455.OF) Supplement "A" to Schedule T - Exhibit of Medical Professional Liability Premiums Written

NONE

(Supp-455.OF) Write-Ins for Line 58 - Other Alien

NONE

(Supp-455.OVER.PH) Write-Ins for Line 58 - Other Alien

NONE

(Supp-455.OVER.HS) Write-Ins for Line 58 - Other Alien

NONE

(Supp-455.OVER.OP) Write-Ins for Line 58 - Other Alien

NONE

(Supp-455.OVER.OF) Write-Ins for Line 58 - Other Alien

NONE