



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF JUNE 30, 2023

OF THE CONDITION AND AFFAIRS OF THE

COLONY SPECIALTY INSURANCE COMPANY

NAIC Group Code 0457 (Current) 0457 (Prior) NAIC Company Code 36927 Employer's ID Number 34-1266871

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

Country of Domicile United States of America

Incorporated/Organized 12/20/1978 Commenced Business 04/16/1979

Statutory Home Office 3366 Riverside Drive, Suite 103 (Street and Number) Upper Arlington, OH, US 43221 (City or Town, State, Country and Zip Code)

Main Administrative Office 711 Broadway, Ste 400 (Street and Number) San Antonio, TX, US 78215 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 469012 (Street and Number or P.O. Box) San Antonio, TX, US 78246 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 711 Broadway, Ste 400 (Street and Number) San Antonio, TX, US 78215 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.colonyspecialty.com

Statutory Statement Contact Amanda Frerich (Name) 800-470-7958 (Area Code) (Telephone Number) taxgroup@argogroupus.com (E-mail Address) 804-560-4820 (FAX Number)

OFFICERS

President Gary Eugene Grose # Chief Financial Officer Kyle Alan Struble

Corporate Secretary Austin Warner King Treasurer Lynn Kelly Geurin

OTHER

Frank Mike-Mayer Ronald John Swanstrom

DIRECTORS OR TRUSTEES

Gary Eugene Grose Frank Mike-Mayer Kyle Alan Struble

Ronald John Swanstrom Philip Alexander Prorok # Christopher Hollender #

State of Texas SS:

County of Bexar

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.

Gary Eugene Grose President Austin Warner King Corporate Secretary Kyle Alan Struble Chief Financial Officer

Subscribed and sworn to before me this day of Lindsey Murray

a. Is this an original filing? Yes [ X ] No [ ]

b. If no, 1. State the amendment number..... 2. Date filed ..... 3. Number of pages attached.....

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	53,165,681		53,165,681	68,410,292
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....			0	0
3. Mortgage loans on real estate:				
3.1 First liens .....			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ ..... 37,905 ), cash equivalents (\$ ..... 11,478,107 ) and short-term investments (\$ ..... 6,489,160 ) .....	18,005,173		18,005,173	8,709,145
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....			0	0
9. Receivables for securities .....	500,000		500,000	500,000
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	71,670,854	0	71,670,854	77,619,438
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	281,792		281,792	386,678
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	10,705,355	988,179	9,717,176	8,450,562
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	28,860	2,886	25,974	25,974
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	605,836		605,836	3,680,561
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon ....	483,174		483,174	169,119
18.2 Net deferred tax asset .....	430,762		430,762	309,534
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	1,596,123		1,596,123	2,043,764
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	8,158	4,401	3,757	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	85,810,914	995,466	84,815,448	92,685,630
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	85,810,914	995,466	84,815,448	92,685,630
DETAILS OF WRITE-INS				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Miscellaneous Assets .....	8,158	4,401	3,757	0
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	8,158	4,401	3,757	0

STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ ..... ) .....		0
2. Reinsurance payable on paid losses and loss adjustment expenses .....		0
3. Loss adjustment expenses .....		0
4. Commissions payable, contingent commissions and other similar charges .....		
5. Other expenses (excluding taxes, licenses and fees) .....	1,867	
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	310,937	568,274
7.1 Current federal and foreign income taxes (including \$ ..... on realized capital gains (losses)) .....		
7.2 Net deferred tax liability .....		
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ ..... 34,395,156 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ .....0 for medical loss ratio rebate per the Public Health Service Act) .....		
10. Advance premium .....		
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	9,342,561	7,032,065
13. Funds held by company under reinsurance treaties .....	48,199,661	42,096,588
14. Amounts withheld or retained by company for account of others .....		
15. Remittances and items not allocated .....	222,516	217,947
16. Provision for reinsurance (including \$ ..... certified) .....	773,219	773,219
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....	298,502	16,550,844
20. Derivatives .....	0	0
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 .....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	59,149,263	67,238,937
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	59,149,263	67,238,937
29. Aggregate write-ins for special surplus funds .....	0	0
30. Common capital stock .....	3,500,000	3,500,000
31. Preferred capital stock .....		
32. Aggregate write-ins for other than special surplus funds .....	0	0
33. Surplus notes .....		
34. Gross paid in and contributed surplus .....	8,002,700	8,002,700
35. Unassigned funds (surplus) .....	14,163,485	13,943,993
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) .....	25,666,185	25,446,693
38. Totals (Page 2, Line 28, Col. 3)	84,815,448	92,685,630
DETAILS OF WRITE-INS		
2501. ....		
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....	0	0
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	0	0

STATEMENT OF INCOME

	1	2	3
	Current Year to Date	Prior Year to Date	Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 39,562,835 )	36,168,823	30,565,408	64,184,276
1.2 Assumed (written \$ )		212,281	0
1.3 Ceded (written \$ 39,562,835 )	36,168,823	30,777,689	64,184,276
1.4 Net (written \$ 0 )	0	0	0
DEDUCTIONS:			
2. Losses incurred (current accident year \$ )::			
2.1 Direct	24,580,331	20,349,953	46,404,703
2.2 Assumed		84,706	374,484
2.3 Ceded	24,580,331	20,434,659	46,779,187
2.4 Net	0	0	0
3. Loss adjustment expenses incurred		0	0
4. Other underwriting expenses incurred	3,879	1,947	10,255
5. Aggregate write-ins for underwriting deductions	0	0	0
6. Total underwriting deductions (Lines 2 through 5)	3,879	1,947	10,255
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	(3,879)	(1,946)	(10,255)
INVESTMENT INCOME			
9. Net investment income earned	887,988	761,200	1,610,215
10. Net realized capital gains (losses) less capital gains tax of \$ (5,357)	(901,249)	(9,193)	(513,380)
11. Net investment gain (loss) (Lines 9 + 10)	(13,261)	752,007	1,096,835
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ 1,808 )	(1,808)	(11,152)	(11,005)
13. Finance and service charges not included in premiums			
14. Aggregate write-ins for miscellaneous income	(1,032)	(23,241)	(39,552)
15. Total other income (Lines 12 through 14)	(2,840)	(34,393)	(50,557)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	(19,980)	715,668	1,036,023
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)	(19,980)	715,668	1,036,023
19. Federal and foreign income taxes incurred	184,117	169,365	349,149
20. Net income (Line 18 minus Line 19)(to Line 22)	(204,097)	546,303	686,874
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	25,446,693	23,775,788	23,775,788
22. Net income (from Line 20)	(204,097)	546,303	686,874
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ 14,978	56,345	83,406	154,818
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	136,206	(132,819)	85,355
27. Change in nonadmitted assets	231,038	745,032	255,027
28. Change in provision for reinsurance			488,831
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	0	0	0
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			0
36. Change in treasury stock			0
37. Aggregate write-ins for gains and losses in surplus	0	0	0
38. Change in surplus as regards policyholders (Lines 22 through 37)	219,492	1,241,921	1,670,905
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	25,666,185	25,017,709	25,446,693
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)	0	0	0
1401. Intercompany interest expense	(1,032)	(23,241)	(39,552)
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	(1,032)	(23,241)	(39,552)
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0	0
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)	0	0	0

STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	1,274,920	(3,193,067)	(7,729,126)
2. Net investment income .....	1,031,525	853,854	1,780,638
3. Miscellaneous income .....	(2,840)	(34,393)	(50,557)
4. Total (Lines 1 to 3) .....	2,303,605	(2,373,606)	(5,999,045)
5. Benefit and loss related payments .....	(3,074,725)	330,771	1,253,997
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	259,349	242,553	(129,455)
8. Dividends paid to policyholders .....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	477,837	(22,170)	2,621,023
10. Total (Lines 5 through 9) .....	(2,337,539)	551,154	3,745,565
11. Net cash from operations (Line 4 minus Line 10) .....	4,641,144	(2,924,760)	(9,744,611)
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	14,429,952	5,360,461	12,474,277
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0	1,385
12.7 Miscellaneous proceeds .....	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	14,429,952	5,360,461	12,475,662
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	58,954	7,395,172	9,303,403
13.2 Stocks .....	0	0	0
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	0
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	0	500,000	500,000
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	58,954	7,895,172	9,803,403
14. Net increase (or decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	14,370,998	(2,534,711)	2,672,260
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied) .....	(9,716,115)	(1,821,895)	5,731,005
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	(9,716,115)	(1,821,895)	5,731,005
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .	9,296,027	(7,281,365)	(1,341,346)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	8,709,145	10,050,491	10,050,491
19.2 End of period (Line 18 plus Line 19.1) .....	18,005,173	2,769,126	8,709,145

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

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NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Colony Specialty Insurance Company ("the Company") are presented on the basis of accounting practices prescribed or permitted by the Department of Insurance in the State of Ohio.

The Ohio Department of Insurance recognizes only the statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Ohio.

The accompanying financial statements contain no differences as a result of practices prescribed or permitted by Ohio that differ from NAIC SAP.

	SSAP #	F/S Page	F/S Line #	2023	2022
NET INCOME					
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ (204,097)	\$ 686,874
(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	\$ (204,097)	\$ 686,874
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 25,666,185	\$ 25,446,693
(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	\$ 25,666,185	\$ 25,446,693

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the amounts reported in these financial statements and notes. Such estimates and assumptions could change in the future, as more information becomes known, which could impact the amounts reported and disclosed herein.

C. Accounting Policy

No significant change

D. Going Concern

Based upon its evaluation of relevant conditions and events, management does not have substantial doubt about the Company's ability to continue as a going concern.

NOTE 2 Accounting Changes and Corrections of Errors

No significant change

NOTE 3 Business Combinations and Goodwill

No significant change

NOTE 4 Discontinued Operations

The Company had no operations that were discontinued.

NOTE 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) Description of Sources Used to Determine Prepayment Assumptions

Prepayment assumptions for loan-backed securities are obtained by the Company's third-party accounting provider, from industry standard external data providers.

(2) The Company did not have any securities with a recognized other-than-temporary impairment loss in 2023.

(3) Not Applicable

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

a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ 169,928
2. 12 Months or Longer	\$ 2,738,317

b)The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$ 2,254,750
2. 12 Months or Longer	\$ 12,816,777

NOTES TO FINANCIAL STATEMENTS

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

The Company evaluates its investments for impairment. In accordance with policy, the determination that a security has incurred an other-than-temporary decline in fair value and the associated amount of any loss recognition requires the judgment by the Company's management and a continual review of its investments. Investments in an unrealized loss position are reviewed on a quarterly basis to determine whether a decline in fair value below the amortized cost basis is other-than-temporary. In general, the process for identifying other-than-temporary declines in fair value involves the consideration of a number of factors, including but not limited to, whether the issuer has been downgraded to below investment-grade, the length of time in which there has been a significant decline in value, the liquidity, business prospects, and overall financial condition of the issuer, the nature and performance of the collateral or other credit support backing the security, the significance of the decline in value, and whether the Company has the intent to sell the security or may be required to sell the security before its anticipated recovery. If consideration of the factors above results in a conclusion that the decline in fair value is other-than-temporary, the cost basis of the security is written down to expected recovery (which may be fair value) and the write-down is recorded as a realized loss. For loan-backed securities, the aforementioned factors were evaluated and it was determined that there was no other-than-temporary impairment at June 30, 2023.

- 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
- L. Restricted Assets  
Not applicable
- M. Working Capital Finance Investments  
Not Applicable
- N. Offsetting and Netting of Assets and Liabilities  
The Company has no offsetting or netting of assets and liabilities.
- 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  
Not Applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

Not Applicable

NOTE 7 Investment Income

The Company has not excluded any investment income due and accrued from the financial statements.

NOTE 8 Derivative Instruments

The Company has no derivative instruments.

NOTE 9 Income Taxes

No significant change

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

No significant change

NOTE 11 Debt

The Company has no outstanding debt.

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

The Company does not sponsor a defined benefit plan.

NOTES TO FINANCIAL STATEMENTS

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

No significant change

NOTE 14 Liabilities, Contingencies and Assessments

No significant change

NOTE 15 Leases

No significant change

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company has not invested in financial instruments with off-balance sheet risk or financial instruments with concentration of credit risk.

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

The Company has no sale, transfer or servicing of financial assets or extinguishments of liabilities.

The Company had no wash sales as defined in SSAP No.103, Transfers and Servicing of Financial Assets and Extinguishments of Liabilities, involving transactions for securities with a NAIC designation of 3 or below, or unrated.

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

No significant change

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

No significant change

NOTE 20 Fair Value Measurements

A. Fair Value Measurements

Inputs Used for Assets and Liabilities Measured and Reported at Fair Value

The Company's financial assets carried at fair value have been classified, for disclosure purposes, based on a three-level hierarchy shown below. The hierarchy gives the highest ranking to fair values determined using unadjusted quoted prices in active markets for identical assets (Level 1) and the lowest ranking to fair values using methodologies and models with unobservable inputs (Level 3). An asset's classification is based on the lowest level input that is significant to its measurement. The levels of the fair value hierarchy are as follows:

- Level 1 - Values are quoted prices (unadjusted) in active markets for identical assets that can be accessed at the reporting date. Actively traded, as defined by the Company, is a security that has traded in the past seven days.
- Level 2 - Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly.
- Level 3 - Unobservable inputs reflecting the Company's assumptions about the assumptions market participants would use in pricing the asset or liability based on the best information available in the circumstances.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value Cash Equivalent (E-2) Other MM Mutual Fund	\$ 11,478,108				\$ 11,478,108
Total assets at fair value/NAV	\$ 11,478,108	\$ -	\$ -	\$ -	\$ 11,478,108

(2) The Company has no Level 3 items.

(3) The Company had no transfers between levels during 2023.

(4) For Level 2 instruments, fair value prices are obtained from third-party pricing sources, where available. For securities where the Company is unable to obtain fair values from a pricing source, fair values are obtained from a broker or investment advisor. These prices are determined using observable market information such as dealer quotes, market spreads, cash flows, yield curves, live trading levels, trade execution date, market consensus prepayment speeds, credit information and the security's terms and conditions, among other things.

(5) The Company has no derivatives.

B. The Company has no other fair value disclosures.

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Long Term (D-1)	\$ 46,980,153	\$ 53,165,681	\$ 9,885,293	\$ 37,094,860			
Short Term (DA-1)	\$ 6,488,281	\$ 6,489,161	\$ 6,488,281				
Cash Equivalent (E-2)	\$ 11,478,108	\$ 11,478,108	\$ 11,478,108				
Cash (E-1)	\$ 37,905	\$ 37,905	\$ 37,905				
TOTAL	\$ 64,984,446	\$ 71,170,854	\$ 27,889,586	\$ 37,094,860			

D. Not Practicable to Estimate Fair Value

Not Applicable

E. NAV Practical Expedient Investments

Not Applicable

NOTE 21 Other Items

No significant change



# NOTES TO FINANCIAL STATEMENTS

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**NOTE 22   Events Subsequent**

Subsequent events have been considered through August 11, 2023, the date of issuance of these financial statements. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

**NOTE 23   Reinsurance**

No significant change

**NOTE 24   Retrospectively Rated Contracts & Contracts Subject to Redetermination**

The Company does not have any contracts of this nature.

**NOTE 25   Change in Incurred Losses and Loss Adjustment Expenses**

As a result of the 100% quota share agreements that the Company has in place, there has been no change in incurred loss and loss adjustment expense.

**NOTE 26   Intercompany Pooling Arrangements**

The Company has no pooling arrangements.

**NOTE 27   Structured Settlements**

The Company has not purchased any structured settlements.

**NOTE 28   Health Care Receivables**

Not Applicable

**NOTE 29   Participating Policies**

Not Applicable

**NOTE 30   Premium Deficiency Reserves**

Not Applicable

**NOTE 31   High Deductibles**

Not Applicable

**NOTE 32   Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**

Not Applicable

**NOTE 33   Asbestos/Environmental Reserves**

No significant change

**NOTE 34   Subscriber Savings Accounts**

Not Applicable

**NOTE 35   Multiple Peril Crop Insurance**

Not Applicable

**NOTE 36   Financial Guaranty Insurance**

Not Applicable

STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? .....

Yes [ ] No [ X ]
- 1.2

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

Yes [ ] No [ ]
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? .....

Yes [ ] No [ X ]
- 2.2

If yes, date of change: .....
- 3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? .....

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

Yes [ X ] No [ ]
- 3.2

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

Yes [ ] No [ X ]
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes. ....
- 3.4

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

Yes [ X ] No [ ]
- 3.5

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

1091748
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? .....

Yes [ ] No [ X ]
- 4.2

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

1	2	3
Name of Entity	NAIC Company Code	State of Domicile
5.

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

If yes, attach an explanation.

Yes [ ] No [ ] N/A [ X ]
- 6.1

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

12/31/2020
- 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). ....

07/10/2022
- 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 [ ] No [ ] N/A [ X ]
- 6.6

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

Yes [ ] No [ ] N/A [ X ]
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? .....

Yes [ ] No [ X ]
- 7.2

If yes, give full information: .....
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? .....

Yes [ ] No [ X ]
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company. ....
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms? .....

Yes [ ] No [ X ]
- 8.4

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

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

STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

GENERAL INTERROGATORIES

9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? .....  
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
(c) Compliance with applicable governmental laws, rules and regulations;  
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
(e) Accountability for adherence to the code.

Yes [ X ] No [ ]

9.11

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

9.2

Has the code of ethics for senior managers been amended? .....

Yes [ ] No [ X ]

9.21

If the response to 9.2 is Yes, provide information related to amendment(s).  
.....

9.3

Have any provisions of the code of ethics been waived for any of the specified officers? .....

Yes [ ] No [ X ]

9.31

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

FINANCIAL

10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? .....

Yes [ X ] No [ ]

10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount: .....\$.....1,594,968

INVESTMENT

11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) .....

Yes [ ] No [ X ]

11.2

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

12.

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

\$.....

13.

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

\$.....

14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates? .....

Yes [ ] No [ X ]

14.2

If yes, please complete the following:

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

15.1

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

Yes [ ] No [ X ]

15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ] N/A [ X ]  
If no, attach a description with this statement.  
.....

16.

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

16.1

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

\$ .....0

16.2

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

\$ .....0

16.3

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

\$ .....0

STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

GENERAL INTERROGATORIES

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

1 Name of Custodian(s)	2 Custodian Address
US Bank Institutional Trust & Custody .....	2204 Lakeshore Dr, Ste 205, Birmingham, AL 35209 .....

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes [ ] No [ X ]
- 17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Goldman Sachs Asset Management, L.P .....	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 [ X ] No [ ]

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ X ] No [ ]

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
107738 .....	Goldman Sachs Asset Management, L.P. ....	CF5M58QA35CFPUX70H17 .....	SEC .....	NO.....

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? ..... Yes [ X ] No [ ]
- 18.2 If no, list exceptions:

.....

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

a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.  
b. Issuer or obligor is current on all contracted interest and principal payments.  
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? ..... Yes [ ] No [ X ]

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

a. The security was purchased prior to January 1, 2018.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.  
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? ..... Yes [ ] No [ X ]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

a. The shares were purchased prior to January 1, 2019.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.  
d. The fund only or predominantly holds bonds in its portfolio.  
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.  
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

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

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? .....  
If yes, attach an explanation.  
.....

Yes [ ] No [ ] N/A [ X ]
2.

Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? .....  
If yes, attach an explanation.  
.....

Yes [ ] No [ X ]
- 3.1

Have any of the reporting entity's primary reinsurance contracts been canceled? .....

Yes [ ] No [ X ]
- 3.2

If yes, give full and complete information thereto.  
.....
- 4.1

Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of " tabular reserves" ) discounted at a rate of interest greater than zero? .....

Yes [ ] No [ X ]
- 4.2

If yes, complete the following schedule:

			TOTAL DISCOUNT				DISCOUNT TAKEN DURING PERIOD			
1	2	3	4	5	6	7	8	9	10	11
Line of Business	Maximum Interest	Discount Rate	Unpaid Losses	Unpaid LAE	IBNR	TOTAL	Unpaid Losses	Unpaid LAE	IBNR	TOTAL
TOTAL			0	0	0	0	0	0	0	0

5.

Operating Percentages:

5.1 A&H loss percent ..... %

5.2 A&H cost containment percent ..... %

5.3 A&H expense percent excluding cost containment expenses ..... %
- 6.1

Do you act as a custodian for health savings accounts? .....

Yes [ ] No [ X ]
- 6.2

If yes, please provide the amount of custodial funds held as of the reporting date .....\$.....
- 6.3

Do you act as an administrator for health savings accounts? .....

Yes [ ] No [ X ]
- 6.4

If yes, please provide the balance of the funds administered as of the reporting date .....\$.....
7.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? .....

Yes [ X ] No [ ]
- 7.1

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? .....

Yes [ ] No [ ]

## SCHEDULE F - CEDED REINSURANCE

[illegible]

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

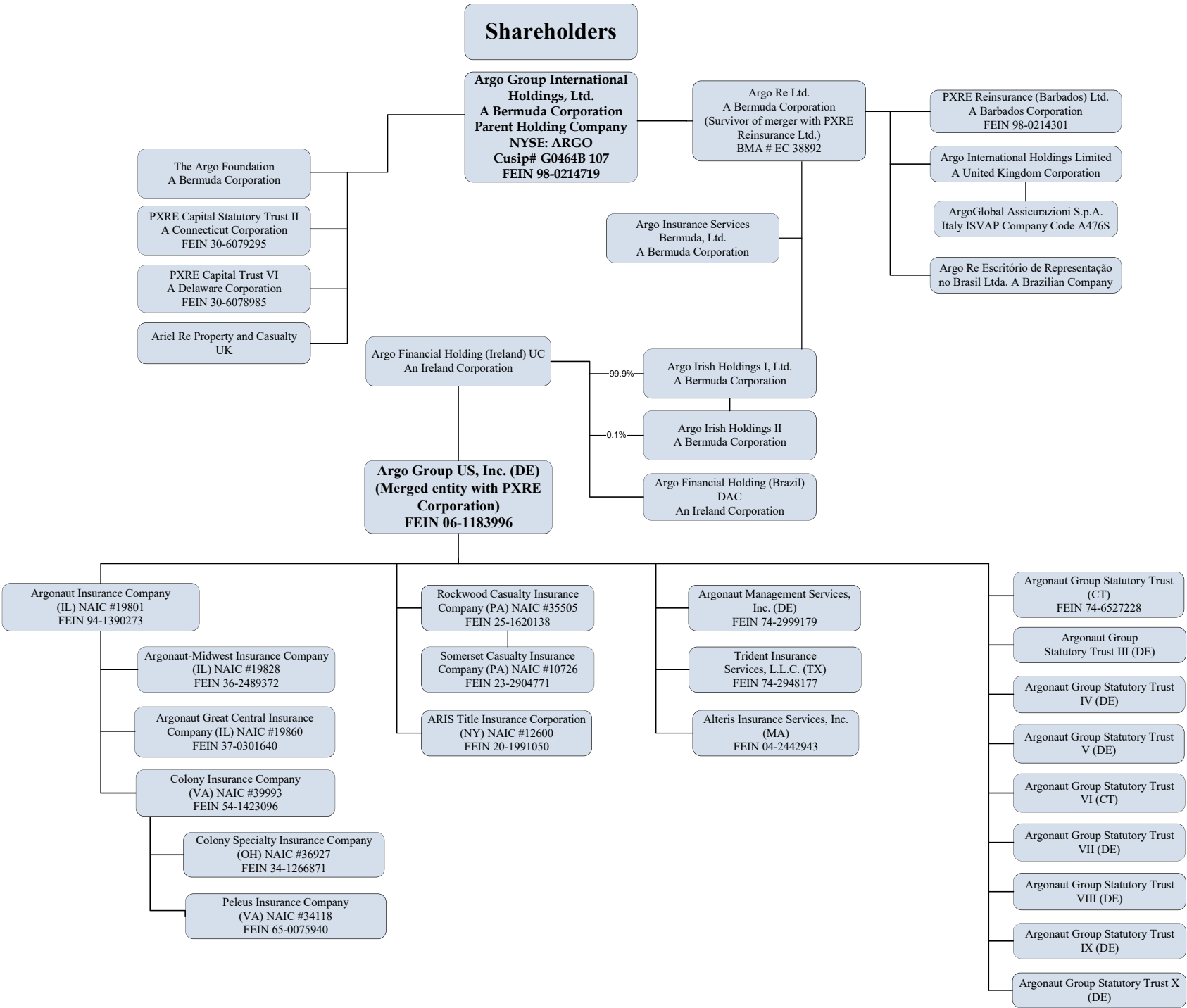
			1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
				2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
States, etc.			(a)						
1.	Alabama .....	AL	L.....	1,401,189	676,405	418,725	44,609	882,624	413,541
2.	Alaska .....	AK	L.....	8,635	0	0	0	16,815	1,067
3.	Arizona .....	AZ	L.....	826,100	125,038	33,733	0	312,282	148,155
4.	Arkansas .....	AR	L.....	124,496	115,917	39,702	0	153,849	80,986
5.	California .....	CA	L.....	2,969,579	2,571,609	2,881,040	2,392,044	2,214,439	1,459,104
6.	Colorado .....	CO	L.....	159,789	123,871	72,498	0	485,645	378,505
7.	Connecticut .....	CT	L.....	20,010	(974)	0	0	71,821	49,643
8.	Delaware .....	DE	L.....	704,756	943,932	0	0	3,304,025	1,386,496
9.	District of Columbia .....	DC	L.....	(5,654)	39,969	0	0	104,274	94,156
10.	Florida .....	FL	L.....	858,557	780,176	739,678	228,365	843,653	1,589,038
11.	Georgia .....	GA	L.....	2,704,506	1,684,429	843,512	91,885	1,514,050	481,272
12.	Hawaii .....	HI	L.....	2,866	0	0	0	1,290	556
13.	Idaho .....	ID	L.....	120,700	(5,204)	0	(10,000)	46,960	5,341,301
14.	Illinois .....	IL	L.....	1,720,075	1,817,065	1,444,076	525,645	2,314,306	925,899
15.	Indiana .....	IN	L.....	163,061	157,893	76,887	23,763	86,613	32,864
16.	Iowa .....	IA	L.....	65,088	213,168	88,283	0	137,551	84,163
17.	Kansas .....	KS	L.....	38,646	74,253	13,173	0	103,191	127,166
18.	Kentucky .....	KY	L.....	192,671	170,063	0	0	301,732	100,957
19.	Louisiana .....	LA	L.....	877,661	163,574	0	0	2,659,536	2,512,953
20.	Maine .....	ME	L.....	148,337	18,242	7,378	0	123,635	1,219
21.	Maryland .....	MD	L.....	101,191	135,494	41,039	33,041	1,134,147	874,232
22.	Massachusetts .....	MA	L.....	443,291	502,153	0	0	516,180	277,893
23.	Michigan .....	MI	L.....	990,974	972,741	304,000	51,728	1,855,070	788,264
24.	Minnesota .....	MN	L.....	186,291	569,652	67,807	0	187,913	106,911
25.	Mississippi .....	MS	L.....	2,602,224	2,056,634	327,558	336,795	2,343,781	355,833
26.	Missouri .....	MO	L.....	381,881	351,193	80,000	20,793	184,222	184,124
27.	Montana .....	MT	L.....	174,904	33,453	0	0	148,004	17,508
28.	Nebraska .....	NE	L.....	29,534	3,711	41,998	0	38,868	60,905
29.	Nevada .....	NV	L.....	65,301	29,810	0	0	167,640	134,121
30.	New Hampshire .....	NH	L.....	217,660	28,249	0	0	33,005	15,319
31.	New Jersey .....	NJ	L.....	411,766	566,552	2,434,622	78,172	707,359	297,592
32.	New Mexico .....	NM	L.....	8,660	8,752	0	0	7,624	4,717
33.	New York .....	NY	L.....	1,979,059	1,005,076	589,362	314,321	930,686	586,764
34.	North Carolina .....	NC	L.....	782,993	474,142	893,019	787,248	1,469,636	1,862,466
35.	North Dakota .....	ND	L.....	10,222	13,670	0	29,970	46,604	39,538
36.	Ohio .....	OH	L.....	351,334	140,409	215,633	15,955	1,166,567	611,052
37.	Oklahoma .....	OK	L.....	35,820	71,653	30,000	0	232,164	122,422
38.	Oregon .....	OR	L.....	844,733	101,917	101,450	4,281	236,903	85,485
39.	Pennsylvania .....	PA	L.....	5,131,247	4,727,146	1,564,602	1,415,599	17,615,326	16,059,036
40.	Rhode Island .....	RI	L.....	2,992	(3,000)	0	0	12,020	538
41.	South Carolina .....	SC	L.....	1,073,545	1,293,002	251,198	86,047	651,526	288,483
42.	South Dakota .....	SD	L.....	3,944	87,459	0	25,025	155,802	148,639
43.	Tennessee .....	TN	L.....	1,538,386	1,185,121	675,278	22,062	1,024,369	849,795
44.	Texas .....	TX	L.....	3,150,932	2,278,546	5,997,440	14,439,930	7,100,751	9,205,984
45.	Utah .....	UT	L.....	688,214	351,784	0	0	268,922	183,543
46.	Vermont .....	VT	L.....	14,682	31,201	0	0	51,372	12,575
47.	Virginia .....	VA	E.....	3,661,540	5,869,616	552,378	375,304	12,723,209	7,937,984
48.	Washington .....	WA	L.....	1,203,397	913,658	931,149	101,691	397,430	119,484
49.	West Virginia .....	WV	L.....	93,372	49,131	0	0	85,134	87,706
50.	Wisconsin .....	WI	L.....	200,613	32,935	62,578	995,986	364,026	906,206
51.	Wyoming .....	WY	L.....	81,065	49,496	0	0	75,441	10,062
52.	American Samoa .....	AS	N.....						
53.	Guam .....	GU	N.....						
54.	Puerto Rico .....	PR	N.....						
55.	U.S. Virgin Islands .....	VI	N.....						
56.	Northern Mariana Islands .....	MP	N.....						
57.	Canada .....	CAN	N.....						
58.	Aggregate Other Alien	OT	XXX.....	0	0	0	0	0	0
59.	Totals		XXX.....	39,562,835	33,600,782	21,819,796	22,430,258	67,609,995	57,444,225
DETAILS OF WRITE-INS									
58001.			XXX.....						
58002.			XXX.....						
58003.			XXX.....						
58998.	Summary of remaining write-ins for Line 58 from overflow page		XXX.....	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX.....	0	0	0	0	0	0

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	50	4. Q - Qualified - Qualified or accredited reinsurer.....	0
2. R - Registered - Non-domiciled RRGs.....	0	5. D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile.....	0
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI).....	1	6. N - None of the above - Not allowed to write business in the state.....	6

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



Note: All subsidiaries are wholly owned, except as noted.  
4-20-2023



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

1	2	3	4	5	6	7	8	9	10	11	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percen- tage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Yes/No)	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	Domi- ciliary Loca- tion	Relation- ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)					
		00000	98-0214719		0001091748	NYSE	Argo Group International Holdings, Ltd.	..BMU.....	..UIP.....	Shareholders	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					The Argo Foundation	..BMU.....	..NIA.....	Argo Group International Holdings, Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000	30-6079295				PXRE Capital Statutory Trust II	..CT.....	..NIA.....	Argo Group International Holdings, Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000	30-6078985				PXRE Capital Statutory Trust VI	..DE.....	..NIA.....	Argo Group International Holdings, Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Ariel Re Property & Casualty	..GBR.....	..IA.....	Argo Group International Holdings, Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000			0001436607		Argo Re Ltd.	..BMU.....	..UIP.....	Argo Group International Holdings, Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000	98-0214301				PXRE Reinsurance (Barbados), Ltd.	..BRB.....	..IA.....	Argo Re Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argo Re Escritório de Representação no Brasil Ltda.	..BRA.....	..IA.....	Argo Re Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argo Insurance Services Bermuda, Ltd.	..BMU.....	..IA.....	Argo Re Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argo Irish Holdings I Ltd.	..BMU.....	..UIP.....	Argo Re Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argo Irish Holdings II	..BMU.....	..UIP.....	Argo Irish Holdings I Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argo International Holdings Limited	..GBR.....	..NIA.....	Argo Re Ltd.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					ArgoGlobal Assicurazioni S.p.A.	..ITA.....	..IA.....	Argo International Holdings Limited	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argo Financial Holding (Ireland) UC	..IRL.....	..UIP.....	Argo Irish Holdings I Ltd.	Ownership.....	99.900	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argo Financial Holding (Ireland) UC	..IRL.....	..UIP.....	Argo Irish Holdings II	Ownership.....	0.100	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argo Financial Holding (Brazil) DAC	..IRL.....	..NIA.....	Argo Financial Holding (Ireland) UC	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000	06-1183996				Argo Group US, Inc.	..DE.....	..UDP.....	Argo Financial Holding (Ireland) UC	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000	74-6527228		0001470439		Argonaut Group Statutory Trust	..CT.....	..NIA.....	Argo Group US, Inc.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argonaut Group Statutory Trust III	..DE.....	..NIA.....	Argo Group US, Inc.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argonaut Group Statutory Trust IV	..DE.....	..NIA.....	Argo Group US, Inc.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argonaut Group Statutory Trust V	..DE.....	..NIA.....	Argo Group US, Inc.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argonaut Group Statutory Trust VI	..CT.....	..NIA.....	Argo Group US, Inc.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argonaut Group Statutory Trust VII	..DE.....	..NIA.....	Argo Group US, Inc.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argonaut Group Statutory Trust VIII	..DE.....	..NIA.....	Argo Group US, Inc.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	
		00000					Argonaut Group Statutory Trust IX	..DE.....	..NIA.....	Argo Group US, Inc.	Ownership.....	100.000	Argo Group International Holdings, Ltd.	...NO.....	

STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

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	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.....	.....	..... 00000 .....	.....	.....	.....	.....	Argonaut Group Statutory Trust X .....	.. DE.....	..... NIA.....	Argo Group US, Inc. ....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
.....	.....	..... 00000 .....	74-2999179 ..	.....	.....	.....	Argonaut Management Services, Inc. ....	.. DE.....	..... NIA.....	Argo Group US, Inc. ....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
.....	.....	..... 12600 .....	20-1991050 ..	.....	.....	.....	ARIS Title Insurance Corporation .....	.. NY.....	..... IA.....	Argo Group US, Inc. ....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
.....	.....	..... 00000 .....	74-2948177 ..	.....	.....	.....	Trident Insurance Services, L.L.C. ....	.. TX.....	..... IA.....	Argo Group US, Inc. ....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
.....	.....	..... 00000 .....	04-2442943 ..	.....	.....	.....	Alteris Insurance Services, Inc. ....	.. MA.....	..... IA.....	Argo Group US, Inc. ....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
. 0457 ...	Argo Group, U.S. ....	..... 19801 .....	94-1390273 ..	.....	.....	.....	Argonaut Insurance Company .....	.. IL.....	..... IA.....	Argo Group US, Inc. ....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
. 0457 ...	Argo Group, U.S. ....	..... 19828 .....	36-2489372 ..	.....	.....	.....	Argonaut-Midwest Insurance Company .....	.. IL.....	..... IA.....	Argonaut Insurance Company .....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
. 0457 ...	Argo Group, U.S. ....	..... 19860 .....	37-0301640 ..	.....	.....	.....	Argonaut Great Central Insurance Company ....	.. IL.....	..... IA.....	Argonaut Insurance Company .....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
. 0457 ...	Argo Group, U.S. ....	..... 39993 .....	54-1423096 ..	.....	.....	.....	Colony Insurance Company .....	.. VA.....	..... UDP.....	Argonaut Insurance Company .....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
. 0457 ...	Argo Group, U.S. ....	..... 34118 .....	65-0075940 ..	.....	.....	.....	Peleus Insurance Company .....	.. VA.....	..... IA.....	Colony Insurance Company .....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
. 0457 ...	Argo Group, U.S. ....	..... 36927 .....	34-1266871 ..	.....	.....	.....	Colony Specialty Insurance Company .....	.. OH.....	..... RE.....	Colony Insurance Company .....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
. 0457 ...	Argo Group, U.S. ....	..... 35505 .....	25-1620138 ..	.....	.....	.....	Rockwood Casualty Insurance Company .....	.. PA.....	..... IA.....	Argo Group US, Inc. ....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....
. 0457 ...	Argo Group, U.S. ....	..... 10726 .....	23-2904771 ..	.....	.....	.....	Somerset Casualty Insurance Company .....	.. PA.....	..... IA.....	Rockwood Casualty Insurance Company .....	Ownership.....	100.000 ...	Argo Group International Holdings, Ltd. ....	... NO.....	.....

Asterisk	Explanation

PART 1 - LOSS EXPERIENCE

Line of Business		Current Year to Date			4
		1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage
1.	Fire .....	35,922	44,130	122.8	56.1
2.1	Allied Lines .....	2,583,964	1,394,330	54.0	113.0
2.2	Multiple peril crop .....			0.0	0.0
2.3	Federal flood .....			0.0	0.0
2.4	Private crop .....			0.0	0.0
2.5	Private flood .....			0.0	0.0
3.	Farmowners multiple peril .....			0.0	0.0
4.	Homeowners multiple peril .....			0.0	0.0
5.1	Commercial multiple peril (non-liability portion) .....	7,101	623	8.8	(61.3)
5.2	Commercial multiple peril (liability portion) .....	373,045	142,538	38.2	17.7
6.	Mortgage guaranty .....			0.0	0.0
8.	Ocean marine .....			0.0	0.0
9.	Inland marine .....	21,831,850	14,524,801	66.5	49.1
10.	Financial guaranty .....		0	0.0	0.0
11.1	Medical professional liability - occurrence .....			0.0	0.0
11.2	Medical professional liability - claims-made .....		(2,782)	0.0	0.0
12.	Earthquake .....	2,247		0.0	49.0
13.1	Comprehensive (hospital and medical) individual .....			0.0	0.0
13.2	Comprehensive (hospital and medical) group .....			0.0	0.0
14.	Credit accident and health .....			0.0	0.0
15.1	Vision only .....			0.0	0.0
15.2	Dental only .....			0.0	0.0
15.3	Disability income .....			0.0	0.0
15.4	Medicare supplement .....			0.0	0.0
15.5	Medicaid Title XIX .....			0.0	0.0
15.6	Medicare Title XVIII .....			0.0	0.0
15.7	Long-term care .....			0.0	0.0
15.8	Federal employees health benefits plan .....			0.0	0.0
15.9	Other health .....			0.0	0.0
16.	Workers' compensation .....	4,163,198	2,663,151	64.0	63.9
17.1	Other liability - occurrence .....	4,055,589	4,343,701	107.1	169.9
17.2	Other liability - claims-made .....	1,744,628	647,447	37.1	21.2
17.3	Excess workers' compensation .....			0.0	0.0
18.1	Products liability - occurrence .....	925,533	326,713	35.3	(20.7)
18.2	Products liability - claims-made .....	2,436	(16,407)	(673.5)	(18.4)
19.1	Private passenger auto no-fault (personal injury protection) .....			0.0	0.0
19.2	Other private passenger auto liability .....			0.0	0.0
19.3	Commercial auto no-fault (personal injury protection) .....			0.0	0.0
19.4	Other commercial auto liability .....	249,215	541,047	217.1	(1.8)
21.1	Private passenger auto physical damage .....			0.0	0.0
21.2	Commercial auto physical damage .....	193,944	(38,053)	(19.6)	67.3
22.	Aircraft (all perils) .....			0.0	0.0
23.	Fidelity .....			0.0	0.0
24.	Surety .....	151	9,094	6,022.5	(52.6)
26.	Burglary and theft .....			0.0	0.0
27.	Boiler and machinery .....			0.0	0.0
28.	Credit .....			0.0	0.0
29.	International .....			0.0	0.0
30.	Warranty .....			0.0	0.0
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 .....	0	0	0.0	0.0
35.	Totals	36,168,823	24,580,331	68.0	66.6
DETAILS OF WRITE-INS					
3401.	.....				
3402.	.....				
3403.	.....				
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0.0	0.0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0.0	0.0

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire .....	540	1,260	(29,225)
2.1	Allied Lines .....	1,614,782	2,876,267	1,779,931
2.2	Multiple peril crop .....	0		
2.3	Federal flood .....	0		
2.4	Private crop .....	0		
2.5	Private flood .....	0		
3.	Farmowners multiple peril .....	0		
4.	Homeowners multiple peril .....	0		
5.1	Commercial multiple peril (non-liability portion) .....	75	150	(1,656)
5.2	Commercial multiple peril (liability portion) .....	121,803	234,701	704,816
6.	Mortgage guaranty .....	0		
8.	Ocean marine .....	0		
9.	Inland marine .....	13,685,564	24,577,531	18,735,480
10.	Financial guaranty .....	0		
11.1	Medical professional liability - occurrence .....	0		
11.2	Medical professional liability - claims-made .....	0		
12.	Earthquake .....	0		
13.1	Comprehensive (hospital and medical) individual .....	0		
13.2	Comprehensive (hospital and medical) group .....	0		
14.	Credit accident and health .....	0		
15.1	Vision only .....	0		
15.2	Dental only .....	0		
15.3	Disability income .....	0		
15.4	Medicare supplement .....	0		
15.5	Medicaid Title XIX .....	0		
15.6	Medicare Title XVIII .....	0		
15.7	Long-term care .....	0		
15.8	Federal employees health benefits plan .....	0		
15.9	Other health .....	0		
16.	Workers' compensation .....	2,050,773	4,413,529	4,349,264
17.1	Other liability - occurrence .....	2,598,038	3,905,727	4,324,326
17.2	Other liability - claims-made .....	1,152,312	1,907,310	2,186,489
17.3	Excess workers' compensation .....	0		
18.1	Products liability - occurrence .....	707,418	1,137,110	1,156,391
18.2	Products liability - claims-made .....	0		30,382
19.1	Private passenger auto no-fault (personal injury protection) .....	0		
19.2	Other private passenger auto liability .....	0		
19.3	Commercial auto no-fault (personal injury protection) .....	0		
19.4	Other commercial auto liability .....	139,856	262,837	214,104
21.1	Private passenger auto physical damage .....	0		
21.2	Commercial auto physical damage .....	135,492	246,413	150,482
22.	Aircraft (all perils) .....	0		
23.	Fidelity .....	0		
24.	Surety .....	0		
26.	Burglary and theft .....	0		
27.	Boiler and machinery .....	0		
28.	Credit .....	0		
29.	International .....	0		
30.	Warranty .....	0		
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 .....	0	0	0
35.	Totals	22,206,653	39,562,835	33,600,784
DETAILS OF WRITE-INS				
3401.	.....			
3402.	.....			
3403.	.....			
3498.	Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0

STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2023 Loss and LAE Payments on Claims Reported as of Prior Year-End	2023 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2023 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2020 + Prior .....	0	0	0			0				0	0	0	0
2. 2021 .....	0	0	0			0				0	0	0	0
3. Subtotals 2021 + Prior .....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2022 .....	0	0	0			0				0	0	0	0
5. Subtotals 2022 + Prior .....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2023 .....	XXX	XXX	XXX	XXX		0	XXX			0	XXX	XXX	XXX
7. Totals .....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Prior Year-End Surplus As Regards Policyholders	25,447										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1. 0.0	2. 0.0	3. 0.0
											Col. 13, Line 7 As a % of Col. 1 Line 8		
		4. 0.0											

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.

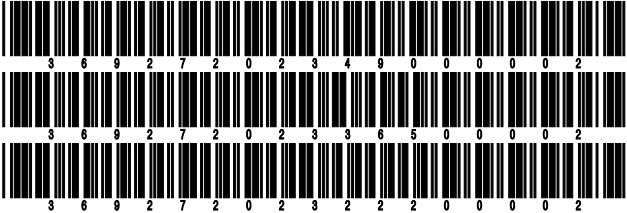
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? .....	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? .....	YES
3. Will the Medicare Part D Coverage Supplement be filed 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? .....	YES
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. ....	NO

Explanations:

- 1. The data for this supplement is not required to be filed.
- 3. The data for this supplement is not required to be filed.
- 5.

Bar Codes:

- 1. Trusteed Surplus Statement [Document Identifier 490]
- 3. Medicare Part D Coverage Supplement [Document Identifier 365]
- 5. Communication of Internal Control Related Matters Noted in Audit (2nd Quarter Only) [Document Identifier 222]



**NONE**

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	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)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year to Date	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 paid and commitment fees .....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest .....		
10. Deduct current year's other than temporary impairment recognized .....		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....		
12. Total valuation allowance .....		
13. Subtotal (Line 11 plus Line 12) .....		
14. Deduct total nonadmitted amounts .....		
15. Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year to Date	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)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	68,410,293	72,065,715
2. Cost of bonds and stocks acquired .....	58,954	9,303,403
3. Accrual of discount .....	56,432	85,564
4. Unrealized valuation increase (decrease) .....	72,577	194,625
5. Total gain (loss) on disposals .....	(907,541)	(511,437)
6. Deduct consideration for bonds and stocks disposed of .....	14,429,952	12,480,248
7. Deduct amortization of premium .....	95,082	253,299
8. Total foreign exchange change in book/adjusted carrying value .....	0	
9. Deduct current year's other than temporary impairment recognized .....	0	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....	0	5,971
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	53,165,681	68,410,293
12. Deduct total nonadmitted amounts .....	0	
13. Statement value at end of current period (Line 11 minus Line 12)	53,165,681	68,410,293



STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

**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) .....	53,026,846	1,286,891	2,710,344	289,811	53,026,846	51,893,205	0	55,162,468
2. NAIC 2 (a) .....	8,108,050	0	345,000	(1,414)	8,108,050	7,761,637	0	14,065,304
3. NAIC 3 (a) .....	158,375	0	0	(158,375)	158,375	0	0	155,823
4. NAIC 4 (a) .....	0	0	0	0	0	0	0	0
5. NAIC 5 (a) .....	0	0	0	0	0	0	0	
6. NAIC 6 (a) .....	0	0	0	0	0	0	0	
7. Total Bonds	61,293,272	1,286,891	3,055,344	130,022	61,293,272	59,654,841	0	69,383,594
PREFERRED STOCK								
8. NAIC 1 .....	0	0	0	0	0	0	0	0
9. NAIC 2 .....	0	0	0	0	0	0	0	0
10. NAIC 3 .....	0	0	0	0	0	0	0	0
11. NAIC 4 .....	0	0	0	0	0	0	0	0
12. NAIC 5 .....	0	0	0	0	0	0	0	0
13. NAIC 6 .....	0	0	0	0	0	0	0	0
14. Total Preferred Stock .....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	61,293,272	1,286,891	3,055,344	130,022	61,293,272	59,654,841	0	69,383,594

(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 \$ 6,489,161 ; NAIC 2 \$ 0 ; NAIC 3 \$ 0 NAIC 4 \$ 0 ; NAIC 5 \$ 0 ; NAIC 6 \$ 0

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
7709999999 Totals	6,489,161	xxx	6,335,940	0	0

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	973,301	7,999,333
2. Cost of short-term investments acquired .....	5,769,154	962,258
3. Accrual of discount .....	146,705	11,711
4. Unrealized valuation increase (decrease) .....	0	0
5. Total gain (loss) on disposals .....	0	0
6. Deduct consideration received on disposals .....	400,000	8,000,000
7. Deduct amortization of premium .....	0	0
8. Total foreign exchange change in book/adjusted carrying value .....	0	0
9. Deduct current year's other than temporary impairment recognized .....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	6,489,160	973,301
11. Deduct total nonadmitted amounts .....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	6,489,160	973,301

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

**N O N E**

Schedule DB - Part B - Verification - Futures Contracts

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	7,132,679	1,717,842
2. Cost of cash equivalents acquired .....	12,716,015	20,640,488
3. Accrual of discount .....	13,109	0
4. Unrealized valuation increase (decrease) .....	(1,254)	1,347
5. Total gain (loss) on disposals .....	935	38
6. Deduct consideration received on disposals .....	8,383,376	15,227,037
7. Deduct amortization of premium .....	0	0
8. Total foreign exchange change in book/adjusted carrying value .....	0	0
9. Deduct current year's other than temporary impairment recognized .....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	11,478,107	7,132,679
11. Deduct total nonadmitted amounts .....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	11,478,107	7,132,679

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

**N O N E**

Schedule A - Part 3 - Real Estate Disposed

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired

**N O N E**

## SCHEDULE D - PART 4

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Ident-ification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recog- nized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Design- ation, NAIC Design- ation Modifier and SVO Admini- strative Symbol
.36179U-SU-7	G2 MA5931 - RMBS		06/01/2023	Paydown		4,044	4,044	4,318	4,267	0	0	0	0	0	4,267	0	(223)	(223)	68	05/20/2049	1.A
.36179U-UK-6	G2 MA5986 - RMBS		06/01/2023	Paydown		3,512	3,512	3,749	3,700	0	0	0	0	0	3,700	0	(188)	(188)	59	06/20/2049	1.A
0109999999. Subtotal - Bonds - U.S. Governments						7,556	7,556	8,068	7,967	0	0	0	0	0	7,967	0	(411)	(411)	126	XXX	XXX
.70914P-TT-9	PENNSYLVANIA (COMMONWEALTH OF)		04/01/2023	Maturity @ 100.00		730,000	730,000	920,318	735,196	0	(5,196)	0	(5,196)	0	730,000	0	0	0	18,250	04/01/2023	1.E FE
0509999999. Subtotal - Bonds - U.S. States, Territories and Possessions						730,000	730,000	920,318	735,196	0	(5,196)	0	(5,196)	0	730,000	0	0	0	18,250	XXX	XXX
.3128M4-2P-7	FH G03182 - RMBS		06/01/2023	Paydown		1,302	1,302	1,227	1,248	0	1	0	1	0	1,249	0	52	52	27	05/01/2036	1.A
.3128M7-LM-6	FH G05432 - RMBS		06/01/2023	Paydown		645	645	675	669	0	0	0	0	0	669	0	(25)	(25)	16	04/01/2039	1.A
.312931-K6-4	FH A84817 - RMBS		06/01/2023	Paydown		62	62	65	64	0	0	0	0	0	64	0	(2)	(2)	2	03/01/2039	1.A
.3131Y7-S6-5	FH ZN1441 - RMBS		06/01/2023	Paydown		6,879	6,879	7,393	7,321	0	(1)	0	(1)	0	7,321	0	(442)	(442)	131	11/01/2048	1.A
.3132DM-Y8-2	FH SD0735 - RMBS		06/01/2023	Paydown		75,947	75,947	80,754	80,095	0	(109)	0	(109)	0	79,986	0	(4,038)	(4,038)	927	11/01/2051	1.A
.3132GE-S3-5	FH Q01438 - RMBS		06/01/2023	Paydown		171	171	177	176	0	0	0	0	0	176	0	(5)	(5)	3	06/01/2041	1.A
.3132XC-SE-6	FH G67717 - RMBS		06/01/2023	Paydown		8,535	8,535	8,684	8,667	0	(1)	0	(1)	0	8,667	0	(131)	(131)	143	11/01/2048	1.A
.31335B-ZY-5	FH G61659 - RMBS		06/01/2023	Paydown		2,991	2,991	3,027	3,023	0	0	0	0	0	3,023	0	(32)	(32)	50	07/01/2042	1.A
.3133KM-4X-0	FH RA6238 - RMBS		06/01/2023	Paydown		38,887	38,887	40,017	39,899	0	(23)	0	(23)	0	39,876	0	(990)	(990)	429	11/01/2051	1.A
.3136AV-7G-8	FNA 2017-M7 A2 - CMBS		06/01/2023	Paydown		4,664	4,664	4,710	4,680	0	(2)	0	(2)	0	4,678	0	(15)	(15)	60	02/25/2027	1.A
.3136B1-XJ-8	FNA 2018-M4 A2 - CMBS		06/01/2023	Paydown		9,598	9,598	9,364	9,459	0	6	0	6	0	9,464	0	134	134	101	03/27/2028	1.A
.3137BY-PD-6	FHR 4692 LP - CMO/RMBS		06/01/2023	Paydown		4,645	4,645	4,723	4,764	0	(2)	0	(2)	0	4,721	0	(76)	(76)	58	05/15/2046	1.A
.3137BY-PQ-7	FHMS K-726 A2 - CMBS		06/01/2023	Paydown		1,097	1,097	1,129	1,101	0	(2)	0	(2)	0	1,099	0	(2)	(2)	13	04/25	

STATEMENT AS OF JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Ident- ification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn- ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol
5989999999. Total - Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999. Total - Preferred and Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals						1,347,903	XXX	1,544,182	1,360,454	0	(5,110)	0	(5,110)	0	1,355,344	0	(7,441)	(7,441)	28,285	XXX	XXX

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

Schedule DB - Part B - Section 1 - Futures Contracts Open  
**N O N E**

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made  
**N O N E**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open  
**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By  
**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To  
**N O N E**

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees  
**N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned  
**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned  
**N O N E**



## SCHEDULE E - PART 1 - CASH

E13

## SCHEDULE E - PART 2 - CASH EQUIVALENTS

[illegible]



SUPPLEMENT FOR THE QUARTER ENDING JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

Designate the type of health care  
providers reported on this page:  
Other health care facilities

SUPPLEMENT A TO SCHEDULE T  
EXHIBIT OF MEDICAL PROFESSIONAL LIABILITY PREMIUMS WRITTEN  
ALLOCATED BY STATES AND TERRITORIES

	1	2	Direct Losses Paid		5	Direct Losses Unpaid		8
			3	4		6	7	
States, etc.	Direct Premiums Written	Direct Premiums Earned	Amount	No. of Claims	Direct Losses Incurred	Amount Reported	No. of Claims	Direct Losses Incurred But Not Reported
1. Alabama .....AL								
2. Alaska .....AK								
3. Arizona .....AZ					67			1
4. Arkansas .....AR								
5. California .....CA					104			1
6. Colorado .....CO								
7. Connecticut .....CT								
8. Delaware .....DE								
9. District of Columbia .....DC					47			0
10. Florida .....FL								
11. Georgia .....GA					21			0
12. Hawaii .....HI								
13. Idaho .....ID								
14. Illinois .....IL								
15. Indiana .....IN								
16. Iowa .....IA								
17. Kansas .....KS					338			3
18. Kentucky .....KY								
19. Louisiana .....LA								
20. Maine .....ME								
21. Maryland .....MD								
22. Massachusetts .....MA								
23. Michigan .....MI					29			0
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					299			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					703			6
48. Washington .....WA					1,173			11
49. West Virginia .....WV								
50. Wisconsin .....WI								
51. Wyoming .....WY								
52. American Samoa .....AS								
53. Guam .....GU								
54. Puerto Rico .....PR								
55. U.S. Virgin Islands .....VI								
56. Northern Mariana Islands .....MP								
57. Canada .....CAN								
58. Aggregate Other Aliens .....OT	0	0	0	0	0	0	0	0
59. Totals	0	0	0	0	2,781	0	0	25
DETAILS OF WRITE-INS								
58001. ....								
58002. ....								
58003. ....								
58998. Summary of remaining write-ins for Line 58 from overflow page	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	0	0	0	0	0	0	0	0



SUPPLEMENT FOR THE QUARTER ENDING JUNE 30, 2023 OF THE COLONY SPECIALTY INSURANCE COMPANY

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

Year To Date For The Period Ended JUNE 30, 2023

NAIC Group Code 0457 NAIC Company Code 36927

Company Name COLONY SPECIALTY INSURANCE COMPANY

If the reporting entity writes any director and officer (D&O) business, please provide the following:

1. Monoline Policies

1 Direct Written Premium	2 Direct Earned Premium	3 Direct Losses Incurred
\$ ..... 151,239	\$ .....383,727	\$ .....247,837

2. Commercial Multiple Peril (CMP) Packaged Policies

- 2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy?

Yes [ ] No [ X ]
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated?

Yes [ ] No [ X ]
- 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified:.....\$ .....

2.32 Amount estimated using reasonable assumptions:.....\$ .....
- 2.4 If the answer to question 2.1 is yes, provide direct losses incurred (losses paid plus change in case reserves) for the D&O liability coverage provided in CMP packaged policies. ....

\$ .....