

QUARTERLY STATEMENT

AS OF SEPTEMBER 30. 2020

OF THE CONDITION AND AFFAIRS OF THE

TRIAD GUARANTY ASSURANCE CORPORATION, IN REHABILITATION NAIC Group Code 00421 00421 NAIC Company Code 10217 Employer's ID Number 56-1905825 (Current Period) (Prior Period) Organized under the Laws of Illinois State of Domicile or Port of Entry Illinois Country of Domicile United States Incorporated/Organized 12/23/1994 02/15/1995 **Commenced Business** Statutory Home Office Chicago, IL, US 60654 222 Merchandise Mart Plaza (City or Town, te, Country and Zip Code) Street and Numb Main Administrative Office 101 South Stratford Road Winston-Salem, NC, US 27104 336-723-1282 (Area Code) (Telephone Number) (Street and Number) (City or Town, State, Country and Zip Code) Post Office Box 2300 Street and Number or P.O. Box Winston-Salem, NC, US 27102 (City or Town, State, Country and Zip Code) Mail Address Winston-Salem, NC, US 27104 Primary Location of Books and Records 101 South Stratford Road 336-723-1282-1155 (Area Code) (Telephone Number) (City or Town, State, Country and Zip Code) (Street and Number Internet Web Site Address www.triadguaranty.com Statutory Statement Contact Randall Keith Shields 336-723-1282-1155 er) (Extension) (Area Cod Area Code) (Telepho 336-761-5174 rshields@tgic.com (E-Mail (Fax Nu **OFFICERS** Name Title Name Title OTHER OFFICERS **DIRECTORS OR TRUSTEES** State of County of

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 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.

Subscribed and sworn to before me this _day of

a. Is this an original filing?

Yes [] No []

b. If no:

- State the amendment number
 Date filed 3. Number of pages attached

ASSETS Current Statement Date 4 3 December 31 Net Admitted Assets Prior Year Net (Cols. 1 - 2) Assets Nonadmitted Assets Admitted Assets11,014,377 ...11,014,377 1. Bonds 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 (\$160,261), and short-term investments (\$ 859 663 859 663 234 876 ..).. 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)11,874,040 ...11,874,040 ...11,677,106 only).....83,64883,648 ..88,655 14. Investment income due and accrued 15. Premiums and considerations: 15.1 Uncollected premiums and agents' balances in the course of(12,594) ...(12,594) ..9,578 collection 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$earned but unbilled premiums) 15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$) 16. Reinsurance: 16.1 Amounts recoverable from reinsurers 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. 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 ... 25. Aggregate write-ins for other-than-invested assets . 26. Total assets excluding Separate Accounts, Segregated Accounts and 11,945,094 11,945,094 Protected Cell Accounts (Lines 12 to 25) 11,775,339 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.... 11,945,094 11.945.094 11,775,339 28. Total (Lines 26 and 27) DETAILS OF WRITE-INS 1101. 1102. ... 1103. 1198. Summary of remaining write-ins for Line 11 from overflow page 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) 2501. 2502. 2503. 2598. Summary of remaining write-ins for Line 25 from overflow page ... 2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)

LIABILITIES, SURPLUS AND OTHER FUNDS

	LIADILITIES, SURPLUS AND UTHER FU		
		Current	2 December 31,
		Statement Date	Prior Year
	Losses (current accident year \$		
2.	Reinsurance payable on paid losses and loss adjustment expenses	(372)	(482)
	Loss adjustment expenses		
4.	Commissions payable, contingent commissions and other similar charges	(3,778)	
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.	1 Current federal and foreign income taxes (including \$		
7.	2 Net deferred tax liability		
8.	Borrowed money \$ and interest thereon \$		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
	including warranty reserves of \$		
	including \$ for medical loss ratio rebate per the Public Health Service Act)	1,805	2,016
10	Advance premium		, ,
	Dividends declared and unpaid:		
	11.1 Stockholders		
10	11.2 Policyholders		
	Ceded reinsurance premiums payable (net of ceding commissions)		
	Funds held by company under reinsurance treaties		
	Amounts withheld or retained by company for account of others		
	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		
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		
	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		
	Protected cell liabilities		
	Total liabilities (Lines 26 and 27)		
	Aggregate write-ins for special surplus funds		
	Common capital stock		
	Preferred capital stock		
	Aggregate write-ins for other than special surplus funds		
	Surplus notes		
	Gross paid in and contributed surplus		2,535,982
35.	Unassigned funds (surplus)		5,947,303
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)	11,057,677	10,983,285
38.	Totals (Page 2, Line 28, Col. 3)	11,945,094	11,775,339
	DETAILS OF WRITE-INS	, ,	
2501.			
			I
2502.			
2502. 2503.			
2502. 2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page		
2502. 2503. 2598. 2599.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		
2502. 2503. 2598. 2599. 2901.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		
2502. 2503. 2598. 2599. 2901. 2902.	Summary of remaining write-ins for Line 25 from overflow page		
2502. 2503. 2598. 2599. 2901. 2902. 2903.	Summary of remaining write-ins for Line 25 from overflow page		
2502. 2503. 2598. 2599. 2901. 2902. 2903.	Summary of remaining write-ins for Line 25 from overflow page		
2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998.	Summary of remaining write-ins for Line 25 from overflow page		
2502. 2503. 2599. 2901. 2902. 2903. 2998. 2999.	Summary of remaining write-ins for Line 25 from overflow page		
2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
2502. 2503. 2598. 2901. 2902. 2903. 2998. 2999. 3201. 3202.	Summary of remaining write-ins for Line 25 from overflow page		
2502. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201. 3202. 3203.	Summary of remaining write-ins for Line 25 from overflow page		

STATEMENT OF INCOME

			0	2
		1 Current Year	2 Prior Year	3 Prior Year Ended
		to Date	to Date	December 31
	UNDERWRITING INCOME			
1.	Premiums earned:			
	1.1 Direct (written \$			76 002
	1.2 Assumed (written \$			
	1.4 Net (written \$	23.436		
	DEDUCTIONS:	, , , , , , , , , , , , , , , , , , , ,		,
2.	Losses incurred (current accident year \$			
	2.1 Direct			
	2.2 Assumed	, , , , , , , , , , , , , , , , , , , ,	(, , , , , , , , , , , , , , , , , , ,	(50,474)
	2.3 Ceded		(72, 700)	(EQ 474)
3	Loss adjustment expenses incurred		(73,709)	(30,474)
3. 4.	Other underwriting expenses incurred	24.126	31.190	
	Aggregate write-ins for underwriting deductions			,,
	Total underwriting deductions (Lines 2 through 5)			(4,794)
7.	Net income of protected cells			
8.	Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	(169,859)		
0		220 572	227 560	
	Net investment income earned			
	Net investment gain (loss) (Lines 9 + 10)			
			200,200	
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off			
	(amount recovered \$)			
	Finance and service charges not included in premiums			
	Aggregate write-ins for miscellaneous income			
	Total other income (Lines 12 through 14)			
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	74.394	321 903	405 721
17.	Dividends to policyholders			100,721
	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.	Federal and foreign income taxes incurred			
20.	Net income (Line 18 minus Line 19)(to Line 22)	74,394	321,903	405,721
04	CAPITAL AND SURPLUS ACCOUNT	10 002 205	10 577 562	10 577 564
	Surplus as regards policyholders, December 31 prior year Net income (from Line 20)			
	Net transfers (to) from Protected Cell accounts.			400,721
	Change in net unrealized capital gains or (losses) less capital gains tax of			
	\$			
25.	Change in net unrealized foreign exchange capital gain (loss)			
	Change in net deferred income tax			
	Change in nonadmitted assets			
	Change in provision for reinsurance			
	Change in surplus notes			
	Cumulative effect of changes in accounting principles			
	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			
	Dividends to stockholders			
36.	Change in treasury stock			
	Aggregate write-ins for gains and losses in surplus			
	Change in surplus as regards policyholders (Lines 22 through 37)	. 74,394	321,903	405,721
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	11,057,679	10,899,466	10,983,285
	DETAILS OF WRITE-INS			
	Summary of remaining write-ins for Line 5 from overflow page			
	TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)			
1403.				
	Summary of remaining write-ins for Line 14 from overflow page			
	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)			
	Increase in contingency reserve			
	Decrease in contingency reserve	1		
	Summary of remaining write-ins for Line 37 from overflow page			
	TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)			

CASH FLOW

	CASITILOW		0	
		1 Current Year	2 Prior Year	3 Prior Year Ended
		To Date	To Date	December 31
	Cash from Operations	10 2010	10 2010	Becomber of
1.	Premiums collected net of reinsurance		.60 , 158	.60,158
	Net investment income	· · · · ·		.324,319
	Miscellaneous income		,	
	Total (Lines 1 to 3)	297,856	305,258	384.477
	Benefit and loss related payments			.446,603
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.			
	Commissions, expenses paid and aggregate write-ins for deductions		.36.435	.40,918
	Dividends paid to policyholders			
	Federal and foreign income taxes paid (recovered) net of \$tax on capital			
	gains (losses)			
	Total (Lines 5 through 9)	97.721	347,763	487,521
	Net cash from operations (Line 4 minus Line 10)	200.135	(42,505)	(103,044)
	Cash from Investments		(,,	(,
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds		3.178.943	
	12.2 Stocks			
	12.3 Mortgage loans	1		
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds			
	12.8 Total investment proceeds (Lines 12.1 to 12.7)			
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	1		
	13.7 Total investments acquired (Lines 13.1 to 13.6)	1,744,896	3,553,788	3,612,870
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)	424,652	(374,845)	(353, 195
	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)			
	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)			
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)		(417,350)	
	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year			
	19.2 End of period (Line 18 plus Line 19.1)	859,663	273,765	234,876

NOTES TO FINANCIAL STATEMENTS

As instructed by the Office of Special Deputy Receiver representing the Illinois Director of Insurance, Notes to the Financial Statements are no longer required by the Company. Specific questions regarding any information usually presented in the Notes to the Financial Statements should be directed to the Annual Statement contact.

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?	
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes [] No [X]
2.2	If yes, date of change:	
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?	Yes [X] No []
	If yes, complete Schedule Y, Parts 1 and 1A.	
3.2	Have there been any substantial changes in the organizational chart since the prior quarter end?	Yes [] No [X]
3.3	If the response to 3.2 is yes, provide a brief description of those changes.	
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?	Yes [X] No []
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group	
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	
	If yes, complete and file the merger history data file with the NAIC.	
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? If yes, attach an explanation.	Yes [] No [] NA [X]
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	
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.	
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).	
6.4	By what department or departments?	
6 F	Illinois 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 [] NA [X]
	Have all of the recommendations within the latest financial examination report been complied with?	Yes [X] No [] NA []
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
	Location				
Affiliate Name	(City, State)	FRB	OCC	FDIC	SEC

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal similar functions) of the reporting entity subject to a code of ethics, which includes					Yes [X]	No []
	 (a) Honest and ethical conduct, including the ethical handling of actual or appare (b) Full, fair, accurate, timely and understandable disclosure in the periodic repo (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or person 	orts required	to be filed by the report	-	ssional relationships	,	
	(e) Accountability for adherence to the code.						
9.11	If the response to 9.1 is No, please explain:						
9.2	Has the code of ethics for senior managers been amended?					Yes []	No [X]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).						
9.3	Have any provisions of the code of ethics been waived for any of the specified of					Yes []	No [X]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).						
	FIN		NL				
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or aff	filiates on P	age 2 of this statement?			Yes []	No [X]
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amou				\$		
11.1	INVE Were any of the stocks, bonds, or other assets of the reporting entity loaned, plac for use by another person? (Exclude securities under securities lending agreeme		ption agreement, or oth			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 E						
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 affilia	ates?				Yes []	No [X]
14.2	If yes, please complete the following:						
			1 Prior Year-End Book/Adjusted Carrying Value	Bo	2 rent Quarter ok/Adjusted rrying Value		
	14.21 Bonds 14.22 Preferred Stock			\$			
	14.22 Freieneu Stock	•					
	14.24 Short-Term Investments	\$		\$			
	14.25 Mortgage Loans on Real Estate 14.26 All Other	э \$		\$			
	14.27 Total Investment in Parent, Subsidiaries and Affiliates	•		<u>_</u>			
	(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 Sched	dule DB?				Yes []	No [X]
15.2	If yes, has a comprehensive description of the hedging program been made available	ilable to the	domiciliary state?		Yes []	No []	NA [X]
	If no, attach a description with this statement.						
16	For the reporting entity's security lending program, state the amount of the follow	-		e:	•		
	 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, I 16.2 Total book adjusted/carrying value of reinvested collateral assets reporte 				\$ \$		
	16.3 Total payable for securities lending reported on the liability page		iuie DL, Faits I dilu Z		\$ \$		

16.3 Total payable for securities lending reported on the liability page

GENERAL INTERROGATORIES

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

Yes [X] No []

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

1	2
Name of Custodian(s) Custodian Address	
The Northern Trust Company	50 South LaSalle Street, Chicago, Illinois 60603

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?

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 Name of Firm or Individual	2 Affiliation
Mesirow Financial Investment 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?

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?

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
	Mesirow Financial Investment Management, Inc	IWFK35GSRKL20LE5C129	SEC	DS

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:	
	Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or a. 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 PLGI securities?.....

Yes [] No [X]

Yes [X] No [

Yes [X] No []

Yes [] No [X]

1

GENERAL INTERROGATORIES

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

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?

Yes [] No [X]

GENERAL INTERROGATORIES PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?	Yes [] No [] NA [X]
	If yes, attach an explanation.	
2.	Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part,	
	from any loss that may occur on the risk, or portion thereof, reinsured?	Yes [] No [X]
	If yes, attach an explanation.	
3.1	Have any of the reporting entity's primary reinsurance contracts been canceled?	Yes [] No [X]
3.2	If yes, give full and complete information thereto.	

Yes [] No [X]

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?

4.2 If yes, complete the following schedule:

				TOTAL D	ISCOUNT		DIS	COUNT TAKEN	DURING PER	RIOD
1	2	3	4	5	6	7	8	9	10	11
	Maximum	Discount	Unpaid	Unpaid			Unpaid	Unpaid		
Line of Business	Interest	Rate	Losses	LAE	IBNR	TOTAL	Losses	LAE	IBNR	TOTAL
		TOTAL								

5.	Operating Percentages:		
	5.1 A&H loss percent		%
	5.2 A&H cost containment percent		%
	5.3 A&H expense percent excluding cost containment expenses		%
6.1	Do you act as a custodian for health savings accounts?	. Yes []	No [X]
6.2	If yes, please provide the amount of custodial funds held as of the reporting date	j	
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	j	
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 [X]	No []

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

		Showing All New Reinsurers - Current Year to Date 3 4 5 6									
1	2	3	4	5	Certified	7 Effective Date					
NAIO					Certified	Effective Date					
NAIC Company Code					Reinsurer Rating (1 through 6)	of Certified Reinsurer Rating					
Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	(1 through 6)	Reinsurer Rating					
				1							
				T							
				1							
				.							
				Ι							
				1							
				1							
		NON									
				Τ							
				1							
				+							
				.							
				1		1					
	••••••			+							
				+							
				I							
				1							
				t							
				+		+					
I				1		1					

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

						by States and Territo		D	
		1		Direct Premi 2	ums Written 3	Direct Losses Paid	(Deducting Salvage)	Direct Loss	ses Unpaid
		Activ	/e	2	3	4	5	Ö	1
		Statu		Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
	States, etc.	(a)		To Date	To Date	To Date	To Date	To Date	To Date
1.	Alabama A	LN.							
2.	Alaska A	κ							
3.	Arizona A								
	Arkansas A								
1	California								
	Colorado C								
	Connecticut C	1							
	Delaware D					1			
1						1			
	Dist. Columbia D								
	FloridaF								
	GeorgiaG								
	Hawaii H								
13.	IdahoIC								
	Illinois IL								
15.	Indiana IN								
1	lowa IA								
	KansasK								
	Kentucky								
	Louisiana								
	Maine					I			
	Maryland N					1			
1						1			
	Massachusetts N					<u> </u>			
1	Michigan N								
	MinnesotaN								
1	MississippiN								
	Missouri N								
27.	Montana N	т							
28.	Nebraska N								
	Nevada N								
	New Hampshire N								
	New Jersey N					I			
	New Mexico					1			
						1			
	New York					<u> </u>			
1	No. Carolina N								
	No. Dakota N					l			
1	Ohio C								
37.	Oklahoma C	к							
	OregonC								
39.	PennsylvaniaP	AN.							
40.	Rhode IslandR								
41.	So. Carolina S	с				ļ			
	So. Dakota S								
	Tennessee T								
	Texas								
	Utah U								
	VermontV					I			
	VirginiaV								
		1				1			
	Washington W					t			
	West Virginia W	I							
	Wisconsin W					<u> </u>			
	Wyoming W								
	American Samoa A								
1	Guam G								
54.	Puerto Rico P								
55.	U.S. Virgin IslandsV	IN.							
	Northern Mariana Islands. M								
	Canada C	1							
	Aggregate Other Alien C								
	Totals	XX)				I			
- 55.	DETAILS OF WRITE-INS								
58001.	DETAILS OF WRITE-INS					_			
58002.		XXX	(
58003.		ХХХ	(
58998.	Summary of remaining write								
	ins for Line 58 from overflow page		(
58999.	TOTALS (Lines 58001 throu		•						
	58003 plus 58998) (Line 58	-							
	above)	XXX	(
1.3 4 1	ve Status Counts								

(a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG .

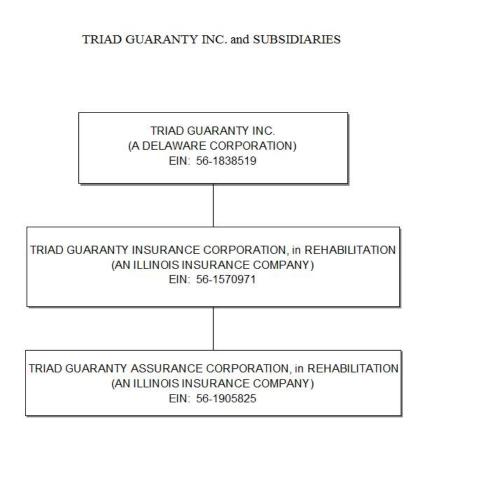
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - See DSLI).
 D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile.

..... 1 R – Registered – Non-domiciled RRGs

..... Q – Qualified – Qualified or accredited reinsurer6

....... N – None of the above – Not allowed to write business in the state50

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of Securities					Type of Control (Ownership,				
						Exchange if			Relationship		Board.	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company		Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	*
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
00421	COLLATERAL HOLDINGS, LTD.	00000	56-1838519		0000911631	OTCBB	TRIAD GUARANTY INC	USA	UDP	COLLATERALHOLDINGS, LTD	OWNERSHIP	16.9	WILLIAM T. RATLIFF AND FAMILY	N	1
							TRIAD GUARANTY INSUURANCE			,			WILLIAM T. RATLIFF		
00421	COLLATERAL HOLDINGS, LTD	. 24350	56-1570971				CORPORATION, IN REHABILITATION	USA		TRIAD GUARANTY INC	OWNERSHIP		AND FAMILY	N	
										TRIAD GUARANTY INSUURANCE					
00421		10217	56 - 1905825				TRIAD GUARANTY ASSUURANCE CORPORATION, IN REHABILITATION	USA	DS.	CORPORATION, IN REHABILITATION	OWNERSHIP.		WILLIAM T. RATLIFF AND FAMILY.	N	
00421	COLLATERAL HOLDINGS, LTD	. 10217	. 50 - 1905625				CORPORATION, IN REMADILITATION	USA		KERADILIIAIIUN	UWINERSHIP		AND FAMILT	N	
												-			
	•	•	•	•		•	•	•	•	•	•	•	•	• •	

Asterisk Explanation

			Current Year to Date			
	Line of Business	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	Prior Year to Date Direct Loss Percentage	
1.	Fire					
2.	Allied lines					
3.	Farmowners multiple peril					
4.	Homeowners multiple peril					
5.	Commercial multiple peril					
6.	Mortgage guaranty					
8.	Ocean marine					
9.	Inland marine					
10.	Financial guaranty					
11.1	Medical professional liability -occurrence.					
11.2	Medical professional liability -claims made.					
12.	Earthquake					
13.	Group accident and health					
14.	Credit accident and health					
15.	Other accident and health					
16.	Workers' compensation					
17.1	Other liability occurrence					
17.2	Other liability claims made	_				
17.2	Other liability-claims made					
17.3	Excess workers Compensation					
18.1	Products liability-occurrence.					
18.2	Excess Workers' Compensation Products liability-occurrence Products liability-claims made					
19.1,19.2						
19.3, 19.4	Commercial auto liability					
21.	Auto physical damage					
22.	Aircraft (all perils)					
23.	Fidelity					
24.	Surety					
26.	Burglary and theft					
27.	Boiler and machinery					
28.	Credit					
29.	International					
30.	Warranty					
31.	Reinsurance - Nonproportional Assumed Property	XXX	ХХХ	ХХХ	ХХХ	
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	ХХХ	
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	ХХХ	XXX	ХХХ	
34.	Aggregate write-ins for other lines of business					
35.	TOTALS					
DET	AILS OF WRITE-INS					
	n. of remaining write-ins for Line 34 from overflow page					
	als (Lines 3401 through 3403 plus 3498) (Line 34)					

PART 1 - LOSS EXPERIENCE

PART 2 - DIRECT PREMIUMS WRITTEN

		1 Current	2 Current	3 Prior Year
	Line of Business	Quarter	Year to Date	Year to Date
1.	Fire			
2.	Allied lines			
3.	Farmowners multiple peril			
4.	Homeowners multiple peril			
5.	Commercial multiple peril			
6.	Mortgage guaranty			
8.	Ocean marine			
9.	Inland marine			
10.	Financial guaranty			
11.1	Medical professional liability-occurrence			
11.2	Medical professional liability-claims made			
12.	Earthquake			
13.	Group accident and health			
14.	Credit accident and health			
15.	Other accident and health			
16.	Workers' compensation			
17.1	Other liability occurrence			
17.2	Other liability-claims made			
17.3	Excess Workers' Compensation			
18.1	Products liability-occurrence			
18.2	Products liability-claims made			
19.1,19	Products liability-occurrence. Products liability-claims made. 2 Private passenger auto liability 4 Commercial auto liability			
19.3,19	4 Commercial auto liability			
21.	Auto physical damage			
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety			
26.	Burglary and theft			
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Warranty			
31.	Reinsurance - Nonproportional Assumed Property	ХХХ	ХХХ	ХХХ
32.	Reinsurance - Nonproportional Assumed Liability	ХХХ	XXX	ХХХ
33.	Reinsurance - Nonproportional Assumed Financial Lines	ХХХ	ХХХ	ХХХ
34.	Aggregate write-ins for other lines of business			
35.	TOTALS			
	TAILS OF WRITE-INS			
3401				
3402				
	m. of remaining write-ins for Line 34 from overflow page			
3499. Tot	tals (Lines 3401 through 3403 plus 3498) (Line 34)			

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)	2020 Loss and LAE Payments on Claims Reported as of Prior Year-End	2020 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2020 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. 2017 + Prior											(40)		(40)
2. 2018		2					140			140	(18)	(2)	(21)
3. Subtotals 2018 + prior		2		61		61	468			468	(58)	(2)	(60)
4. 2019			166	6		6	108		2		(29)	(20)	(50)
5. Subtotals 2019 + prior		25	755	67					2		(87)	(23)	(110)
6. 2020	xxx	XXX	xxx	xxx			xxx				XXX	XXX	xxx
7. Totals	. 731	25	755	67		67	576	263	18	857	(87)	(23)	(110)
Prior Year-End 8. Surplus As Regards Policy- holders	- 10,983										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. (11.9)	2. (92.8)	
													Col. 13, Line 7 Line 8
													4. (1.0)

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?	N0
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	N0
3.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	N0
4.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Explanation:

Bar Code:

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A – VERIFICATION

Real Estate

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

SCHEDULE BA – VERIFICATION Other Long-Term Invested Assets

	Other Long-Term Invested Assets		
		1	2
			Prior Year Ended
		Year To Date	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 Prior Year Ended
	Year To Date	December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year		
2. Cost of bonds and stocks acquired	1,744,894	
 Book/adjusted carrying value of bonds and stocks, December 31 of prior year Cost of bonds and stocks acquired Accrual of discount 		
4. Unrealized valuation increase (decrease)		
 Unrealized valuation increase (decrease)		
6. Deduct consideration for bonds and stocks disposed of	.1	
7 Deduct amortization of premium	30 753	38 461
8. Total foreign exchange change in book/adjusted carrying value		
Deduct current year's other-than-temporary impairment recognized.		
 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)		
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	11,014,378	11,442,233

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)								
2. NAIC 2 (a)				(3,690)		3,087,752		
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	11,411,328	378,599	768,332	(7,217)	11,130,482	11,411,328	11,014,378	11,442,231
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	11,411,328	378,599	768,332	(7,217)	11,130,482	11,411,328	11,014,378	11,442,231

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

Schedule DA - Part 1

Schedule DA - Verification

Schedule DB - Part A - Verification

Schedule DB - Part B - Verification

Schedule DB - Part C - Section 1

Schedule DB - Part C - Section 2

Schedule DB - Verification

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	216,682	
	Cost of cash equivalents acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		
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)		
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	699,403	216,682

Schedule A - Part 2

Schedule A - Part 3

Schedule B - Part 2

Schedule B - Part 3

Schedule BA - Part 2

Schedule BA - Part 3

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

	-	-		All Long-Term Bonds and Stock Acquired During the Curren	1	_	-	-	1
1	2	3	4	5	6	7	8	9	10 NAIC
									Designation
									and
CUSIP					Number of	Actual		Paid for Accrued	Administrative
Identification	Description	Foreign	Date Acquired	Name of Vendor	Shares of Stock	Cost	Par Value	Interest and Dividends	Symbol
Bonds - U.S. Govern									
Bonds - All Other Go									
	, Territories and Possessions								
	al Subdivisions of States, Territories and Possessions								
		inteed Obligations of	f Agencies and Aut	thorities of Governments and Their Political Subdivisions					
	nd Miscellaneous (Unaffiliated)								
	HOME DEPOT INC 2.125 15/09/26		09/10/2020	MLPFS INC/FIXED INCOME.	XXX XXX				1FE
	3M COMPANY 2.25 19/09/26 s - Industrial and Miscellaneous (Unaffiliated)		09/10/2020	MERRILL PROFESSIONAL CLEARING CORP. MERR	λλλ			3.773	
Bonds - Hybrid Secu	, ,					370,099	300,000	3,113	^^^
	sidiaries and Affiliates								
Bonds - SVO Identifi									
Bonds - Unaffiliated									
	s - Subtotals - Bonds - Part 3					378,599	350.000	3.773	XXX
	s - Subtotals - Bonds					378,599	350,000	3,773	
	ndustrial and Miscellaneous (Unaffiliated) Perpetual Pre	eferred				010,000		0,110	7007
	dustrial and Miscellaneous (Unaffiliated) Redeemable								
	arent. Subsidiaries and Affiliates Perpetual Preferred								
Preferred Stocks - P	arent, Subsidiaries and Affiliates Redeemable Preferre	d							
Common Stocks - In	dustrial and Miscellaneous (Unaffiliated) Publicly Trade	ed							
Common Stocks - In	dustrial and Miscellaneous (Unaffiliated) Other								
Common Stocks - Pa	arent, Subsidiaries, and Affiliates Publicly Traded								
Common Stocks - P	arent, Subsidiaries and Affiliates Other								
Common Stocks - M	lutual Funds								
Common Stocks - U	nit Investment Trusts								
Common Stocks - C	losed-End Funds								
								+	
9999999 Totals		-				378,599	XXX	3,773	XXX

SCHEDULE D - PART 4

					Sho	w All Long-T	erm Bonds a	nd Stock Solo	d, Redeemed	or Otherwise	Disposed of	During the C	urrent Quart	er						
1	2 3	4	5	6	7	8	9	10		Change in E	ook/Adjusted Ca	arrying Value		16	17	18	19	20	21	22
	- -		-			-	-		11	12	13	14	15	1						
	0																			
	r	·									Current Year's			Book/				Bond		NAIC
	e	•							Unrealized		Other Than	Total Change	Total Foreign	Adjusted	Foreign			Interest/Stock	Stated	Designation
CUSIP	i			Number of				Prior Year	Valuation	Current Year's	Temporary	in	Exchange	Carrying Value	Exchange Gai	n Realized Gain	Total Gain	Dividends	Contractual	and
Identi-	g	Disposal		Shares of				Book/Adjusted	Increase/	(Amortization)/	Impairment	B./A.C.V.	Change in	at	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Administrative
fication	Description	Date	Name of Purchaser	Stock	Consideration	Par Value	Actual Cost	Carrying Value	(Decrease)	Accretion	Recognized	(11+12-13)	B./A.C.V.	Disposal Date	Disposal	Disposal	Disposal	During Year	Date	Symbol
	Governments																			
	ther Governments																			
	States, Territories and Posse																			
	Political Subdivisions of Stat																			
	Special Revenue and Special	al Assessment	and all Non-Guaranteed O	bligations of A	Agencies and Aut	horities of Gove	rnments and The	eir Political Subd	ivisions	1		1				-	1			
3140X4-NT-9.	FANNIE MAE 2.5 POOL ID	00/01/2020	MBS PAYDOWN	XXX	4.745	4.745				(15)				4.745				69	03/01/2029	1
	FANNIE MAE 4.5 POOL ID		MD3 TATDOWN							(13)		(13)							03/01/2023	
	930770	09/01/2020	MBS PAYDOWN	ХХХ	1,631	1,631	1,754	1,716		(15)		(15)							03/01/2029	
3199999 -	Bonds - U.S. Special Revenu	e and Special	Assessment and all Non-G	Guaranteed																
	Obligations of Agencies ar	nd Authorities of	of Governments and Their F	Political												1				
	Subdivisions				6,376	6,376	6,575	6,533		(30)		(30)		6,376				110	XXX	XXX
	strial and Miscellaneous (Una	affiliated)																		
	BANK OF AMERICA CORP 5.625	07/04/0000			75 000	75 000	70,000	75 007		(007)		(007)		75 000				4.040	07/04/0000	455
06051G-EC-9.	01/07/20 BANK OF NY MELLON CORP 2.6	07/01/2020	MATURITY. SECURITY CALLED BY ISSUER	XXX				75,937										4 , 219	07/01/2020	1FE
	17/08/20	07/17/2020	at 100.000	XXX												(9)	(9)	3.575	08/17/2020	1FE
	JOHN DEERE CAPITAL CORP									1						(-)	(-,			
	2.45 11/09/20	09/11/2020	MATURITY	XXX															09/11/2020	
29379V-AP-8.	ENTERPRISE PRODUCTS OPER		MATURITY	XXX	175.000		191.947	177.923		(2,923)		(2,923)		175.000				9.100	09/01/2020	2FE
	JPMORGAN CHASE & CO 4.5		MATORTIT							(2,923)		(2,923)							09/01/2020	ZFE
46625H-JD-3.			CORP ACTION.	ххх						(1,062)									01/24/2022	1FE
3899999 -	Bonds - Industrial and Miscel	llaneous (Unaff	iliated)		769,280	760,000	792,934	766,907		(4,952)		(4,952)		761,955		7,325	7,325	30,134	ХХХ	XXX
Bonds - Hybr	id Securities		•							•		•								•
Bonds - Pare	nt, Subsidiaries, and Affiliate	S																		
Bonds - SVO	Identified Funds																			
Bonds - Unat	filiated Bank Loans																			
8399997 -	Bonds - Subtotals - Bonds - F	Part 4			775,656	766,376	799,509	773,440		(4,982)		(4,982)		768,331		7,325	7,325	30,244	XXX	XXX
8399999 -	Bonds - Subtotals - Bonds				775,656	766,376	799,509	773,440		(4,982)		(4,982)		768,331		7,325	7,325	30,244	ХХХ	XXX
Preferred Sto	ocks - Industrial and Miscellar	neous (Unaffilia	ated) Perpetual Preferred										-							
Preferred Sto	ocks - Industrial and Miscella	neous (Unaffilia	ated) Redeemable Preferre	ed																-
Preferred Sto	ocks - Parent, Subsidiaries ar	nd Affiliates Per	rpetual Preferred																	
	ocks - Parent, Subsidiaries ar																			
	cks - Industrial and Miscellar																			
	cks - Industrial and Miscellar																			
	cks - Parent, Subsidiaries, a																			
	cks - Parent, Subsidiaries an	nd Affiliates Oth	er																	
	ck - Mutual Funds																			
	cks - Unit Investment Trusts																			
Common Sto	cks - Closed-End Funds	· · · · · ·														-				
		··[·····		1	·····			l		<u>+</u>		+	<u>+</u>	+		-+		+		ł
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9999999 T					775,656	ХХХ	799.509	773.440		(4,982)		(4.982)	+	768,331		7,325	7,325	30,244	ХХХ	ХХХ
R 8888888 1	บเลเร				110,000	٨٨٨	199,509	113,440		(4,982)		(4,982)		/00,331		1,325	1,323	30,244	۸۸۸	1 1/1

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Schedule DB - Part A - Section 1 NONE

Schedule DB - Part B - Section 1

Schedule DB - Part D - Section 1

Schedule DB - Part D - Section 2

Schedule DB - Part E

Schedule DL - Part 1

Schedule DL - Part 2

SCHEDULE E - PART 1 - CASH

	Mont	h End Dep	oository Balan	ces				
1	2	3	4	5		Balance at End o During Current (9
		Rate	Amount of Interest Received During Current	Amount of Interest Accrued at Current Statement	6	7	8	
Depository Open Depositories	Code	Interest	Quarter	Date	First Month	Second Month	Third Month	*
Winston-Salem, North								
Branch Banking and Trust (Truist)Carolina 0199998 Deposits in1 depositories that do							158,692	XXX
0199998 Deposits in1 depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories	ХХХ	ХХХ			507	(174)	1,569	ХХХ
0199999 Total Open Depositories	XXX	XXX			180,519	176,548	1,009	XXX
	·							
	.							
	+							
0000000 Tatal Cash as Descrit	VVV	VVV			100 510	170 5 10	400.004	
0399999 Total Cash on Deposit 0499999 Cash in Company's Office	XXX XXX	XXX XXX	ХХХ	XXX	180,519	176,548	160,261	XXX XXX
0599999 Total	XXX	ХХХ			180,519	176,548	160,261	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

		Sh	ow Investments O	wned End of Current Quar	ter			
1	2	3	4	5	6	7	8	9
	-	Ů	Date	Rate of	Maturity	Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year
	ents - Issuer Obligations	Code	Acquireu	Interest	Dale	Carrying value	Due & Accided	Duning Teal
	ents - Residential Mortgage-Backed Securities							
	ents - Commercial Mortgage-Backed Securities							
	ents - Other Loan-Backed and Structured Securities							
	vernments - Issuer Obligations							
Bonds - All Other Gov	vernments – Residential Mortgage-Backed Securities							
Bonds - All Other Gov	vernments – Commercial Mortgage-Backed Securities							
	/ernments - Other Loan-Backed and Structured Securities							
	Territories and Possessions (Direct and Guaranteed) - Issuer Obligations							
	Territories and Possessions (Direct and Guaranteed) - Residential Mortgage-Backed Secur	ition						
	Ferritories and Possessions (Direct and Guaranteed) - Residential montgage-backed Securit							
	Territories and Possessions (Direct and Guaranteed) - Other Loan-Backed and Structured S							
	al Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Issuer (
			0					
	al Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Resident							
	al Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Commerci							
	al Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Other Lo							
	Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencie							
	Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencie							
	Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencie							
	Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencie	es and Authorities o	f Governments and Th	eir Political Subdivisions – ()ther Loan-Backed and S	Structured Securities		
	nd Miscellaneous (Unaffiliated) – Issuer Obligations							
	nd Miscellaneous (Unaffiliated) – Residential Mortgage-Backed Securities							
	nd Miscellaneous (Unaffiliated) – Commercial Mortgage-Backed Securities							
	nd Miscellaneous (Unaffiliated) – Other Loan-Backed and Structured Securities							
	ities – Issuer Obligations							
	ities – Residential Mortgage-Backed Securities							
Bonds - Hybrid Secur	ities – Commercial Mortgage-Backed Securities							
Bonds - Hybrid Secur	ities - Other Loan-Backed and Structured Securities							
Bonds - Parent, Subs	idiaries and Affiliates Bonds - Issuer Obligations							
Bonds - Parent, Subs	idiaries and Affiliates Bonds - Residential Mortgage-Backed Securities							
Bonds - Parent, Subs	idiaries and Affiliates Bonds – Commercial Mortgage-Backed Securities							
Bonds - Parent, Subs	idiaries and Affiliates Bonds - Other Loan-Backed and Structured Securities							
Bonds - Parent, Subs	idiaries and Affiliates Bonds - Affiliated Bank Loans - Issued							
Bonds - Parent, Subs	idiaries and Affiliates Bonds - Affiliated Bank Loans - Acquired							
Bonds - SVO Identifie	ed Funds – Exchange Traded Funds - as Identified by the SVO							
	ed Funds – Bond Mutual Funds – as Identified by the SVO							
Bonds - Unaffiliated	Bank Loans - Unaffiliated Bank Loans - Issued							
	Bank Loans - Unaffiliated Bank Loans - Acquired							
Sweep Accounts	· ···· · · ···························							
	Nutual Funds - as Identified by SVO							
All Other Money Marke								
	NORTHERN INSTITUTIONAL TREASURY PORTFOL		09/30/2020		XXX	699.402	1	
	er Money Market Mutual Funds	····				699.402		52
Other Cash Equivalent						000,402		02
8899999 Total Ca						699.402	1	52
0033333 10tgl Cg						099,402	- [52