

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

### QUARTERLY STATEMENT

AS OF JUNE 30, 2018 OF THE CONDITION AND AFFAIRS OF THE

### MGIC INDEMNITY CORPORATION

	NAIC Group Code(Currer		y Code <u>18740</u>	Employer's ID Number _	39-0916088		
Organized under the Law		, , , ,	, State of Domicil	le or Port of Entry	WI		
Country of Domicile		United Sta	tes of America				
Incorporated/Organized _	11/15	/1956	Commenced	Business	02/15/1957		
Statutory Home Office		Kilbourn Avenue		Milwaukee ,	WI, US 53202		
	(Street	and Number)		(City or Town, State,	Country and Zip Code)		
Main Administrative Office		250 East K	ilbourn Avenue				
			and Number)				
	Milwaukee , WI, US 53				58-9900		
(C	ty or Town, State, Country ar	nd Zip Code)		(Area Code) (Te	elephone Number)		
Mail Address	P.O. Bo	x 756	,	Milwaukee,	WI, US 53201		
	(Street and Numb	er or P.O. Box)		(City or Town, State,	Country and Zip Code)		
Primary Location of Book	s and Records	250 East I	Kilbourn Avenue				
		(Street	and Number)				
	Milwaukee , WI, US 53		,	800-5	58-9900		
(Ci	ty or Town, State, Country ar	nd Zip Code)		(Area Code) (Te	elephone Number)		
Internet Website Address		www.	MGIC.com				
Statutory Statement Cont	act	Heidi Ann Heyrman		800	)-558-9900-2646		
olationy olationioni ooni		(Name)			e) (Telephone Number)		
	govreg_alerts@mgic.c	. ,			847-6959		
	(E-mail Address)				Number)		
		OF	FICERS				
President & Ch Executive Offic		atrick Sinks	Vice President & 0	Controller	Julie Kay Sperber		
Executive Vice President Secreta		ey Harold Lane					
1			THER				
	nes, Executive Vice Presiden /liosi, Executive Vice Preside		ey, Executive Vice Pre	esident Timothy	James Mattke, Executive Vice President		
Salvalore Antonino P	Allosi, Executive vice Preside	<u></u>					
		DIRECTORS	OR TRUSTEES				
	i Ann Heyrman		/ Harold Lane		Stephen Crail Mackey		
	ny James Mattke	Lisa Ma	isa Marie Pendergast Patrick Sinks				
Juli	e Kay Sperber						

State of Wisconsin SS: County of Milwaukee

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions thereform for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement. to the encl ed statement.

Patrick Sinks

President & Chief Executive Officer

Jeffrey Harold Lane Executive Vice President & Secretary

Subscribed and sworn to before me this

8th day of ner

Rosemary G Notary Public My commission expires April 12, 2019

0 De SEMARY GL AYC NOTARL Z STATE °UBLIC OF WISCONS

August, 2018

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- a. Is this an original filing? ... b. If no,
- 1. State the amendment number.

3. Number of pages attached...

Julie Kay Sperber Vice President & Controller

Yes [X] No []

25

2. Date filed

Current Statement Date 4 3 December 31 Net Admitted Assets Prior Year Net Nonadmitted Assets Admitted Assets Assets (Cols. 1 - 2) 144,988,268 144.988.268 139,146,930 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) ..... .280,000 .280,000 5. Cash (\$ .....6,731 ), cash equivalents (\$ ......590,518 ) and short-term investments (\$ .....2,001,068 ) ..... 2 598 317 2 598 317 5 113 543 6. Contract loans (including \$ ..... ..... premium notes) .. Derivatives . 7. 8. Other invested assets ... 9. Receivables for securities ... 10. Securities lending reinvested collateral assets ..... 11. Aggregate write-ins for invested assets ... 12. .147,866,585 .147,866,585 Subtotals, cash and invested assets (Lines 1 to 11) ... 144,260,473 13. Title plants less \$ ..... charged off (for Title insurers only) ..... 14. Investment income due and accrued ..... .....1,404,474 .....1,404,474 ...1,389,883 15 Premiums and considerations: 15.1 Uncollected premiums and agents' balances in the course of collection ...473.310 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: 59.121 59.121 39.469 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 ... 341.766 .2.487.607 .2.342.915 .144.692 200.469 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 ... 480.256 24. Health care (\$ ..... ..... ) and other amounts receivable ..... 25. Aggregate write-ins for other than invested assets ... .....66,488 ...66,488 .46,807 26. Total assets excluding Separate Accounts, Segregated Accounts and .152,659,295 2,342,915 .150,316,380 147,232,433 Protected Cell Accounts (Lines 12 to 25). From Separate Accounts, Segregated Accounts and Protected Cell 27. Accounts. Total (Lines 26 and 27) 152,659,295 2,342,915 150,316,380 147,232,433 28 **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. Miscellaneous receivables 66.488 66.488 46.807 2502. 2503. 2598. Summary of remaining write-ins for Line 25 from overflow page ... 66,488 66,488 46,807 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)

ASSETS

NOTE: We elected to use rounding in reporting amounts in this statement.

# LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Statement Date	2 December 31, Prior Year
1.	Losses (current accident year \$		
2.	Reinsurance payable on paid losses and loss adjustment expenses		····· , ,
3.	Loss adjustment expenses		
4.	Commissions payable, contingent commissions and other similar charges		
5.	Other expenses (excluding taxes, licenses and fees)		
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1	Current federal and foreign income taxes (including \$ on realized capital gains (losses))		
7.2	Net deferred tax liability		
8.	Borrowed money \$ and interest thereon \$		
9.	Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$		
	including warranty reserves of \$ and accrued accident and health experience rating refunds		
	including \$ for medical loss ratio rebate per the Public Health Service Act)		1,967,028
10.	Advance premium		
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders		
12.	Ceded reinsurance premiums payable (net of ceding commissions)		401,505
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 \$		
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		49,856,521
26.	Total liabilities excluding protected cell liabilities (Lines 1 through 25)		54,363,041
27.	Protected cell liabilities		
28.	Total liabilities (Lines 26 and 27)		
29.	Aggregate write-ins for special surplus funds	. , ,	
30.	Common capital stock		
31.	Preferred capital stock		
32.	Aggregate write-ins for other than special surplus funds		
33.	Surplus notes		
34.	Gross paid in and contributed surplus		98 225 792
35.	Unassigned funds (surplus)		
35. 36.	Less treasury stock, at cost:		
30.	36.1		
	36.2 shares preferred (value included in Line 30 \$		
37.	Surplus as regards policyholders (Lines 29 to 35, less 36)		92,869,392
38.	Totals (Page 2, Line 28, Col. 3)	150,316,380	147,232,433
	DETAILS OF WRITE-INS	F1 0F7 F00	40,050,501
2501.	Contingency reserve per Wisconsin Administrative Code Section Insurance 3.09(14)		49,856,521
2502.			
2503.			
2598.	Summary of remaining write-ins for Line 25 from overflow page		40.050.504
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	51,957,520	49,856,521
2901.			
2902.			
2903.			
2998.	Summary of remaining write-ins for Line 29 from overflow page	-+	
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		
3201.		-+	
3202.			
3203.			
1		i l	
3298.	Summary of remaining write-ins for Line 32 from overflow page		

# **STATEMENT OF INCOME**

		1 Current	2 Prior Year	3 Prior Year Ended
		Year to Date	to Date	December 31
	UNDERWRITING INCOME			
	Premiums earned:			
	1.1 Direct (written \$			
	1.2 Assumed (written \$			1 000 000
	1.3 Ceded (written \$			
	DEDUCTIONS:			9, 323, 224
2	Losses incurred (current accident year \$			
	2.1 Direct	(14, 385)	(476 619)	499 844
	2.2 Assumed			
	2.3 Ceded			
	2.4 Net			
3.	Loss adjustment expenses incurred			
4.	Other underwriting expenses incurred			
5.	Aggregate write-ins for underwriting deductions	2,100,998	2,939,382	5,463,004
6.	Total underwriting deductions (Lines 2 through 5)	2,693,706	3,349,225	7,341,199
	Net income of protected cells			
8.	Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)		1,807,350	1,984,025
	INVESTMENT INCOME			
	Net investment income earned			3,043,315
10.	Net realized capital gains (losses) less capital gains tax of \$	(406)		
11.	Net investment gain (loss) (Lines 9 + 10)	1,601,217	1,440,312	2,973,684
	OTHER INCOME			
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered			
	\$(2, 108) )			
13.	Finance and service charges not included in premiums			
14.	Aggregate write-ins for miscellaneous income			
15.	Total other income (Lines 12 through 14)	2,108	2,820	3,464
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal			
	and foreign income taxes (Lines 8 + 11 + 15)	2,534,125	3,250,482	4,961,173
	Dividends to policyholders			
18.	Net income, after dividends to policyholders, after capital gains tax and before all other federal and	0 504 105	2 250 492	
10	foreign income taxes (Line 16 minus Line 17)	2,534,125 492,682		
	Federal and foreign income taxes incurred	,	1,106,733	1,724,558
20.	Net income (Line 18 minus Line 19)(to Line 22)	2,041,443	2,143,749	3,236,615
	CAPITAL AND SURPLUS ACCOUNT	00,000,000	00,004,054	00 004 054
	Surplus as regards policyholders, December 31 prior year	92,869,392	89,924,654	89,924,654
	Net income (from Line 20)		2,143,749	3,236,615
23.	Net transfers (to) from Protected Cell accounts			
	Change in net unrealized capital gains (losses) less capital gains tax of \$			
	Change in net unrealized foreign exchange capital gain (loss)			
26.	Change in net deferred income tax			(1,488,243)
	Change in nonadmitted assets		(144,287)	1, 196, 366
	Change in provision for reinsurance			
	Change in surplus notes			
	Surplus (contributed to) withdrawn from protected cells			
	Cumulative effect of changes in accounting principles			
32.	Capital changes:			
	32.1 Paid in			
	32.2 Transferred from surplus (Stock Dividend)			
	32.3 Transferred to surplus			
33.	Surplus adjustments:			
	33.1 Paid in			
	33.2 Transferred to capital (Stock Dividend)			
	33.3 Transferred from capital			
	Net remittances from or (to) Home Office			
	Dividends to stockholders			
	Change in treasury stock			
	Aggregate write-ins for gains and losses in surplus	4 005 000	0.050.000	0.044.700
	Change in surplus as regards policyholders (Lines 22 through 37)	1,985,666	2,059,088	2,944,738
39.	Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	94,855,058	91,983,742	92,869,392
	DETAILS OF WRITE-INS			
	Contingency reserve contribution per Wisconsin Administrative Code Section Insurance	0 100 005	0.046.004	E 47E 140
	3.09(14) 120 month release of statutory contingency reserve			
	Summary of remaining write-ins for Line 5 from overflow page	2,100,998	2,939,382	5,463,004
	Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)		2,303,002	5,405,004
1403.				
	Summary of remaining write-ins for Line 14 from overflow page			
	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)			
0700	Summary of remaining write-ins for Line 37 from overflow page			
	Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)			

# **CASH FLOW**

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	Cash from Operations	TO Date	To Date	December 31
1.	Premiums collected net of reinsurance	2 870 967	4,473,909	
2.	Net investment income			
2. 3.	Miscellaneous income	2,108	2,820	3,464
4.	Total (Lines 1 to 3)	5,283,824	6,964,424	13,290,860
4. 5.	Benefit and loss related payments		(250,280)	
5. 6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
0. 7.	Commissions, expenses paid and aggregate write-ins for deductions			
7. 8.	Dividends paid to policyholders			1,000,302
	Federal and foreign income taxes paid (recovered) net of \$			
9.		10,000	950,000	1 965 000
10	gains (losses)	19,000	852,000	1,865,900
10.	Total (Lines 5 through 9)	952,910	1,521,008	3,498,165
11.	Net cash from operations (Line 4 minus Line 10)	4,330,914	5,443,416	9,792,695
	Cash from Investments			
10				
12.	Proceeds from investments sold, matured or repaid:	6 655 000	6 400 175	05 070 175
	12.1 Bonds			
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds			
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,655,000	7,101,283	
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		(519,904)	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	13,600,569	12,059,361	33,660,647
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)	(6,945,569)	(4,958,078)	(7,984,364
	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)	99,429	791,540	921,079
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5	00,400	701 540	001 070
	plus Line 16.6)	99,429	791,540	921,079
	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)	(2.515 226)	1.276 878	
10. 19.	Cash, cash equivalents and short-term investments:			
19.	Cash, cash equivalents and short-term investments: 19.1 Beginning of year	5 112 542	0 204 100	0 001 100
		2,598,317	3,661,011	2,384,133 5,113,543
	19.2 End of period (Line 18 plus Line 19.1)	2,000,011	0,001,011	5,115,343

### NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

Accounting Practices The financial statements of MGIC Indemnity Corporation ("MIC") are presented on the basis of accounting practices prescribed or permitted by the Office of the Commissioner of Insurance of the State of Wisconsin ("OCI"). The OCI recognizes only statutory accounting practices prescribed or permitted by the State of Wisconsin for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Wisconsin for determining and reporting the financial contantion and results of operations of an insurance company, for determining its solvency under the Wisconsin insurance law. The National Association of Insurance Commissioners' ("NAIC") *Accounting Practices and Procedures Manual* ("NAIC SAP") has been adopted as a component of prescribed practices by the OCI. The OCI has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. Specifically, Wisconsin domiciled companies record changes in the contingency loss reserves through the income statement as an underwriting deduction. In NAIC SAP, changes in the contingency loss reserves are recorded directly to unassigned surplus. In addition, Wisconsin domiciled companies' annual contribution to the contingency loss reserve is calculated as the greater of a) fifty percent of net earned premium or b) one-seventh of the result of the minimum policyholders' position calculation provided under Wisconsin Administrative Code Section Insurance 3.09(14). In NAIC SAP, the annual contribution to the contingency loss reserve is fifty percent of net earned premium. The OCI has the right to permit other specific practices that deviate from prescribed practices. A reconciliation of our net income and capital and surplus between NAIC SAP and practices prescribed by the OCI is shown below:

			F/S		
	SSAP #	F/S Page	Line #	2018	2017
<u>NET INCOME</u>					
(1) MIC state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 2,041,443	\$ 3,236,615
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
Change in contingency loss reserves	00	4	5,37	(2,100,998)	(5,463,004)
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP				-	-
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 4,142,441	\$ 8,699,619
SURPLUS					
(5) MIC state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 94,855,058	\$ 92,869,392
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
Accumulated difference in contingency loss reserves	00	3	37	(1,649,768)	(1,651,366)
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP				-	- · · · ·
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 96,504,826	\$ 94,520,758
N					

- B. No significant changes C
  - Accounting Policy
  - (1) (5) No significant changes(6) Not applicable
  - (7) (13) No significant changes
- D Going Concern
- Based upon its evaluation of relevant conditions and events, management does not have substantial doubt about our ability to continue as a going concern. No significant changes
- 2 3. No significant changes
  - No significant changes
- 4. 5. Investments
  - Mortgage Loans, including Mezzanine Real Estate Loans not applicable А.
  - В Debt Restructuring - not applicable

  - Reverse Mortgages not applicable Loan-Backed Securities not applicable D.
  - Dollar Repurchase Agreements and/or Securities Lending Transactions not applicable E.
  - F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - not applicable
  - Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing not applicable Repurchase Agreements Transactions Accounted for as a Sale not applicable G
  - H. Reverse Repurchase Agreements Transactions Accounted for as a Sale - not applicable I.
  - J. Real Estate - not applicable
  - Low-Income Housing Tax Credits ("LIHTC") not applicable Restricted Assets no significant changes Κ
  - L.
  - Working Capital Finance Investments not applicable Μ
  - Offsetting and Netting of Assets and Liabilities not applicable Ν
  - О. Structured Notes - not applicable
  - 5\* Securities not applicable P.
  - Short Sales not applicable Q.
  - R Prepayment Penalty and Acceleration Fees - not applicable
- 6 No significant changes
- No significant changes 7.
- 8. Derivative Instruments - not applicable
- 9 No significant changes
- 10 No significant changes
- Debt Not applicable 11
- 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans - Not applicable
- 13 No significant changes
- No significant changes 14.
- 15. No significant changes
- No significant changes 16.
- Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities Not applicable 17
- No significant changes 18.
- 19 No significant changes

#### 20 Fair Value Measurement

- Assets and Liabilities Measured and Reported at Fair Value Not applicable А.
- Other Fair Value Disclosures Not applicable B. C
- Aggregate Fair Value for All Financial Instruments The following tables set forth the aggregate fair values, admitted asset values and level of fair value amounts for financial instruments held as of June 30, 2018 and December 31, 2017:

<u>June 30, 2018</u>	Aggregate Fair Value	Admitted Asset Value	Level 1	Level 2	Level 3		Not Practica (Carryi Value)	ble ng
Bonds	\$ 143,311,768	\$ 144,988,268	\$ 1,472,841	\$ 141,838,927	\$	-	\$	-
Short-term investments	1,999,040	2,001,068	-	1,999,040		-		-
Cash equivalents	590,518	590,518	590,518	-		-		-
							Not	
	Aggregate Fair	Admitted Asset					Practica (Carryi	
December 31, 2017	Value	Value	Level 1	Level 2	Level 3		Value)	)
Bonds	\$ 139,016,949	\$ 139,146,930	\$ 1,501,622	\$ 137,515,327	\$	-	\$	-
Short-term investments	2,002,180	2,005,466	-	2,002,180		-		-
Cash equivalents	3,102,301	3,102,301	3,102,301	-		-		-

To determine the fair value of financial instruments in Level 1 and Level 2 of the fair value hierarchy, independent pricing sources have been utilized. One price is provided per security based on observable market data. To ensure securities are appropriately classified in the fair value hierarchy, we review the pricing techniques and methodologies of the independent pricing sources and believe that their policies adequately consider market activity, either based on specific transactions for the issue valued or based on modeling of securities with similar credit quality, duration, yield and structure that were recently traded. A variety of inputs are utilized by the independent pricing sources including benchmark yields, reported trades, non-binding broker/dealer quotes, issuer spreads, two sided markets, benchmark securities, bids, offers and reference data including data published in market research publications. Inputs may be weighted differently for any security, and not all inputs are used for each security evaluation. Market indicators, industry and economic events are also considered. This information is evaluated using a multidimensional pricing model. This model combines all inputs to arrive at a value assigned to each security. Quality controls are performed by the independent pricing sources throughout this process, which include reviewing tolerance reports, trading information, data changes, and directional moves compared to market moves. In addition, on a quarterly basis, we perform quality controls over values received from the pricing sources which also include reviewing tolerance reports, trading information, data changes, and directional moves compared to market moves. We have not made any adjustments to the prices obtained from the independent pricing sources

D Not Practicable to Estimate Fair Value - Not applicable

No significant changes 21

22. No significant changes

- 23. No significant changes
- 24. 25. Retrospectively Rated Contracts & Contracts Subject to Redetermination - Not applicable
- Change in Incurred Losses and Loss Adjustment Expenses
  - Reserves as of December 31, 2017 were \$2,138 thousand. As of June 30, 2018, \$194 thousand has been paid for incurred losses and loss adjustment expenses A. attributable to insured events of prior years. Reserves remaining for prior years are now \$1,584 thousand as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$360 thousand favorable prior year development from December 31, 2017 to June 30, 2018. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. We do not adjust premiums based on past claim activity.
  - Not applicable R
- 26 No significant changes 27. No significant changes
- 28. No significant changes
- No significant changes
- 29. 30.
- No significant changes No significant changes 31.
- No significant changes 32.
- 33. No significant changes
- 34. No significant changes
- 35. No significant changes
- Financial Guaranty Insurance Not applicable 36

### **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	2 If yes, has the report been filed with the domiciliary state?						
2.1	P.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?						
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 [ ]					
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.	0000876437					
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	Yes [ ] No [ X ]					
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.						
	1 2 3 Name of Entity NAIC Company Code State of Domicile						
5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney- in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes If yes, attach an explanation.	[ ] No [ X ] N/A [ ]					
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	12/31/2016					
6.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.	12/31/2016					
6.3	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).	05/10/2018					
6.4	By what department or departments?						
6.5	Office of the Commissioner of Insurance of the State of Wisconsin Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?Yes	[ ] No [ ] N/A [ X ]					
6.6	Have all of the recommendations within the latest financial examination report been complied with?	[ ] No [ ] N/A [ X ]					
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?	Yes [ ] No [X]					
7.2	If yes, give full information:						
8.1	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?	Yes [ ] No [ X ]					
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.						
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?	Yes [ ] No [X]					

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

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

# GENERAL INTERROGATORIES

9.1	<ul> <li>Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?</li> <li>(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between person relationships;</li> <li>(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting (c) Compliance with applicable governmental laws, rules and regulations;</li> <li>(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and</li> <li>(e) Accountability for adherence to the code.</li> <li>If the response to 9.1 is No, please explain:</li> </ul>	onal and professional	Yes [ X	] No [ ]
9.2 9.21	Has the code of ethics for senior managers been amended? If the response to 9.2 is Yes, provide information related to amendment(s).		Yes [	] No [ X ]
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers? If the response to 9.3 is Yes, provide the nature of any waiver(s).		Yes [	] No [ X ]
	FINANCIAL			
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?		Yes [ X	] No [ ]
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	\$ <u></u>	-	
11.1 11.2	INVESTMENT Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or othe use by another person? (Exclude securities under securities lending agreements.) If yes, give full and complete information relating thereto:	rwise made available for	Yes [	] No [X]
		•		
12. 13.	Amount of real estate and mortgages held in other invested assets in Schedule BA: Amount of real estate and mortgages held in short-term investments:			
13. 14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			
14.2	If yes, please complete the following:		165 [	
		1 Prior Year-End Book/Adjusted Carrying Value	Bo Ca	2 rrent Quarter ok/Adjusted rrying Value
	Bonds			
	Preferred Stock\$ Common Stock\$			
	Short-Term Investments			
	Mortgage Loans on Real Estate			
	All Other\$			
	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\$			

14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above\$	\$		-
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?	Yes [	] No [ X ]	
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?	Yes [	] No [ ]	
	If no, attach a description with this statement.			

7.1

## **GENERAL INTERROGATORIES**

For the reporting entity's security lending program, state the amount of the following as of the current statement date: 16.

1	6.1	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.	\$
1	6.2	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
1	63	Total payable for securities lending reported on the liability page	¢

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

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

Yes [ X ] No [ ]

Yes [ ] No [ X ]

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

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: 17.2

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 information relating thereto:

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

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

1	2
Name of Firm or Individual	Affiliation
Lisa Pendergast	. I
Paul Spiroff	

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. Yes [ ] No [ ] designated with a "U") manage more than 10% of the reporting entity's 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 assets?..... Yes [ ] No [ ]

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

1	2	3	4	5
				Investment
				Management
Central Registration				Agreement
Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed

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

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

a. Documentation necessary to permit a full credit analysis of the security does not exist. 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 5\*GI securities? Yes [ ] No [ X ]

# **GENERAL INTERROGATORIES**

#### PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.	If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? If yes, attach an explanation.	Yes [	] [	No [	]	N//	A [ X ]	
2.	Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?		Yes [	]	No	[ X	]	
3.1	Have any of the reporting entity's primary reinsurance contracts been canceled?		Yes [	]	No	[X	]	
3.2	If yes, give full and complete information thereto.							
4.1	Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of " tabular reserves" ) discounted at a rate of interest greater than zero?		Yes [	]	No	[ X	]	

#### 4.2 If yes, complete the following schedule:

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

#### 5. Operating Percentages:

	5.1 A&H loss percent					%
	5.2 A&H cost containment percent					%
	5.3 A&H expense percent excluding cost containment expenses					%
6.1	Do you act as a custodian for health savings accounts?		Yes [ ]	No [	X ]	
6.2	If yes, please provide the amount of custodial funds held as of the reporting date	\$				
6.3	Do you act as an administrator for health savings accounts?		Yes [ ]	No [	X ]	
6.4	If yes, please provide the balance of the funds administered as of the reporting date	<u>\$</u>				
7.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes [ X ]	No [	]	
7.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		Yes [ ]	No [	]	

# SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

		6.16 milig /				
1 NAIC	2	3	4	5	6 Certified Reinsurer	7 Effective Date of Certified Reinsurer
NAIC Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Rating (1 through 6)	Reinsurer Rating
	••••••					
+-						
	•••••					
			<b>.</b>			
			.,			
	·····					
	•••••					
	•••••					
	•••••					
	•••••					

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN Current Year to Date - Allocated by States and Territories

		1	Current Year to I Direct Premiur		y States and Territor Direct Losses Paid (D		Direct Losse	s Unnaid
		Active	2	3	4	5	6	7
	States, etc.	Status (a)	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date	Current Year To Date	Prior Year To Date
1.	AlabamaAL	(a)	To Date	TO Date	TODale	TO Date	To Date	TO Dale
2.	AlaskaAK							
3.	ArizonaAZ	L						
4.	ArkansasAR	L						
5.	CaliforniaCA	L				(18,524)		
6.	ColoradoCO	L						
7.	ConnecticutCT	L						
8.	DelawareDE	L						
9.	District of ColumbiaDC	L		000 057		(13,738)		
10.	FloridaFL	L	634,448			(13,738)		450,411
11.	GeorgiaGA HawaiiHI	L						
12. 13.	HawaiiHi IdahoID	L						
13. 14.	IllinoisIL	L						
15.	Indiana IN	L						
16.	lowaIA							
17.	KansasKS	L						
18.	KentuckyKY	L	402	.410				
19.	LouisianaLA	L						
20.	MaineME	L						
21.	MarylandMD	L						
22.	MassachusettsMA	L						1,414
23.	MichiganMI	L						·
24.	MinnesotaMN	L						
25.	MississippiMS	L						
26.	MissouriMO	L						
27.	MontanaMT	L						
28.	NebraskaNE	L						
29.	NevadaNV	L						
30.	New HampshireNH	L						
31.	New JerseyNJ	L						
32.	New MexicoNM	L		(33)				
33.	New YorkNY	L						
34.	North CarolinaNC	L						
35.	North DakotaND	L						
36.	OhioOH	L						
37.	OklahomaOK	L						
38.	OregonOR	L						
39.	PennsylvaniaPA	L						
40.	Rhode IslandRI	È						
41.	South CarolinaSC	L						
42.	South DakotaSD							
43.	TennesseeTN	È						
44.	TexasTX	L					43,725	
45.	UtahUT							
46.	VermontVT	L						
47.	VirginiaVA	<b>L</b>	564	564				
	WashingtonWA	 						
49.	West VirginiaWV				20,306			
50.	WisconsinWI WyomingWY		<b> </b>					
51. 52.	American SamoaAS	L N	<b> </b>					
52. 53.	GuamGU	NI						
53. 54.	Puerto RicoPR	NN					1,266,317	
54. 55.	U.S. Virgin IslandsVI	LN						
55. 56.	Northern Mariana		<b> </b>					
50.	IslandsMP	N	l.					
57.	CanadaCAN							
58.	Aggregate Other Alien OT	XXX						
59.	Totals	XXX	3,776,512	5,260,275	284,315	53,333	2,441,432	2,061,099
	DETAILS OF WRITE-INS			, , -	,		, , , -	
58001		XXX						
		XXX	[					
		XXX						
	Summary of remaining		[					
55550.	write-ins for Line 58 from							
	overflow page	XXX						
58999.	Totals (Lines 58001 through							
	58003 plus 58998)(Line 58							
	above)	XXX						

(a) Active Status Counts:

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

E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other

R - Registered - Non-domiciled RRGs.....

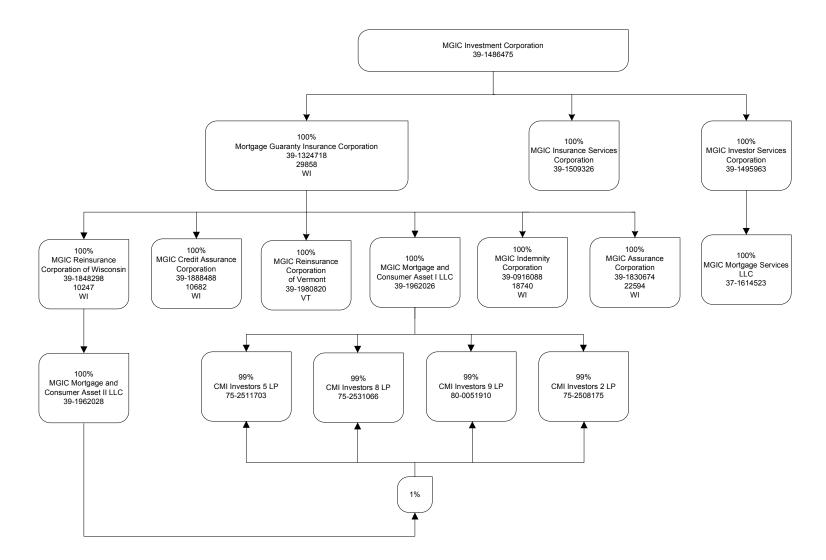
Q - Qualified - Qualified or accredited reinsurer.

.5

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

Linguist of control of approval to the support of the

### 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
•	-	Ū		U U	°,		Ũ	Ũ			Type	lf			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
	Mortgage Guaranty Insurance	Code	Number	N33D	OIN	international)	Of Anniates	lion	Linuty	(Name of Entity/Ferson)	Other)	laye	Litity(les)/Feison(s)	(1/1)	
	Corporation	00000	39-1486475		876437	New York Stock Exchange	MGIC Investment Corporation	WI	IIIP		Ownership	100.000		N	
	Mortgage Guaranty Insurance		00 1400470		0/040/	New TOTA OLOGA Exchange	mare investment ourperation				owner amp				
	Corporation		39-1324718				Mortgage Guaranty Insurance Corporation		UDP.	MGIC Investment Corporation	Ownership	100.000	MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance														
	Corporation		39-1509326				MGIC Insurance Services Corporation		NI A	MGIC Investment Corporation	Ownership		MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance										1				1
	Corporation	00000	39-1495963				MGIC Investor Services Corporation		NI A	MGIC Investment Corporation	Ownership		MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance	10710													
	Corporation Mortgage Guaranty Insurance		39-0916088				MGIC Indemnity Corporation		RE	Mortgage Guaranty Insurance Corporation	Ownership	100.000	_ MGIC Investment Corporation	N	
	Corporation		39-1888488				MGIC Credit Assurance Corporation	WI	IA	Mortgage Guaranty Insurance Corporation	Ownership.		MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance	10002	39-1000400				word credit Assurance corporation			wortgage dualanty insurance corporation	owner simp		more investment corporation	N	
	Corporation		39-1848298				MGIC Reinsurance Corporation of Wisconsin		IA	Mortgage Guaranty Insurance Corporation	Ownership	100.000	MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance									mor tgage adaranty moaranee eerperation					
	Corporation		39-1830674				MGIC Assurance Corporation		IA	Mortgage Guaranty Insurance Corporation	Ownership.		MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance						·								
	Corporation	00000	39-1980820				MGIC Reinsurance Corporation of Vermont	VT	IA	Mortgage Guaranty Insurance Corporation	Ownership		MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance														
	Corporation	00000	39-1962026				MGIC Mortgage and Consumer Asset I LLC	DE	NIA	Mortgage Guaranty Insurance Corporation	Ownership	100.000	_ MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance	00000	07 1014500				MGIC Mortgage Services LLC	WI	NU A	MGIC Investor Services Corporation	0	100,000	NOID Investment Organisation	м	
	Corporation Mortgage Guaranty Insurance	00000	37-1614523				Mult Mortgage Services LLC	**	NIA	Mult investor Services Corporation	Ownership	100.000	_ MGIC Investment Corporation	N	
	Corporation		39-1962028				MGIC Mortgage and Consumer Asset II LLC	DE	NIA	MGIC Reinsurance Corporation of Wisconsin	Ownership	100,000	MGIC Investment Corporation	N	
	Mortgage Guaranty Insurance		00 1002020				mare moregage and consumer Addet in EEC			mare normal and corporation of modelion .	owner on p	100.000		······	
	Corporation		75-2511703				CMI Investors 5 LP	DE	NIA	MGIC Mortgage and Consumer Asset   LLC	Ownership	99,000	MGIC Investment Corporation	Y	
	Mortgage Guaranty Insurance										· · · · · · · · · · · · · · · · · · ·				
	Corporation	00000	75-2511703				CMI Investors 5 LP	DE	NI A	MGIC Mortgage and Consumer Asset II LLC	Ownership		MGIC Investment Corporation	Y	
	Mortgage Guaranty Insurance														1
	Corporation	00000	75-2531066				CMI Investors 8 LP	DE	NIA	MGIC Mortgage and Consumer Asset I LLC	Ownership		MGIC Investment Corporation	Y	
	Mortgage Guaranty Insurance	00000	75-2531066				CMI Investors 8 LP	DE	NUA	NGIC Masteries and Consumer Asset 11.11.0	Quananah i -	1 000	NCIC Investment Conservation	v	1
	Corporation Mortgage Guaranty Insurance	00000	10-2031000				UNIT TRIVESTORS & LP		NIA	MGIC Mortgage and Consumer Asset II LLC	Ownership	1.000	MGIC Investment Corporation	<sup>1</sup>	
	Corporation		80-0051910				CMI Investors 9 LP	DE	NIA	MGIC Mortgage and Consumer Asset   LLC	Ownership	99.000	MGIC Investment Corporation	v	1
	Mortgage Guaranty Insurance									more moregage and consumer Asset I LEC	omition on the				1
	Corporation	00000	80-0051910				CMI Investors 9 LP	DE	NIA	MGIC Mortgage and Consumer Asset II LLC	Ownership	1.000	MGIC Investment Corporation	Y	
	Mortgage Guaranty Insurance												]		1
	Corporation	00000	75-2508175				CMI Investors 2 LP	DE	NI A	MGIC Mortgage and Consumer Asset I LLC	Ownership		MGIC Investment Corporation	Y	
	Mortgage Guaranty Insurance														1
0105	Corporation	00000	75-2508175				CMI Investors 2 LP	DE	NI A	MGIC Mortgage and Consumer Asset II LLC	Ownership		MGIC Investment Corporation	Y	

Asterisk

Explanation

#### STATEMENT AS OF JUNE 30, 2018 OF THE MGIC INDEMNITY CORPORATION PART 1 - LOSS EXPERIENCE

			Current Year to Date		4
	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		(14,385)	(0.3)	
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				
17.1	Other liability - claims-made				
17.2					
17.3	Excess workers' compensation				
18.1	Products liability - occurrence				
	Products liability - claims-made				
19.1,19.2	Private passenger auto liability				
	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
32.	Reinsurance - Nonproportional Assumed Liability				XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines		XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business				
35.	Totals	4,206,262	(14,385)	(0.3)	(8.1
	DETAILS OF WRITE-INS				
3401.					
3402.					
3403.					
3498.	Summary of remaining write-ins for Line 34 from overflow page				
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)				

# PART 2 - DIRECT PREMIUMS WRITTEN

	Line of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire			Teal to Date
2.	Allied Lines			
3.	Farmowners multiple peril			
4.	Homeowners multiple peril			
5.	Commercial multiple peril			
6.	Mortgage guaranty			.5,260,275
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			
	Private passenger auto liability			
	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	XXX
32.	Reinsurance - Nonproportional Assumed Liability			
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX		
34.	Aggregate write-ins for other lines of business			
35.	Totals	1,786,262	3,776,512	5,260,275
	DETAILS OF WRITE-INS			
3401.				
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page			
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			

# **PART 3 (000 omitted)** LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

							-		-					
		1	2	3	4	5	6	7	8	9	10	11	12	13
												Prior Year-End	Prior Year-End	
									Q.S. Date Known			Known Case Loss	IBNR Loss and	Prior Year-End
				<b>T D</b> .		2018 Loss and		Q.S. Date Known	Case Loss and			and LAE Reserves	LAE Reserves	Total Loss and
				Total Prior	2018 Loss and	LAE Payments on	T	Case Loss and	LAE Reserves on		TILOOI	Developed	Developed	LAE Reserve
	Years in Which	Prior Year-End	Prior Year- End IBNR	Year-End Loss and LAE	LAE Payments on Claims Reported		Total 2018 Loss and LAE	LAE Reserves on Claims Reported		Q.S. Date IBNR	Total Q.S. Loss and LAE	(Savings)/ Deficiency	(Savings)/	Developed
	Losses	Known Case Loss	Loss and LAE	Reserves	as of Prior	Unreported as of Prior	Payments	and Open as of	or Reopened Subsequent to	Loss and LAE	Reserves	(Cols.4+7	Deficiency (Cols. 5+8+9	(Savings)/ Deficiency
	Occurred	and LAE Reserves	Reserves	(Cols. 1+2)	Year-End	Year-End	(Cols. 4+5)	Prior Year End	Prior Year End	Reserves	(Cols.7+8+9)	minus Col. 1)	(Cois. 5+6+9 minus Col. 2)	(Cols. 11+12)
			110001100	· · · · · ·			· · · · · ·		The Four Life	110001100	· · · · ·	,		
1.	2015 + Prior			545		45							45	(130)
2.	2016							341				(6)		(6)
3.	Subtotals 2016 + Prior					45						(181)		(136)
4.	2017			1,246	21		21				1,001	(272)		(224)
5.	Subtotals 2017 + Prior			2,138	149	45		1,403				(453)		
6.	2018			xxx	XXX	25						XXX		xxx
7.	Totals	2,005	133	2,138	149	70	219	1,403	314	119	1,836	(453)	93	(360)
8.	Prior Year-End Surplus As Regards Policyholders	92,869										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. (22.6)	2. 69.9	3. (16.8)

14

Col. 13, Line 7

As a % of Col. 1 Line 8

4. (0.4)

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

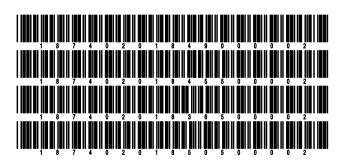
		Response
1.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3.	Will the Medicare Part D Coverage Supplement be filed with the state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

Explanations:

- 1.
- 2.
- 3
- 0.
- 4.
- Bar Codes:

#### 1. Trusteed Surplus Statement [Document Identifier 490]

- 2. Supplement A to Schedule T [Document Identifier 455]
- 3. Medicare Part D Coverage Supplement [Document Identifier 365]
- 4. Director and Officer Supplement [Document Identifier 505]



#### 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)	280,000	
9. 10. 11.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) Deduct total nonadmitted amounts		

# **SCHEDULE B - VERIFICATION**

	<u> </u>	1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in test in and mmitmen test		
9.	Total foreign exchange change in book value/rec ed in the entry cluding, and the teres and the second s		
10.	Deduct current year's other than temporary impairent record zed		
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
		1	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		
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		(107,125)
6.	Deduct consideration for bonds and stocks disposed of	6,655,000	25,073,175
7.	Deduct amortization of premium		1,933,453
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	144,988,268	139,146,930

## **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

	ng the Current Quarter for	2	3	4	5	6	7	8
	Book/Adjusted				Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value Beginning	Acquisitions During	Dispositions During	Non-Trading Activity During	Carrying Value End of	Carrying Value End of	Carrying Value End of	Carrying Value December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
- ···g ····								
BONDS								
1. NAIC 1 (a)		1,996,120	2,545,000	(3,267,651)		126,843,965		
2. NAIC 2 (a)				2,852,934		20, 145, 371		
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	145,466,433	4,482,620	2,545,000	(414,717)	145,466,433	146,989,336		141, 152, 396
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	145,466,433	4,482,620	2,545,000	(414,717)	145,466,433	146,989,336		141,152,396

(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:

# **SCHEDULE DA - PART 1**

	Short-Term Investments										
	1	2	3	4	5						
					Paid for						
	Book/Adjusted			Interest Collected	Accrued Interest						
	Carrying Value	Par Value	Actual Cost	Year-to-Date	Year-to-Date						
9199999 Totals	2,001,068	XXX	2,006,560	22,500							

#### SCHEDULE DA - VERIFICATION Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	2,005,466	2,325,179
2.	Cost of short-term investments 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	4 , 398	1,094
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)	2,001,068	2,005,466
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	2,001,068	2,005,466

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards **NONE** 

Schedule DB - Part B - Verification - Futures Contracts

# ΝΟΝΕ

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open **NONE** 

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE** 

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

# ΝΟΝΕ

# SCHEDULE E - PART 2 - VERIFICATION

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	3, 102, 301	
2.	Cost of cash equivalents acquired	15,554,421	3, 102, 301
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)		3, 102, 301
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	590,518	3,102,301

# **SCHEDULE A - PART 2**

Showing All Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

1			4	5	6	7	8	9
	Location							
	2	3						Additional
	-	C C					Book/Adjusted	Additional Investment Made After Acquisition
			Date		Actual Cost at	Amount of	Book/Adjusted Carrying Value Less Encumbrances	Made After
Description of Property	City	State	Acquired	Name of Vendor	Time of Acquisition	Amount of Encumbrances		Acquisition
	, ,	Sidle				Lincumbrances		Acquisition
	Woolwich	NJ	04/20/2018 Fannie	e Mae				
0199999. Acquired by Purchase					373,868		280,000	
			•••••					
		-	+					
0399999 - Totals					373,868		280,000	

			Shov	wing All Real Estate DIS	SPOSED DI	uring the Qu													
1	Locatio	on	4	5	6	7	8	Change in E	Book/Adjusted	d Carrying Va	alue Less En	cumbrances	14	15	16	17	18	19	20
	2	3				Expended		9	10	11	12	13							
						for	Book/					Total	Book/					Gross	
						Additions,	Adjusted				Total	Foreign	Adjusted					Income	
						Permanent	Carrying		Current		Change in	Exchange	Carrying		Foreign			Earned	
						Improve-	Value Less		Year's	Current			Value Less		Exchange	Realized	Total	Less	Taxes,
						ments and	Encum-	Current	Other Than		Adjusted	Book/	Encum-	Amounts	Gain	Gain	Gain	Interest	Repairs
						Changes	brances	Year's		Change in	Carrying	Adjusted	brances	Received	(Loss)	(Loss)	(Loss)	Incurred on	and
			Disposal		Actual	in Encum-	Prior	Depre-	Impairment	Encum-	Value	Carrying	on	During	` on ´	on	on	Encum-	Expense
Description of Property	City	State	Date	Name of Purchaser	Cost	brances	Year	•	Recognized		(11-9-10)	Value	Disposal	Year	Disposal	Disposal	Disposal	brances	Incurred
	<i>c.</i> .,																		
			-			· · · · · · · · · · · · · · · · · · ·													
						· · · · · · · · · · · · · · · · · · ·													
						· · · · · · · · · · · · · · · · · · ·		····· • • •			+						+		

### **SCHEDULE A - PART 3**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made **NONE** 

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid **NONE** 

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made **NONE** 

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid **NONE** 

# **SCHEDULE D - PART 3**

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

				ong-renn bonds and Stock Acquired building the outfent Quarte					
1	2	3	4	5	6	7	8	9	10
									NAIC Desig-
									nation or
					Number of			Paid for Accrued	Market
CUSIP			Date		Shares of			Interest and	Indicator
Identification	Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	(a)
		Foreign			SLUCK	1,996,120	2.000.000	7,833	()
	General Dynamics Corp 3.000% 05/11/21 Mcdonald's Corp 2.750% 12/09/20			Stifel, Nicolaus & Co., Inc Stifel, Nicolaus & Co., Inc			2,000,000		
	tal - Bonds - Industrial and Miscellaneous (Unaffiliated)			Stilet, Nicolaus & Co., Inc.		4,482,620	4,500,000		
							1. 1	11,461	
	- Bonds - Part 3					4,482,620	4,500,000	11,461	
	- Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total						4,482,620	4,500,000	11,461	
8999997. Total	- Preferred Stocks - Part 3						XXX		XXX
8999998. Total	- Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total	- Preferred Stocks						XXX		XXX
9799997. Total	- Common Stocks - Part 3						XXX		XXX
9799998. Total	- Common Stocks - Part 5					XXX	XXX	XXX	XXX
9799999. Total	- Common Stocks						XXX		XXX
9899999. Total	- Preferred and Common Stocks						XXX		XXX
			•••••						
9999999 - Tota	s					4,482,620	XXX	11.461	XXX
	an stock boaring the NAIC market indicator "I I" provide: the number of ou					4,402,020		11,401	

E04

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

# SCHEDULE D - PART 4

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

1	2																				
1	2	3	4	5	6	7	8	9	10	Ch	ange In Boo	ok/Adjusted	Carrying Val	ue	16	17	18	19	20	21	22
										11	12	13	14	15							
ļ												1	Total	Total			1				NAIC
												Current	Change in	Foreign							Desig-
												Year's	Book/	Exchange	Book/				Bond		nation
									Prior Year		Current	Other Than	Adjusted	Change in	Adjusted	Foreign			Interest/	Stated	or
									Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Stock	Con-	Market
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain	Dividends	tractual	In-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	dicator
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	DuringYear	Date	(a)
	American Express Co 1.550% 05/22/18			Maturity		1,670,000	1,670,000	1,667,194	1,669,774				226		1,670,000				12,943		. 1FE
	Target Corp		1947 147 24 14	Maturity							(9,773)		(9,773)							05/15/2018	. 1FE
	ubtotal - Bonds - Industrial and Misco	ellaneo	us (Unaffili	ated)		2,545,000	2,545,000	2,654,185	2,554,547		(9,547)		(9,547)		2,545,000				34,271	XXX	XXX
	otal - Bonds - Part 4					2,545,000	2,545,000	2,654,185	2,554,547		(9,547)		(9,547)		2,545,000				34,271	XXX	XXX
8399998. T	otal - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999. T	otal - Bonds					2,545,000	2,545,000	2,654,185	2,554,547		(9,547)		(9,547)		2,545,000				34,271	XXX	XXX
8999997. T	otal - Preferred Stocks - Part 4						XXX													XXX	XXX
8999998. T	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. T	otal - Preferred Stocks						XXX													XXX	XXX
9799997. T	otal - Common Stocks - Part 4						XXX													XXX	XXX
9799998. T	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999. T	otal - Common Stocks						XXX													XXX	XXX
9899999. T	otal - Preferred and Common Stocks	5					XXX													XXX	XXX
9999999 - 1	Fotals					2,545,000	XXX	2,654,185	2,554,547		(9,547)		(9,547)		2,545,000				34,271	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open **NONE** 

> Schedule DB - Part B - Section 1 - Futures Contracts Open **NONE**

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE** 

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open **NONE** 

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By **NONE** 

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To **NONE** 

> Schedule DL - Part 1 - Reinvested Collateral Assets Owned **NONE**

> Schedule DL - Part 2 - Reinvested Collateral Assets Owned

# ΝΟΝΕ

#### SCHEDULE E - PART 1 - CASH Month End Depository Balances

0299999. Totals - Suspended Depositories 0399999. Total Cash on Deposit	XXX XXX	XXX XXX	25	10	26,197	24,053	6,731	XXX XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	20, 197	24,000	0,731	XXX
04999999. Cash in Company's Office	~~~	***	***	***				
	· · · · · · · · · · · · · · · · · · ·							
								1
	2004			10	06 107	04 052	6 701	
0599999. Total - Cash	XXX	XXX	25	10	26,197	24,053	6,731	XXX

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

Show Investments Owned End of Current Quarter

	Show Investi	nents Ow	ned End of Current	Quarter				
1	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0599999. Tota	- U.S. Government Bonds							
1099999. Tota	- All Other Government Bonds							
1799999. Tota	- U.S. States, Territories and Possessions Bonds							
2499999, Tota	- U.S. Political Subdivisions Bonds							
3199999. Tota	- U.S. Special Revenues Bonds							
3899999. Tota	- Industrial and Miscellaneous (Unaffiliated) Bonds							
4899999. Tota	- Hybrid Securities							
5599999. Tota	- Parent, Subsidiaries and Affiliates Bonds							
	otal - SVO Identified Funds							
7799999. Tota	- Issuer Obligations							
7899999, Tota	- Residential Mortgage-Backed Securities							
7999999. Tota	- Commercial Mortgage-Backed Securities							
8099999, Tota	- Other Loan-Backed and Structured Securities							
	- SVO Identified Funds							
8399999. Tota								
	Goldman Sachs FS Govt Inst Fund				XXX			
	NorthernTrust Inst US Government Portfolio			1.768	XXX		2,645	2,233
8599999, Subt	tal - Exempt Money Market Mutual Funds - as Identified by the SVO					590.518	6,203	4.682
						,	-,	.,
	l							
		-						
	·							
		-						
		-						
		-						
		-						
		.						
		-						
		-						
		-		<u> </u>				
8899999 - Tota	I Cash Equivalents			<u> </u>		590.518	6.203	4,682
0000000 1018						390,310	0,203	4,002