

## **QUARTERLY STATEMENT**

AS OF JUNE 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 N	lumber	56-1905825
(Current Period	d) (Prior Period)					
Organized under the Laws of	Illinois	, Sta	te of Domicile or	Port of Entry		llinois
Country of Domicile		Un	ted States			
Incorporated/Organized	12/23/1994	Cor	nmenced Busines	S	02/15/199	95
Statutory Home Office	222 Merchandise		,	Chicago, IL		
	(Street and N	•		(City or Town, State,	•	
Main Administrative Office	101 South Stratford F (Street and Number)		Winston-Salem, I City or Town, State, Co			336-723-1282 ode) (Telephone Number)
Mail Address	Post Office Box 2300		•	Winston-Salem, NC	•	
	(Street and Number or P.O. Box)	,		City or Town, State, Countr		
Primary Location of Books and Reco		Stratford Road		m, NC, US 27104		6-723-1282-1155
Internet Web Site Address	(Street ar	nd Number)		e, Country and Zip Code)	(Area C	Code) (Telephone Number
milemet web Site Address		www.	riadguaranty.com			
Statutory Statement Contact	Randal	ll Keith Shields			1282-1155	
rehiolds@	ntgic.com	(Name)		(Area Code) (Telephor 336-761-5174	ne Number) (Ex	ktension)
	Address)			(Fax Number)		
,	,			( 1 1 1 )		
		OFFICERS				
			Name			Title
Name	Title					
Name	; <u> </u>	OTHER OFFIC		;		
Name	; <u> </u>	OTHER OFFIC		;		
Name  State of				;		
State of	DIRI  DIRI  duly sworn, each depose as were the absolute property dexhibits, schedules and exit of the said reporting entity as with the NAIC Annual State or regulations require differ ctively. Furthermore, the scott copy (except for formatting	nd say that they are the desof the said reporting entity, eplanations therein containes of the reporting period steement Instructions and Acceences in reporting not relape of this attestation by the	cribed officers of sa free and clear from d, annexed or refer ated above, and of it bunting Practices an ted to accounting p described officers al	any liens or claims the rred to, is a full and to to income and deduction of Procedures manual practices and procedures includes the related	ereon, exceptue statemer ons therefror except to thures, accordid correspond	ot as herein stated, and of all the assets and for the period ended e extent that: (1) stang to the best of the ing electronic filing wi

### **ASSETS**

			Current Statement Date		4
		1	2	3 Net Admitted Assets	December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
	Bonds	11,411,327		11,411,327	11,442,230
۷.	Stocks:				
3	2.2 Common stocks				
٥.	Mortgage loans on real estate: 3.1 First liens				
4	Real estate:				
4.	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 (\$184,054 ),				
	cash equivalents (\$216,208 )	400, 260		400, 260	234,876
•	and short-term investments (\$).			1	234,870
	Contract loans (including \$ premium notes)			i i	
7.	Derivatives			i	
8.	Other invested assets		i	i i	
9.			i	i	
	Securities lending reinvested collateral assets				
	Aggregate write-ins for invested assets			44 044 507	44 077 400
	Subtotals, cash and invested assets (Lines 1 to 11)	11,811,587		11,811,587	11,6//,106
13.	Title plants less \$				
	only)				
	Investment income due and accrued	87 ,880		87 ,886	88,055
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	(7.262)		(7.262)	0 E70
		(7,302)		(7,302)	9,376
	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	,				
10.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.3 Other amounts receivable under reinsurance contracts				
17	Amounts receivable relating to uninsured plans				
	1 Current federal and foreign income tax recoverable and interest thereon				
	2 Net deferred tax asset		i	i	
	Guaranty funds receivable or on deposit				
	Electronic data processing equipment and software				
	Furniture and equipment, including health care delivery assets				
	(\$)				
22	Net adjustment in assets and liabilities due to foreign exchange rates				
	Receivables from parent, subsidiaries and affiliates		i		
	Health care (\$				
	Aggregate write-ins for other-than-invested assets				
	Total assets excluding Separate Accounts, Segregated Accounts and				
_0.	Protected Cell Accounts (Lines 12 to 25)	11,892,111		11,892,111	11,775,339
27	From Separate Accounts, Segregated Accounts and Protected	,002,		11,002,111	11,110,000
	Cell Accounts.				
28	Total (Lines 26 and 27)	11,892,111		11,892,111	11,775,339
20.	DETAILS OF WRITE-INS	11,002,111		11,002,111	11,770,000
1101	DETAILS OF WRITE-ING				
				l i	
	Summary of remaining write-ins for Line 11 from overflow page				
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)		•		
	· · · · · · · · · · · · · · · · · · ·				
	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)				
	I Samo Lenico Eco i un cuan Ecoco pius Ecoci (Elife Ed abuye)				

LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Statement Date	December 31, Prior Year
1.	Losses (current accident year \$279,446 )		755,201
	Reinsurance payable on paid losses and loss adjustment expenses		
	Loss adjustment expenses		
	Commissions payable, contingent commissions and other similar charges		
	Other expenses (excluding taxes, licenses and fees)		
	Taxes, licenses and fees (excluding federal and foreign income taxes)		
	Current federal and foreign income taxes (including \$		
	2 Net deferred tax liability		
8.	Borrowed money \$ and interest thereon \$		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ and		
	including warranty reserves of \$ and accrued accident and health experience rating refunds		
	including \$ for medical loss ratio rebate per the Public Health Service Act)	1,399	2,016
10.	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		
13.	Funds held by company under reinsurance treaties		
14.	Amounts withheld or retained by company for account of others		
15.	Remittances and items not allocated		
16.	Provision for reinsurance (including \$ certified)		
17.	Net adjustments in assets and liabilities due to foreign exchange rates		
18.	Drafts outstanding		
19.	Payable to parent, subsidiaries and affiliates		
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		
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)	892,942	792,054
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)	892,942	792,054
29.	Aggregate write-ins for special surplus funds		
30.	Common capital stock	2,500,000	2,500,000
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
	Surplus notes		
	Gross paid in and contributed surplus		2,535,982
35.	Unassigned funds (surplus)	5,963,188	5,947,303
36.	Less treasury stock, at cost:		
	36.1		
	36.2 shares preferred (value included in Line 31 \$		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)	10,999,170	10,983,285
38.	Totals (Page 2, Line 28, Col. 3)	11,892,112	11,775,339
	DETAILS OF WRITE-INS		
	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)		
3203.			
	Summary of remaining write-ins for Line 32 from overflow page		
3299.	Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		

### **STATEMENT OF INCOME**

		1 Current Year	2 Prior Year	3 Prior Year Ended
		to Date	to Date	December 31
1	UNDERWRITING INCOME Premiums earned:			
	1.1 Direct (written \$)			
	1.2 Assumed (written \$			
i	1.3 Ceded (written \$			76,093
	DEDUCTIONS:			
2.	Losses incurred (current accident year \$279,446 ):			
	2.1 Direct	160.361	(18.882)	(50.474)
	2.3 Ceded			
	2.4 Net	· I	, , ,	` ' '
	Loss adjustment expenses incurred			45,680
5.	Aggregate write-ins for underwriting deductions			(4.704)
6.	Total underwriting deductions (Lines 2 through 5)	1/8,331 [	12,195	(4,794)
8.	Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	(149,258)	47 , 107	80,887
		, ,		
9	INVESTMENT INCOME  Net investment income earned	157 788	149 518	306,304
	Net realized capital gains (losses) less capital gains tax of \$		(2,119)	18,530
11.	Net investment gain (loss) (Lines 9 + 10)	165 , 144	147 , 399	324,834
	OTHER INCOME			
	Net gain or (loss) from agents' or premium balances charged off			
ı	(amount recovered \$ amount charged off \$)			
i	Finance and service charges not included in premiums	i		
	Total other income (Lines 12 through 14)			
	Net income before dividends to policyholders, after capital gains tax and before all other federal	45,000	404 500	405 704
17.	and foreign income taxes (Lines 8 + 11 + 15)		194,506	405 , 7 21
	Not income, after dividende to policyholders, after capital gains tay and before all other federal			
10	and foreign income taxes (Line 16 minus Line 17)		194,506	405 ,721
	Net income (Line 18 minus Line 19)(to Line 22)	15.886	194,506	405,721
			,,,,,,	
04	CAPITAL AND SURPLUS ACCOUNT Surplus as regards policyholders, December 31 prior year	10 002 205	10 677 662	10 E77 EGA
21.	Net income (from Line 20)	10,963,265	194.506	405,721
23.	Net transfers (to) from Protected Cell accounts			
24.	Change in net unrealized capital gains or (losses) less capital gains tax of			
25.	\$			
26.	Change in net deferred income tax			
i	Change in provision for reignurance			
l	Change in provision for reinsurance			
i	Surplus (contributed to) withdrawn from protected cells	i		
i	Cumulative effect of changes in accounting principles			
02.	004 B 111			
	32.2 Transferred from surplus (Stock Dividend)	i		
33	32.3 Transferred to surplus			
55.	33.1 Paid in			
	33.2 Transferred to capital (Stock Dividend)			
34.	33.3 Transferred from capital			
35.	Dividends to stockholders			
	•			
	Aggregate write-ins for gains and losses in surplus	15,886	194,506	405,721
	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	10,999,171	10,772,069	10,983,285
	DETAILS OF WRITE-INS			
1				
i	Summary of remaining write-ins for Line 5 from overflow page			
	TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)			
1403.				
1	Summary of remaining write-ins for Line 14 from overflow page			
3701.	Increase in contingency reserve			
	Decrease in contingency reserve			
	Summary of remaining write-ins for Line 37 from overflow page			
	TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)			

### **CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
Premiums collected net of reinsurance		39,280	60 , 158
Net investment income		163,295	324 , 319
Miscellaneous income			
4. Total (Lines 1 to 3)	214,615	202,575	384,47
5. Benefit and loss related payments	53,774	304,318	446,60
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	23,052	24,919	40,91
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$tax on capital			
gains (losses)			
10. Total (Lines 5 through 9)	76,826	329,237	487,52
11. Net cash from operations (Line 4 minus Line 10)	137,789	(126,662)	(103,04
Cash from Investments		, , ,	,
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	1.393.891	2,189,933	3,259,67
12.2 Stocks		, , , , , , , , , , , , , , , , , , , ,	
12.3 Mortgage loans	1		
12.4 Real estate	1		
12.5 Other invested assets	1 1		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
12.7 Miscellaneous proceeds	i i	1	
12.8 Total investment proceeds (Lines 12.1 to 12.7)		2,189,934	3 259 67
13. Cost of investments acquired (long-term only):		£, 100,001	
13.1 Bonds	1 366 296	2,285,045	3,612,87
13.2 Stocks			
13.3 Mortgage loans	1 1		
13.4 Real estate	1		
13.5 Other invested assets	1		
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)		2,285,045	3,612,87
14. Net increase (or decrease) in contract loans and premium notes		2,200,010	0,012,01
		(95,111)	(353, 19
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	21,393	(33,111)	(555, 18
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	1		
16.2 Capital and paid in surplus, less treasury stock			
16.3 Borrowed funds	1		
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders	1		
16.6 Other cash provided (applied).			
<ol> <li>Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)</li> </ol>			
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) $\dots$		(221,773)	(456, 23
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year		691,115	691,11
19.2 End of period (Line 18 plus Line 19.1)	400,260	469,342	234,87

### **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 mater Domicile, as required by the Model Act?						,	Yes [ ]	] No [X]
1.2	If yes, has the report been filed with the domi							Yes [ ]	] No [ ]
2.1	Has any change been made during the year reporting entity?	f this statement in the charter, by-laws, a	ticles of inco	rporation, or d	eed of settlem	ent of the		Yes [ ]	] No [X]
2.2	If yes, date of change:								
3.1	Is the reporting entity a member of an Insurar 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	ne organizational chart since the prior qua	arter end?				,	Yes [ ]	] No [X]
3.3	If the response to 3.2 is yes, provide a brief of	escription of those changes.							
3.4	Is the reporting entity publicly traded or a me	nber 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 Si	EC for the ent	ity/group				00	00911631
4.1	Has the reporting entity been a party to a me	ger or consolidation during the period cov	ered by this s	statement?			,	Yes [ ]	] No [X]
	If yes, complete and file the merger history da	ta file with the NAIC.							
4.2	If yes, provide the name of entity, NAIC Comceased to exist as a result of the merger or company.		letter state a	bbreviation) fo	r any entity th	at has			
		1	1	2	3				
		Name of Entity	NAIC C	Company Code	State of D	Domicile			
6.1 6.2	If yes, attach an explanation.  State as of what date the latest financial exarts the as of date that the latest financial exarts.	amination report became available from	either the stat	e of domicile o	or the reporting	g entity.			
	This date should be the date of the examined	balance sheet and not the date the repor	t was comple	ted or release	d			12	2/30/2007
6.3	State as of what date the latest financial exar or the reporting entity. This is the release dat sheet date).	or completion date of the examination re	port and not	the date of the	examination	(balance		06	5/30/2009
6.4	By what department or departments?								
0.5	Illinois Department of Insurance								
6.5	Have all financial statement adjustments with statement filed with Departments?						Yes [ ]		
6.6	Have all of the recommendations within the la						Yes [X]	No [ ]	] NA [ ]
7.1	Has this reporting entity had any Certificates suspended or revoked by any governmental	of Authority, licenses or registrations (incli- entity during the reporting period?	laing corpora	te registration	ır applicable)		,	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 Rese	rve Board?				,	Yes [ ]	] No [X]
8.2	If response to 8.1 is yes, please identify the r	ame of the bank holding company.							
8.3	Is the company affiliated with one or more ba							Yes [ ]	] No [X]
8.4	If response to 8.3 is yes, please provide belo federal regulatory services agency [i.e. the Fe Deposit Insurance Corporation (FDIC) and the regulator.]	deral Reserve Board (FRB), the Office of	the Comptrol	ller of the Curr	ency (OCC), t	the Federal			
	1	2 Location		3	4	5	6		
	Affiliate Name	Location (City, State)		FRB	occ	FDIC	SEC		

### GENERAL INTERROGATORIES

9.1	similar functions) of the reporting entity subject to a code of ethics, which include				Yes [)	X] [	No [ ]
	(a) Honest and ethical conduct, including the ethical handling of actual or appare				ionships;		
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic repo	orts required	to be filed by the report	ing entity;			
	<ul><li>(c) Compliance with applicable governmental laws, rules and regulations;</li><li>(d) The prompt internal reporting of violations to an appropriate person or perso</li></ul>	ne identifie	Lin the code: and				
	(e) Accountability for adherence to the code.	ons identified	Till the code, and				
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 [	] 1	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 [	] 1	No [X]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).						
		IANCIA					
	Does the reporting entity report any amounts due from parent, subsidiaries or aff				Yes [		
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amou			\$			
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, pla for use by another person? (Exclude securities under securities lending agreement of the stocks) and the stocks are securities under securities.		ption agreement, or oth		Yes [	] 1	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 B						
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	iates?			Yes	[]	No [X]
14.2	If yes, please complete the following:						
			1 Prior Year-End	2 Current Quarte	r		
			Book/Adjusted	Book/Adjusted			
	14.21 Bonds	\$	Carrying Value	Carrying Value			
	14.22 Preferred Stock			\$			
	14.23 Common Stock			\$ \$			
	14.25 Mortgage Loans on Real Estate	•		\$			
	14.26 All Other	\$		\$			
	14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$		\$			
	14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	·		•			
15.1	Has the reporting entity entered into any hedging transactions reported on 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 [	] 1	NA [X]
40	If no, attach a description with this statement.						
16	For the reporting entity's security lending program, state the amount of the follow	•					
	<ul> <li>16.1 Total fair value of reinvested collateral assets reported on Schedule DL,</li> <li>16.2 Total book adjusted/carrying value of reinvested collateral assets reporte</li> </ul>			· ·			
	16.3 Total payable for securities lending reported on the liability page		S.S.D., Faito Faita Z				

### **GENERAL INTERROGATORIES**

17.	entity's offices, vaults pursuant to a custodi Considerations, F. O	or safety deposit boy al agreement with a c utsourcing of Critical	kes, were all stocks, bond qualified bank or trust com	s and other appany in accorate Appendix	securities, owned thr ordance with Section Agreements of the NA	oughout the current year held  1, III – General Examination AIC Financial Condition Examin	-
17.1	For all agreements th	nat comply with the re	quirements of the NAIC F	inancial Con	ndition Examiners Ha	ndbook, complete the following	:
			1 (2)			2	
		The Northern Trus	ame of Custodian(s) t Company		.50 South LaSalle S	Custodian Address Street, Chicago, Illinois 600	603
17.2	For all agreements the location and a complete		the requirements of the	NAIC Financ	ial Condition Examin	ners Handbook, provide the nam	ne,
		1 Name(	s)	2 Location(s	)	3 Complete Explanation(s)	
17.3	Have there been any	changes, including n	ame changes, in the cust	odian(s) ider	ntified in 17.1 during	the current quarter?	Yes [ ] No [X]
17.4	If yes, give full and co	omplete information re	elating thereto:				
		1 Old Custodian	2 New Custoo	lian	3 Date of Change	4 Reason	
17.5	authority to make inv	estment decisions on	stment advisors, investm behalf of the reporting er e access to the investmer	ntity. For ass	ets that are managed	cluding individuals that have the d internally by employees of the	
	N	1 Name of Firm or Indivi	dual		2 Affiliat	ion	
	Mesirow Financial		ent, Incl				
			i				
7.509			ole for Question 17.5, do a than 10% of the reporting			vith the reporting entity	Yes [ X ] No [ ]
7.509			eporting entity (i.e., desig aggregate to more than 5				Yes [ X ] No [ ]
17.6	For those firms or inc	lividuals listed in the t	able for 17.5 with an affili	ation code o	f "A" (affiliated) or "U	" (unaffiliated), provide the infor	mation for the table below.
	1 Central Regis Depository N		2 Name of Firm or Individual		3 Legal Entity entifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
	11111135		v Financial Investment ment, Inc	. IWFK35GSRK	L20LE5C129	SEC	DS
18.1 18.2	If no, list exceptions:					alysis Office been followed?	
19.	By self-designating 5  Documentation a. PL security is b. Issuer or oblic c. The insurer h	GI securities, the report of necessary to perment on available.  Good is current on all colors an actual expectations.	orting entity is certifying the it a full credit analysis of contracted interest and printion of ultimate payment of	ne following of the security of ncipal payme of all contract	elements for each se does not exist or an I ents. ted interest and princ	If-designated 5GI security: NAIC CRP credit rating for an F	E or
20.	By self-designating P  a. The security b. The reporting The NAIC De c. shown on a c	PLGI securities, the re was purchased prior to pentity is holding capi esignation was derive current private letter ra	porting entity is certifying to January 1, 2018. tal commensurate with the from the credit rating a	the following e NAIC Desi ssigned by a nd available	gnation reported for In NAIC CRP in its left for examination by s	elf-designated PLGI security: the security. egal capacity as a NRSRO which state insurance regulators.	
				•	•		Yes [ ] No [X]

### **GENERAL INTERROGATORIES**

- 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 en	ntity is a member	r of a pooling ar	rangement, did	d the agreement	or the reportir	ng entity's partic	ipation change	?	Yes [ ]	No [	NA [X]
	If yes, attach an e	explanation.										
2.	Has the reporting from any loss that	entity reinsured t may occur on t	l any risk with a the risk, or porti	ny other report on thereof, rein	ing entity and agnsured?	reed to releas	se such entity fro	om liability, in w	hole or in part,	Υ	es [	No [X]
	If yes, attach an e	explanation.										
3.1	Have any of the re	eporting entity's	primary reinsur	rance contracts	been canceled	?				Y	es [	No [X]
3.2	If yes, give full an	d complete infor	rmation thereto.									
4.1	Are any of the liab											
	Annual Statemen greater than zero									Υ	es [	No [X]
4.2	If yes, complete the	ne following sch	edule:									
					TOTAL DI	SCOUNT		DIS	COUNT TAKEN	DURING PER	RIOD	
	1	2 Maximum	3 Discount	4 Unpaid	5 Unpaid	6	7	8 Unpaid	9 Unpaid	10		11
L	ine of Business	Interest	Rate	Losses	LAE	IBNR	TOTAL	Losses	LAE	IBNR	Т	OTAL
			TOTAL									
5.	Operating Percen	ntages:										
	5.1 A&H lo	oss percent										%
	5.2 A&H c	ost containment	percent									%
	5.3 A&H e	xpense percent	excluding cost	containment ex	rpenses							%
6.1	Do you act as a c	ustodian for hea	alth savings acc	ounts?						Υ	es [ ]	No [X]
6.2	If yes, please pro	vide the amount	t of custodial fur	nds held as of t	the reporting dat	e			\$_			
6.3	Do you act as an	administrator fo	r health savings	s accounts?						Υ	es [ ]	No [X]
6.4	If yes, please pro	vide the balance	e of the funds a	dministered as	of the reporting	date			\$_			
7.	Is the reporting er	ntity licensed or	chartered, regis	stered, qualified	d, eligible or writ	ing business ir	n at least two sta	ates?		Υ	es [X]	No [ ]
7.1	If no, does the re								state of domicile	Υ	es [X]	No [ ]

### **SCHEDULE F - CEDED REINSURANCE**

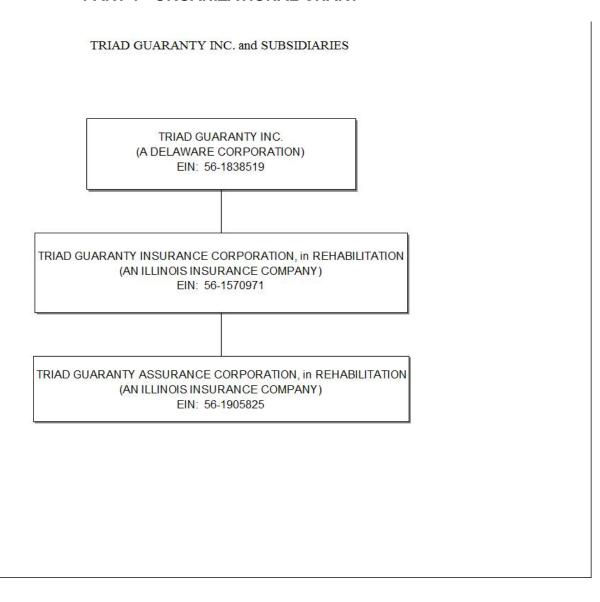
		Showing All Ne	Showing All New Reinsurers - Current Year to Date							
1 NAIC Company Code	2	3	4	5	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating				
Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	(1 through 6)	Reinsurer Rating				
		NON								
		11911								
				-						
				†						

ဗ

### **SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

1. Alabar 2. Alaska 3. Arizon 4. Arkans 5. Califor 6. Colora 7. Conne 8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentuc 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	States, etc.           rama         AL           ka         AK           ona         AZ           sinsas         AR           fornia         CA           orado         CO           enecticut         CT           connecticut         CT           da         FL           rapia         GA           sia         IA           sass         KS           tucky         KY           siana         IA           siana         LA           ne         ME           yland         MD           sachusetts         MA           nigan         MI           nigan         MI	N N N N N N N N N N N N N N N N N N N	Direct Premi 2 Current Year To Date	ums Written  3  Prior Year To Date	Direct Losses Paid ( 4 Current Year To Date	Deducting Salvage) 5 Prior Year To Date	Direct Los 6 Current Year To Date	ses Unpaid 7 Prior Year To Date
1. Alabar 2. Alaska 3. Arizon 4. Arkans 5. Califor 6. Colora 7. Conne 8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	ama         AL           ka         AK           bona         AZ           unsas         AR           fornia         CA           orrado         CO           necticut         CT           tware         DE           Columbia         DC           da         FL           rgia         GA           raii         HI           o         ID           sis         IL           ana         IN           i         IA           sass         KS           tucky         KY           siana         LA           ne         ME           yland         MD           sachusetts         MA           nigan         MI	Status (a)	Current Year	Prior Year	Current Year	Prior Year	Current Year	
1. Alabar 2. Alaska 3. Arizon 4. Arkans 5. Califor 6. Colora 7. Conne 8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New F 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	ama         AL           ka         AK           bona         AZ           unsas         AR           fornia         CA           orrado         CO           necticut         CT           tware         DE           Columbia         DC           da         FL           rgia         GA           raii         HI           o         ID           sis         IL           ana         IN           i         IA           sass         KS           tucky         KY           siana         LA           ne         ME           yland         MD           sachusetts         MA           nigan         MI	N N N N N N N N N N N N N N N N N N N	To Date	To Date	To Date	To Date	To Date	To Date
2. Alaska 3. Arizon 4. Arkans 5. Califor 6. Colora 7. Conne 8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentuc 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	ka         AK           bona         AZ           cona         AZ           sinsas         AR           fornia         CA           corriado         CO           necticut         CT           tware         DE           Columbia         DC           da         FL           rgia         GA           ratii         HI           o         ID           sis         IL           ana         IN           i         IA           sass         KS           tucky         KY           siana         LA           ne         ME           yland         MD           sachusetts         MA           nigan         MI	N N N N N N N N N N N N N N N N N N N						
3. Arizon 4. Arkans 5. Califor 6. Colora 7. Conne 8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentuc 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New F 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	ona         AZ           unsas         AR           fornia         CA           orrado         CO           necticut         CT           loware         DE           Columbia         DC           da         FL           rgia         GA           raii         HI           o         ID           sis         IL           ana         IN           i         IA           ssas         KS           tucky         KY           siana         LA           ne         ME           yland         MD           sachusetts         MA           nigan         MI	N N N N N N N N N N N N N N N N N N N						
4. Arkans 5. Califor 6. Colora 7. Conne 8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New F 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	Insas         AR           Fornia         CA           Jorado         CO           Inecticut         CT           Inecticut         CT           Inecticut         CT           Inecticut         CT           Inecticut         CT           Inecticut         DE           Columbia         DE           Inecticut         Inecticut           Inecticut         Inecticut	N N N N N N N N N N N N N N N N N N N						
5. Califor 6. Colora 7. Conne 8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New W 33. New W 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	fornia CA	N N N N N N N N N N N N N N N N N N N						
6. Colora 7. Conne 8. Delaw 9. Dist. Co 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	orado         CO           necticut         CT           necticut         CT           necticut         CT           necticut         CT           columbia         DE           da         FL           rgia         GA           raii         HI           ro         ID           ris         IL           rana         IN           rana         IN           rana         IA           seas         KS           tucky         KY           siana         LA           ne         ME           yland         MD           sachusetts         MA           nigan         MI	N N N N N N N N N N N N N N N N N N N						
7. Conne 8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New F 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	necticut CT. ware DE. Columbia DC  da FL. rgia GA raii HI. o ID. is IL. ana IN. a IA. sas KS. tucky KY. siana LA. ne ME yland MD sachusetts MA higgan MI.	N N N N N N N N N N N N N N N N N N N						
8. Delaw 9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	Inware         DE           Columbia         DC           da         FL           Ingia         GA           Ingia         HI           Ingia         Ingia	N N N N N N N N N N N N N N N N N N N						
9. Dist. C 10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Misson 27. Monta 28. Nebra: 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	Columbia         DC           da         FL           rgia         GA           raii         HI           o         ID           sis         IL           ana         IN           i         IA           sas         KS           tucky         KY           siana         LA           ne         ME           yland         MD           sachusetts         MA           nigan         MI	N N N N N N N N N N N N N N N N N N N						
10. Florida 11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	da         FL           rgia         GA           raii         HI.           o.         ID.           sis         IL.           ana         IN.           i         IA.           sas         KS.           tucky         KY.           siana         LA.           ne         ME           yland         MD           sachusetts         MA           nigan         MI	N N N N N N N N N N N N N N N N N N N						
11. Georg 12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missoi 27. Monta 28. Nebra: 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	rgia GA raii HI.  o. ID.  is IL.  ana IN.  a. IA.  sas KS. tucky KY. siana LA.  ne ME yland MD sachusetts MA higan MI.	N						
12. Hawai 13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentuu 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missoi 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	raii HI.  o ID.  is IL.  ana IN.  i IA.  sas KS.  tucky KY.  siana LA.  ne ME  yland MD  sachusetts MA  nigan MI	N Q L N N N N N N N N N N N N N N N N N						
13. Idaho. 14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	0.         ID.           sis         IL.           ana         IN.           i.         IA.           ssas         KS.           tucky         KY.           siana         LA.           ne         ME           yland         MD           sachusetts         MA           nigan         MI	Q L N N O N N N N N N N N N N N N N N N N						
14. Illinois 15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minnei 25. Missis 26. Missod 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	sis         IL           ana         IN.           in         IA.           sas         KS.           tucky         KY.           siana         LA.           ne         ME           yland         MD           sachusetts         MA           nigan         MI	L						1
15. Indian. 16. Iowa 17. Kansa 18. Kentud 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Missod 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	ana IN.  a IA.  sas KS.  tucky KY.  siana LA.  ne ME  yland MD  sachusetts MA  nigan MI	N Q N N N N N N N N N N N N N N N N N N						
16. Iowa 17. Kansa 18. Kentuu 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misso 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	i IA	N Q N N N N N N N N N N N N N N N N N N						
17. Kansa 18. Kentuu 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	sas         KS.           tucky         KY.           siana         LA.           ne         ME           yland         MD           sachusetts         MA           nigan         MI	Q						
18. Kentuu 19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	tucky KY. siana LA. ne ME yland MD sachusetts MA nigan MI	NNNNNN						
19. Louisia 20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	siana LA ne ME yland MD sachusetts MA nigan MI	NNNNN	ļ					
20. Maine 21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	ne ME yland MD sachusetts MA nigan MI	NNN			-			
21. Maryla 22. Massa 23. Michig 24. Minne 25. Missis 26. Misson 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	ylandMD sachusettsMA niganMI	N						
22. Massa 23. Michig 24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New F 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah	sachusettsMA nigan MI.		<del> </del>		-		<u> </u>	<del> </del>
23. Michig 24. Minne: 25. Missis 26. Missor 27. Monta 28. Nebra: 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	nigan MI							
24. Minne 25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaha 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	-				+			
25. Missis 26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New F 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaha 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	nesota MAN	1						
26. Missoi 27. Monta 28. Nebra 29. Nevad 30. New F 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo		1						
27. Monta 28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaha 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	sissippi MS	1						
28. Nebra 29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaha 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	souri MO	i						
29. Nevad 30. New H 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	tana MT							
30. New F 31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaha 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	raskaNE	N						
31. New J 32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	ada NV							
32. New M 33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	HampshireNH	N						
33. New Y 34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	Jersey NJ.	N						
34. No. Ca 35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	Mexico NM	N						
35. No. Da 36. Ohio 37. Oklaho 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	YorkNY	QQ						
36. Ohio 37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	Carolina NC	N						
37. Oklahd 38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah	DakotaND	N						
38. Orego 39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	OH	QQ						
39. Penns 40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	homaOK	N						
40. Rhode 41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	gonOR	N						
41. So. Ca 42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	nsylvaniaPA	N						
42. So. Da 43. Tenne 44. Texas 45. Utah 46. Vermo	de IslandRl	N						
43. Tenne 44. Texas 45. Utah 46. Vermo	Carolina SC	N						
44. Texas 45. Utah 46. Vermo	Dakota SD.	N						
44. Texas 45. Utah 46. Vermo	nessee TN.	N						
46. Vermo	as TX.	1						
46. Vermo	1 UT.	1						
	nontVT.	i						
	iniaVA.	N						
	hington WA	1						
	t VirginiaWV							
I	consinWI.	1						
	ming WY							
1	erican Samoa AS.	I						
i	m GU	i						
1	rto RicoPR							
	Virgin IslandsVI							
I	v g 10101100 VI							
i	hern Mariana Islands MP							
	=							
59. Totals	hern Mariana Islands MP ada CA	XXX						
DETA	hern Mariana Islands. MP adaCA regate Other Alien OT				1			
58001	hern Mariana Islands MP ada		ļ		-		ļ	
58002 58003.	hern Mariana Islands. MP ada	XXX					<b></b>	
	hern Mariana Islands MP ada	XXX	-		†			
	hern Mariana Islands. MP ada CA regate Other Alien OT. als FAILS OF WRITE-INS		, '					
	hern Mariana Islands. MP ada	XXX			-			ļ
	hern Mariana Islands. MP ada	XXXXXXXXXXXX				l		
above	hern Mariana Islands. MP ada	XXXXXXXXXXXX						

# 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

STATEMENT AS OF JUNE 30, 2020 OF THE TRIAD GUARANTY ASSURANCE CORPORATION, IN REHABILITATION

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 Code	Group Name	Company Code	/ ID Number	Federal RSSD	CIK	Traded (U.S. or International)	Parent, Subsidiaries or Affiliates	Domiciliary Location	Reporting Entity	Directly Controlled by (Name of Entity/Person)	Attorney-in-Fact, Influence, Other)	Provide	Ultimate Controlling Entity(ies)/Person(s)		*
Code	Group Name	Code	Number	INOOD	OIIC	international)	Of Affiliates	Location	Littly	(Name of Emity/Ferson)	initidence, Other)		WILLIAM T. RATLIFF	(1/14)	
00421	COLLATERAL HOLDINGS, LTD	. 00000	56-1838519		0000911631	OTCBB.	TRIAD GUARANTY INC	USA	UDP	COLLATERALHOLDINGS, LTD	OWNERSHIP	16.9	AND FAMILY	N	1
00404	0011475041 1101011100 170	0.4050	50 4570074				TRIAD GUARANTY INSUURANCE	1104	DE	TRUAD QUADANTY INC	OWNEDOLLID	400.0	WILLIAM T. RATLIFF		
00421	COLLATERAL HOLDINGS, LTD	24350	. 56-1570971				CORPORATION, IN REHABILITATION	USA	RE	TRIAD GUARANTY INCTRIAD GUARANTY INSUURANCE	OWNERSHIP	100.0	AND FAMILY	N	
							TRIAD GUARANTY ASSUURANCE			CORPORATION, IN			WILLIAM T. RATLIFF		
00421	COLLATERAL HOLDINGS, LTD	10217	. 56 - 1905825				CORPORATION, IN REHABILITATION	USA	DS	REHABILITATION	OWNERSHIP	100.0	AND FAMILY	N	
			-												
		1		l											
				l											

Asterisk	Explanation

### **PART 1 - LOSS EXPERIENCE**

			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		1					
15.	Other accident and health		1					
16.	Workers' compensation							
17.1	Other liability occurrence		1					
17.1	Other liability claims made							
17.2	Evene Workers' Componentian							
17.3	Draducta liability accurrence							
10.1	Other liability-claims made.  Excess Workers' Compensation.  Products liability-occurrence.  Products liability-claims made.  2 Private passenger auto liability							
10.2	2 Deits de la constant de l'abilité							
19.1,19.	4. Commencial autoliability							
	4 Commercial auto liability		······					
21.	Auto physical damage							
22.	Aircraft (all perils)							
23.	Fidelity	1						
24.	Surety							
26.	Burglary and theft							
27.	Boiler and machinery							
28.	Credit							
29.	International							
30.	Warranty							
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX			
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX			
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX			
34.	Aggregate write-ins for other lines of business							
35.	TOTALS							
DE	TAILS OF WRITE-INS							
402								
403								
	m. of remaining write-ins for Line 34 from overflow page							
	als (Lines 3401 through 3403 plus 3498) (Line 34)		1					

### PART 2 - DIRECT PREMIUMS WRITTEN

	Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year 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			
2.	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			
19.1,19.2	Private passenger auto liability			
19.3,19.4	Products liability-occurrence. Products liability-claims made. Private passenger auto liability Commercial auto liability			
Z1.	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	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	ХХХ	XXX
34.	Aggregate write-ins for other lines of business			
35.	TOTALS			
	AILS OF WRITE-INS			
03				
98. Sum	. of remaining write-ins for Line 34 from overflow page			
99. Tota	ls (Lines 3401 through 3403 plus 3498) (Line 34)			

### PART 3 (000 omitted)

#### LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

LUSS AND LUSS ADJUSTMENT EXPENSE RESERVES SCREDULE													
	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	400		400	20		20	341			341	(40)		(40
2. 2018	187	2	189	28		28	145			145	(14)	(2)	(16
3. Subtotals 2018 + prior	587	2	589	48		48	486			486	(54)	(2)	(56
4. 2019	144	22	166	6		6	91		6	97	(47)	(16)	(63
5. Subtotals 2019 + prior	731	25	755	54		54	577		6	582	(100)	(19)	(119
6. 2020	xxx	xxx	xxx	xxx			xxx	229	51	279	xxx	xxx	XXX
7. Totals	731	25	755	54		54	577	229	56	862	(100)	(19)	(119
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. (13.7)	2. (77.0)	3. (15.8 Col. 13, Line 7
													Line 8

#### 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?	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
Book/adjusted carrying value, December 31 of prior year		
Cost of acquired:		
2.1 Actual cost at time of acquisition.		
2.2 Additional investment made after acquisition		
Current year change in encumbrances		
4. Total gain (loss) on disposals		
Deduct amounts received on disposals		
Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other-than-temporary impairment recognized		
Deduct current year's depreciation		
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		
	Cost of acquired:		
	2.1 Actual cost at time of acquisition		<b>.</b>
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other.  Accrual of discount.  Unrealized valuation increase (decrease).  Total gain (loss) on disposals.		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		<b></b>
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  Deduct current year's other-than-temporary impairment recognized		
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
		Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
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.		
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		
Deduct amortization of premium and depreciation		
Total foreign exchange change in book/adjusted carrying value		
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** Prior Year Ended Year To Date December 31 Book/adjusted carrying value of bonds and stocks, December 31 of prior year Cost of bonds and stocks acquired .11,442,233 .11,088,587 .1,366,293 .....20,380 3. Accrual of discount... Unrealized valuation increase (decrease). Total gain (loss) on disposals..... .....7,356 .1,393,891 .....19,576 .....18 ,529 .3 ,259 ,747 Deduct consideration for bonds and stocks disposed of Deduct amortization of premium. .38,461 Total foreign exchange change in book/adjusted carrying value..... Deduct current year's other-than-temporary impairment recognized. Total investment income recognized as a result of prepayment penalties and/or acceleration fees. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)..... 10. 11. 12. .11,411,328 11,442,233 Deduct total nonadmitted amounts Statement value at end of current period (Line 11 minus Line 12) 11,411,328 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

				ferred Stock by NAIC Design				
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
NAIC Designation	Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	mila Quartei	Prior real
BONDS								
1. NAIC 1 (a)	8,496,955	409,876	580 , 248	(3,007)	8,496,955	8,323,576		8,647,593
2. NAIC 2 (a)	2,633,527	710,813	253,074	(3,514)	2,633,527	3,087,752		2,794,638
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	11,130,482	1,120,689	833,322	(6,521)	11,130,482	11,411,328		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	11,130,482	1,120,689	833,322	(6,521)	11,130,482	11,411,328		11,442,231

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

Schedule DA - Part 1

## **NONE**

Schedule DA - Verification

**NONE** 

Schedule DB - Part A - Verification

**NONE** 

Schedule DB - Part B - Verification

**NONE** 

Schedule DB - Part C - Section 1

**NONE** 

Schedule DB - Part C - Section 2

**NONE** 

Schedule DB - Verification

**NONE** 

### **SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year	216,682	454,971
Cost of cash equivalents acquired	460,992	651,054
Accrual of discount		
Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
Deduct consideration received on disposals	461,466	889,343
7. Deduct amortization of premium		
Total foreign exchange change in book/adjusted carrying value		
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)	216,208	216,682
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	216,208	216,682

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

**NONE** 

Schedule B - Part 3

**NONE** 

Schedule BA - Part 2

**NONE** 

Schedule BA - Part 3

**NONE** 

### **SCHEDULE D - PART 3**

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

			Shov	All Long-Term Bonds and Stock Acquired During the Curre					
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. Gover									
Bonds - All Other G									
	, Territories and Possessions								
	al Subdivisions of States, Territories and Possessions								
		anteed Obligations of	of Agencies and Au	thorities of Governments and Their Political Subdivisions					
	nd Miscellaneous (Unaffiliated)								
	AON PLC 3.875 15/12/25	D	05/18/2020	Barclays Capital BARCLAYS CAPITAL INC.	XXX	163,748	150,000	2,503	
14913R - 2B - 2 30231G - BL - 5	CATERPILLAR FINL SERVICE 0.95 13/05/22 EXXON MOBIL CORPORATION 1.571 15/04/23		06/11/2020 04/16/2020	GOLDMAN SACHS & COMPANY GOLDMAN	XXX		150,000	119	1FE1FE
437076-AZ-5	HOME DEPOT INC 2.7 01/04/23		06/11/2020	MARKETAXESS EUROPE LIMITED	XXX	158,435	150.000	22	1FE
49456B-AM-3	KINDER MORGAN INC 3.15 15/01/23.		06/11/2020	MARKETAXESS EUROPE LIMITED	XXX	104,425	100,000	1.313	
527288-BE-3	JEFFERIES FIN GROUP INC 5.5 18/10/23		05/11/2020	ROBERT W. BAIRD & CO. INCORPORATED	XXX	63.200	60.000	229	
548661-DT-1	LOWE'S COS INC 4 15/04/25		04/16/2020	MARKETAXESS CORP.	XXX	222,176	200,000	533	2FE
98956P-AQ-5	ZIMMER BIOMET HOLDINGS 3.7 19/03/23.		05/14/2020	BARCLAYS CAPITAL.	XXX	157,265	150,000	910	2FE
3899999 - Bond	ds - Industrial and Miscellaneous (Unaffiliated)					1,120,690	1,060,000	6,462	XXX
Bonds - Hybrid Seci									
	osidiaries and Affiliates								
Bonds - SVO Identif	fied Funds								
Bonds - Unaffiliated	Bank Loans								
8399997 - Bond	ds - Subtotals - Bonds - Part 3					1,120,690	1,060,000	6,462	XXX
8399999 - Bond	ds - Subtotals - Bonds					1,120,690	1,060,000	6,462	XXX
Preferred Stocks - In	ndustrial and Miscellaneous (Unaffiliated) Perpetual Pre	eferred							•
Preferred Stocks - In	ndustrial and Miscellaneous (Unaffiliated) Redeemable	Preferred							
Preferred Stocks - F	Parent, Subsidiaries and Affiliates Perpetual Preferred								
Preferred Stocks - F	Parent, Subsidiaries and Affiliates Redeemable Preferre	ed							
Common Stocks - Ir	ndustrial and Miscellaneous (Unaffiliated) Publicly Trade	ed							
	ndustrial and Miscellaneous (Unaffiliated) Other								
	Parent, Subsidiaries, and Affiliates Publicly Traded								
	Parent, Subsidiaries and Affiliates Other								
Common Stocks - M	,								
	Init Investment Trusts								
Common Stocks - C									
9999999 Totals	nood End : dildo					1.120.690	XXX	6.462	XXX
COCCOCC TOTALS						1,120,000	AAA	0,402	1 ////

### **SCHEDULE D - PART 4**

					Sho	w All Long-T	erm Bonds a	nd Stock Sold	l. Redeemed	or Otherwise	Disposed of	During the C	urrent Quart	er						
1	2 3	3 4	5	6	7	8	9	10	,		ook/Adjusted Ca			16	17	18	19	20	21	22
'		<u> </u>	ū	ľ	·	ŭ	ľ	l '*	11	12	13	14	15	1 · · · ·				-	l	
		,								12	10	'7	'5							1
	l lì										Current Year's			Book/				Bond		NAIC
									Unrealized		Other Than	Total Change	Total Foreign	Adjusted	Foreign			Interest/Stock	Stated	Designation
CUSIP		íl l		Number of				Prior Year	Valuation	Current Year's	Temporary	in	Exchange		Exchange Gain	Realized Gain	Total Gain	Dividends	Contractual	and
Identi-		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		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
Bonds - U.S.	Governments	•							,				•						•	
Bonds - All C	Other Governments																			
Bonds - U.S.	States, Territories and Poss	essions																		
	Political Subdivisions of Sta		and Possessions																	
	Special Revenue and Speci			bligations of A	gencies and Auth	horities of Gove	rnments and The	eir Political Subdi	visions											
	FANNIE MAE 2.5 POOL ID	1	and an Hon Guaramood C	I	Ĭ			I Cintidal Caba	11010110											
3140X4-NT-9.	FM1301	06/01/2020	MBS PAYDOWN	XXX	3,924	3,924	3,987	3,983		(7)		(7)		3,924				41	03/01/2029.	
	FANNIE MAE 4.5 POOL ID			l								l						l	l	1 .
31412P-CF-6.		06/01/2020		XXX	1,403	1,403	1,509	1,476		(8)		(8)		1,403				28	03/01/2029.	
3199999 -	Bonds - U.S. Special Revenu												I						I	1
		nd Authorities o	f Governments and Their F	Political	5 00=	E 007	F 100			,		,	1	F 007					VVV	VVV
I	Subdivisions				5,327	5,327	5,496	5,459		(15)		(15)		5,327				69	ХХХ	XXX
Bonds - Indu	strial and Miscellaneous (Un	aπiliated)								1						1				
	GENERAL DYNAMICS CORP 2.875 11/05/20	05/11/2020	MATURITY	XXX	125,000	125.000	125.064	125.014		(14)		(14)	1	125.000				1,797	05/11/2020.	1FE
	GENERAL ELECTRIC CO 2.7	03/11/2020	MATORTI		123,000	125,000	123,004	123,014		14)		1( 14)		123,000					03/11/2020.	· ······
369604-BD-4.	09/10/22	04/23/2020	NORTHERN TRUST	XXX	66.788	65.000		63.051		218		218		63.269		3.519	3.519	946	10/09/2022.	2FE
i i	GENERAL ELECTRIC CO 4.65	i i			, , , , ,		· ·	i i		İ										
36962G-5J-9.		05/20/2020	CORP ACTION	XXX	105,250	100,000	110,323	104,273		(940)		(940)		103,333		1,917	1,917	2,738	10/17/2021.	2FE
437076-BQ-4.	HOME DEPOT INC 1.8	06/05/2020	MATURITY	XXX	000 000	000 000	200,278	200 045		(45)		(45)		200 000				4 000	00/05/0000	1 455
43/U/0-BQ-4.	05/06/20	06/05/2020	MATURITYSECURITY CALLED BY ISSUER	XXX	200,000	200,000	200,278	200,045		(45)		(45)		200,000				1,800	06/05/2020.	1FE
902674-XF-2	UBS AG LONDON 2.2 08/06/20,	005/11/2020		XXX	250,000	250.000	247 . 430	249,521		400		400		249.921		79	79	2,292	06/08/2020.	1FE
002014 At 2	VERIZON COMMUNICATIONS 4.6		SECURITY CALLED BY ISSUER		200,000	200,000		240,021		1		1		240,021					007 007 2020.	
92343V - AX - 2.	01/04/21	06/29/2020	at 100.000	XXX	87,671	85,000		87 , 455		(983)		(983)				(1,472)	(1,472)	5,581	04/01/2021	2FE
3899999 -	Bonds - Industrial and Misce	llaneous (Unaff	iliated)		834,709	825,000	833,690	829,359		(1,364)		(1,364)		827,995		4,043	4,043	15,154	XXX	XXX
Bonds - Hybi	rid Securities	•	•		•															
Bonds - Pare	ent, Subsidiaries, and Affiliate	es																		
Bonds - SVC	Identified Funds																			
Bonds - Una	ffiliated Bank Loans																			
8399997 -	Bonds - Subtotals - Bonds -	Part 4			840,036	830,327	839,186	834,818		(1,379)		(1,379)		833,322		4,043	4,043	15,223	XXX	XXX
	Bonds - Subtotals - Bonds				840,036	830,327	839,186	834,818		(1,379)		(1,379)		833,322		4,043	4,043	15,223	XXX	XXX
	ocks - Industrial and Miscella	neous (Unaffilia	ited) Perpetual Preferred		, , , , ,	,		,		. , , , , , , ,		. , , , , , , , ,					, ,,,,,	,	•	•
	ocks - Industrial and Miscella			ed																
Preferred Sto	ocks - Parent, Subsidiaries a	nd Affiliates Per	petual Preferred																	
	ocks - Parent, Subsidiaries a																			
	ocks - Industrial and Miscella																			
	ocks - Industrial and Miscella																			
	ocks - Parent. Subsidiaries. a																			
	ocks - Parent, Subsidiaries ar																			
	ock - Mutual Funds																			
	ocks - Unit Investment Trusts																			
	ocks - Closed-End Funds																			
30	3.0000 2.10 1 0.100			1	I							I	I					I	I	I
										<b> </b>		ļ	ļ						ļ	
										<b></b>		<b>†</b>	ļ	ļ				·	ļ	· <del> </del>
[				1	·			·····		<b>†</b>		t	ł	+			····	+	t	+
9999999 T	otolo			4	840.036	VVV	839 , 186	834,818		(1.379)		(4.070)		833,322		4.043	4,043	15,223	vvv	vvv
	UldiS				040,030	XXX	039,180	0.04,618		(1,3/9)		(1,379)	L	033,322		4,043	4,043	10,223	XXX	XXX

Schedule DB - Part A - Section 1

**NONE** 

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

**NONE** 

Schedule DB - Part E

**NONE** 

Schedule DL - Part 1

**NONE** 

Schedule DL - Part 2

**NONE** 

### **SCHEDULE E - PART 1 - CASH**

Month End Depository Balances											
1 Depository	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9			
	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7 Second Month	8	*			
Open Depositories			I			ī					
Branch Banking and Trust	XXX	XXX			206,216	186,354 424	183,188 866	XXX			
0199999 Total Open Depositories	XXX	XXX			207,737	186,778	184,054	XXX			
0399999 Total Cash on Deposit	XXX	XXX			207,737	186,778	184,054	XXX			
0499999 Cash in Company's Office 0599999 Total	XXX	XXX	XXX	XXX	207,737	186,778	184,054	XXX XXX			

### **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

Show Investments Owned End of Current Quarter											
1	2	3	4	5	6	7	8	9			
			Date	Rate of	Maturity	Book/Adjusted	Amount of Interest	Amount Received			
CUSIP	Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year			
	nments - Issuer Obligations	Code	/ toquireu	merest	Duic	Carrying value	Duc a recrue	During Tear			
	nments - Residential Mortgage-Backed Securities										
	nments - Residential Mortgage-backed Securities										
	nments – Other Loan-Backed and Structured Securities										
Bonds - All Other G	Governments – Issuer Obligations										
Bonds - All Other G	Governments – Residential Mortgage-Backed Securities										
	Governments – Commercial Mortgage-Backed Securities										
Bonds - All Other G	Governments – Other Loan-Backed and Structured Securities										
Bonds - U.S. States	s, Territories and Possessions (Direct and Guaranteed) - Issuer Obligations										
Bonds - U.S. States	s, Territories and Possessions (Direct and Guaranteed) - Residential Mortgage-Backed Se	curities									
	Territories and Possessions (Direct and Guaranteed) - Commercial Mortgage-Backed Secu										
	s, Territories and Possessions (Direct and Guaranteed) – Other Loan-Backed and Structur										
	ical Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Issu										
	ical Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Resi		Securities								
	ical Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - Comm										
	ical Subdivisions of States. Territories and Possessions (Direct and Guaranteed) - Othe										
	al Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Age			ir Dolitical Subdivisions	couer Obligations						
	al Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Age					acked Coourities					
Bonds - U.S. Specia	al Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Age	encies and Authorities of	Governments and The	IF POLITICAL SUBDIVISIONS - C	ommercial wortgage-Bac	oked Securities					
	al Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Age	incres and authorities of	Governments and the	ir Political Subdivisions - 0	ther Loan-Backed and S	Structured Securities					
	and Miscellaneous (Unaffiliated) - Issuer Obligations										
Bonds - Industrial	and Miscellaneous (Unaffiliated) - Residential Mortgage-Backed Securities										
Bonds - Industrial	and Miscellaneous (Unaffiliated) - Commercial Mortgage-Backed Securities										
	and Miscellaneous (Unaffiliated) – Other Loan-Backed and Structured Securities										
	urities – Issuer Obligations										
	urities – Residential Mortgage-Backed Securities										
	urities – Commercial Mortgage-Backed Securities										
	urities – Other Loan-Backed and Structured Securities										
	bsidiaries and Affiliates Bonds – Issuer Obligations										
Bonds - Parent, Sub	bsidiaries and Affiliates Bonds – Residential Mortgage-Backed Securities										
Bonds - Parent, Sub	bsidiaries and Affiliates Bonds – Commercial Mortgage-Backed Securities										
Bonds - Parent, Sub	bsidiaries and Affiliates Bonds – Other Loan-Backed and Structured Securities										
Bonds - Parent, Sub	bsidiaries and Affiliates Bonds – Affiliated Bank Loans – Issued										
Bonds - Parent Sub	bsidiaries and Affiliates Bonds - Affiliated Bank Loans - Acquired										
	fied Funds - Exchange Traded Funds - as Identified by the SVO										
	fied Funds - Bond Mutual Funds - as Identified by the SVO										
	ed Bank Loans - Unaffiliated Bank Loans - Issued										
	ed Bank Loans - Unaffiliated Bank Loans - Acquired										
Sweep Accounts	od bank Loans - onarrillatod bank Loans - noquillod										
	t Mutual Funds - as Identified by SVO										
	I NORTHERN INSTITUTIONAL TREASURY PORTFOL		02/29/2020		T XXX T	216,206	1 25	1,595			
	: Money Market Mutual Funds - as Identified by SVO					-,					
All Other Money Mar						216,206	25	1,098			
Other Cash Equivale											
8899999 Total C	Cash Equivalents					216,206	25	1,595			