



QUARTERLY STATEMENT  
AS OF SEPTEMBER 30, 2019  
OF THE CONDITION AND AFFAIRS OF THE  
OLD AMERICAN INDEMNITY COMPANY

NAIC Group Code 04762 , 04762 NAIC Company Code 11665 Employer's ID Number 61-0533007  
(Current Period) (Prior Period)  
Organized under the Laws of Kentucky State of Domicile or Port of Entry Kentucky  
Country of Domicile United States  
Incorporated/Organized 11/11/1956 Commenced Business 05/30/1957  
Statutory Home Office 250 WEST MAIN STREET, SUITE 2300 , LEXINGTON, KY, US 40507-1758  
(Street and Number) (City or Town, State, Country and Zip Code)  
Main Administrative Office 14675 DALLAS PARKWAY, SUITE 500 DALLAS, TX, US 75254 214-561-1991  
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)  
Mail Address P.O. BOX 793747 , DALLAS, TX, US 75379-3747  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)  
Primary Location of Books and Records 14675 DALLAS PARKWAY, SUITE 500 DALLAS, TX, US 75254 214-561-1991  
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)  
Internet Web Site Address www.oldamericanindemnity.com  
Statutory Statement Contact MICHELLE BRADLEY STEPHENS 214-561-1965  
(Name) (Area Code) (Telephone Number) (Extension)  
MSTEPHENS@OLDAM.COM 214-561-1990  
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
ANDREW JAMES KIRKPATRICK	PRESIDENT	MELISSA WADDELL SAYLORS	SECRETARY
MARK FRANCIS BANAR	TREASURER		

OTHER OFFICERS

DEBRA JANE ROBERTS	CHIEF EXECUTIVE OFFICER	BRENT LAYNE MCGILL	EXECUTIVE VICE PRESIDENT & CHIEF ACTUARY
RONALD JAMES BALLARD	EXECUTIVE VICE PRESIDENT & CHIEF FINANCIAL OFFICER		

DIRECTORS OR TRUSTEES

DEBRA JANE ROBERTS	ANDREW JAMES KIRKPATRICK	BRENT LAYNE MCGILL	
--------------------	--------------------------	--------------------	--

State of TEXAS  
County of DALLAS ss

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

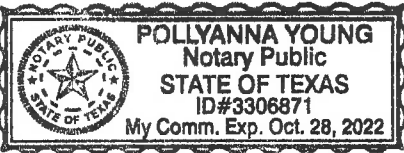
Andrew James Kirkpatrick Melissa WaddeLL Saylor Mark F. Banar  
ANDREW JAMES KIRKPATRICK MELISSA WADDELL SAYLORS MARK FRANCIS BANAR  
PRESIDENT SECRETARY TREASURER

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

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

Subscribed and sworn to before me this 1st day of November 2019

Pollyanna Young  
POLLYANNA YOUNG, NOTARY PUBLIC  
OCTOBER 28, 2022



STATEMENT AS OF SEPTEMBER 30, 2019 OF THE OLD AMERICAN INDEMNITY COMPANY

ASSETS

	Current Statement Date			4  December 31 Prior Year Net Admitted Assets
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	9,890,357		9,890,357	7,224,142
2. Stocks:				
2.1 Preferred stocks .....				
2.2 Common stocks .....				
3. Mortgage loans on real estate:				
3.1 First liens .....				
3.2 Other than first liens .....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....				
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....				
4.3 Properties held for sale (less \$ ..... encumbrances) .....				
5. Cash (\$ .....3,677,690 ), cash equivalents (\$ ..... ) and short-term investments (\$ ..... ) .....	3,677,690		3,677,690	2,691,823
6. Contract loans (including \$ ..... premium notes) .....				
7. Derivatives .....				
8. Other invested assets .....				
9. Receivables for securities .....				
10. Securities lending reinvested collateral assets .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	13,568,046		13,568,046	9,915,965
13. Title plants less \$ ..... charged off (for Title insurers only) .....				
14. Investment income due and accrued .....	50,358		50,358	33,657
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	4,669,090		4,669,090	367,856
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	1,799,667		1,799,667	414,816
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	3,754,863		3,754,863	297,489
16.2 Funds held by or deposited with reinsured companies .....				
16.3 Other amounts receivable under reinsurance contracts .....				
17. Amounts receivable relating to uninsured plans .....				
18.1 Current federal and foreign income tax recoverable and interest thereon .....				
18.2 Net deferred tax asset .....				
19. Guaranty funds receivable or on deposit .....				
20. Electronic data processing equipment and software .....				
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....				
22. Net adjustment in assets and liabilities due to foreign exchange rates .....				
23. Receivables from parent, subsidiaries and affiliates .....				
24. Health care (\$ ..... ) and other amounts receivable .....				
25. Aggregate write-ins for other-than-invested assets .....				31,821
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	23,842,025		23,842,025	11,061,604
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28. Total (Lines 26 and 27) .....	23,842,025		23,842,025	11,061,604
<b>DETAILS OF WRITE-INS</b>				
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. MGA/Premium Tax Receivable .....				31,821
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....				31,821

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ 293,068 )	346,879	112,823
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses	59,182	20,926
4. Commissions payable, contingent commissions and other similar charges		
5. Other expenses (excluding taxes, licenses and fees)	147,548	94,772
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	579,016	14,273
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 \$ 16,590,209 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)	612,434	39,253
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	9,501,455	776,123
13. Funds held by company under reinsurance treaties	43,389	28,547
14. Amounts withheld or retained by company for account of others	5,604	9,823
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	119,813	6,758
20. Derivatives		
21. Payable for securities	100,000	
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	2,168,390	358,358
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	13,683,710	1,461,656
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	13,683,710	1,461,656
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		
33. Surplus notes		
34. Gross paid in and contributed surplus	8,560,179	8,560,179
35. Unassigned funds (surplus)	(901,864)	(1,460,231)
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$ )		
36.2 shares preferred (value included in Line 31 \$ )		
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	10,158,315	9,599,948
38. Totals (Page 2, Line 28, Col. 3)	23,842,025	11,061,604
DETAILS OF WRITE-INS		
2501. MGA Payable	2,168,390	358,358
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	2,168,390	358,358
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298) (Line 32 above)		

STATEMENT OF INCOME

	1	2	3
	Current Year	Prior Year	Prior Year Ended
	to Date	to Date	December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 52,320,232 )	35,902,652	1,825,529	2,431,534
1.2 Assumed (written \$ )			
1.3 Ceded (written \$ 48,065,049 )	32,220,650	1,695,660	2,258,870
1.4 Net (written \$ 4,255,183 )	3,682,002	129,869	172,664
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 499,550 ):			
2.1 Direct	17,550,294	1,185,813	1,142,838
2.2 Assumed	(7,018)	(60)	9,834
2.3 Ceded	17,077,252	1,136,195	1,098,691
2.4 Net	466,024	49,558	53,981
3. Loss adjustment expenses incurred	126,454	(2,390)	(1,885)
4. Other underwriting expenses incurred	2,710,300	161,383	224,083
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	3,302,779	208,551	276,179
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	379,223	(78,682)	(103,515)
INVESTMENT INCOME			
9. Net investment income earned	128,874	98,547	141,809
10. Net realized capital gains (losses) less capital gains tax of \$	50,270	28	31
11. Net investment gain (loss) (Lines 9 + 10)	179,144	98,575	141,840
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$ )			
13. Finance and service charges not included in premiums			
14. Aggregate write-ins for miscellaneous income			75,000
15. Total other income (Lines 12 through 14)			75,000
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	558,367	19,893	113,325
17. Dividends to policyholders			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	558,367	19,893	113,325
19. Federal and foreign income taxes incurred			
20. Net income (Line 18 minus Line 19)(to Line 22)	558,367	19,893	113,325
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	9,599,948	9,486,623	9,486,623
22. Net income (from Line 20)	558,367	19,893	113,325
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$			
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax			
27. Change in nonadmitted assets			
28. Change in provision for reinsurance			
29. Change in surplus notes			
30. Surplus (contributed to) withdrawn from protected cells			
31. Cumulative effect of changes in accounting principles			
32. Capital changes:			
32.1 Paid in			
32.2 Transferred from surplus (Stock Dividend)			
32.3 Transferred to surplus			
33. Surplus adjustments:			
33.1 Paid in			
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			
36. Change in treasury stock			
37. Aggregate write-ins for gains and losses in surplus			
38. Change in surplus as regards policyholders (Lines 22 through 37)	558,367	19,893	113,325
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	10,158,315	9,506,516	9,599,948
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above)			
1401. Settlement			75,000
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)			75,000
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page			
3799. TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above)			

CASH FLOW

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance.....	7,294,430	58,627	131,782
2. Net investment income .....	145,123	100,248	143,163
3. Miscellaneous income .....			75,000
4. Total (Lines 1 to 3) .....	7,439,553	158,875	349,945
5. Benefit and loss related payments .....	3,689,343	(274,060)	(176,300)
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions .....	2,188,432	253,260	276,533
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) .....	5,877,774	(20,800)	100,233
11. Net cash from operations (Line 4 minus Line 10) .....	1,561,778	179,675	249,712
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	11,350,702	3,094,908	3,119,418
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 .....	8	28	32
12.7 Miscellaneous proceeds .....	100,000		85,000
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	11,450,710	3,094,936	3,204,450
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	13,992,153	1,580,362	2,024,731
13.2 Stocks .....			
13.3 Mortgage loans .....			
13.4 Real estate .....			
13.5 Other invested assets .....			
13.6 Miscellaneous applications .....		15,000	1
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	13,992,153	1,595,362	2,024,732
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) .....	(2,541,443)	1,499,574	1,179,718
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds .....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....			
16.5 Dividends to stockholders .....			
16.6 Other cash provided (applied).....	1,965,531	(1,098,693)	(1,002,024)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	1,965,531	(1,098,693)	(1,002,024)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	985,867	580,556	427,406
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	2,691,823	2,264,417	2,264,417
19.2 End of period (Line 18 plus Line 19.1) .....	3,677,690	2,844,973	2,691,823

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Description of Business

Old American Indemnity Company (the “Company”) was formed as a corporation under the laws of the State of Kentucky on November 11, 1956. The Company, formerly known as Citizens Insurance Company, received its license from the State of Kentucky on May 30, 1957. The Company subsequently changed its name to Viceroy Insurance Company. On June 5, 2012, the Kentucky Department of Insurance approved the change of the Company’s name to Old American Indemnity Company.

The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Kentucky. The State of Kentucky requires that insurance companies domiciled in Kentucky prepare their statutory basis financial statements in accordance with the National Association of Insurance Commissioners (NAIC) *Accounting Practices and Procedures Manual*, subject to any deviations prescribed or permitted by the Kentucky Insurance Commissioner. The impact of any permitted accounting practices on statutory surplus was not material.

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Kentucky is shown below:

	SSAP #	F/S Page	F/S Line #	September 30, 2019	December 31, 2018
NET INCOME					
(1) Old American Indemnity Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 558,367	\$ 113,325
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:	-	-	-	-	-
(3) State Permitted Practices that increase/(decrease) NAIC SAP:	-	-	-	-	-
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 558,367	\$ 113,325
SURPLUS					
(5) Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 10,158,315	\$ 9,599,948
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:	-	-	-	-	-
(7) State Permitted Practices that increase/(decrease) NAIC SAP:	-	-	-	-	-
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 10,158,315	\$ 9,599,948

B. Use of Estimates in the Preparation of the Financial Statements: No significant change.

C. Accounting Policy: No significant change.

2) Bonds not backed by other loans are stated at amortized cost using the interest method.

6) Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities except for interest only securities, securities where the yield had become negative, or EITF 99-20 eligible securities which are valued using the prospective method.

D. Going Concern: According to management’s evaluation, as of September 30, 2019, there were no principal conditions or events that raised substantial doubt about the Company’s ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors: Not applicable.

3. Business Combinations and Goodwill: Not applicable.

4. Discontinued Operations: Not applicable.

5. Investments

A. Mortgage Loans: Not applicable.

B. Debt Restructuring: Not applicable.

C. Reverse Mortgages: Not applicable.

D. Loan-Backed Securities:

1) Prepayment assumptions for loan-backed securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity, including the time of year (seasonality), current levels of interest rates (refinancing incentive), economic activity (including housing turnover), and term and age of the underlying collateral (burnout, seasoning). On an ongoing basis, the rate of prepayment is monitored and the model is calibrated to reflect actual experience and market factors.

2) Aggregate Intent to sell or Aggregate Intent and Ability: Not applicable.

3) Securities with an other than temporary impairment recognized in the reporting period: Not applicable.

4) Securities for which the amortized cost exceeds fair value but an other-than-temporary impairment has not been recognized in earnings as a realized loss: Not applicable.

## NOTES TO FINANCIAL STATEMENTS

- E. **Repurchase Agreements and/or Securities Lending Transactions:** Not applicable.
- F. **Repurchase Agreements Transactions Accounted for as Secured Borrowing:** Not applicable.
- G. **Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing:** Not applicable.
- H. **Repurchase Agreements Transactions Accounted for as a Sale:** Not applicable.
- I. **Reverse Repurchase Agreements Transactions Accounted for as a Sale:** Not applicable.
- J. **Real Estate:** Not applicable.
- K. **Low Income Housing Tax Credits (LIHTC):** Not applicable.
- L. **Restricted Assets:** No significant change.
- M. **Working Capital Finance Investments:** Not Applicable.
- N. **Offsetting and Netting of Assets and Liabilities:** Not Applicable.
- O. **Structured Notes:** Not applicable.
- P. **5\* Securities:** Not applicable.
- Q. **Short Sales:** Not applicable.
- R. **Prepayment Penalty and Acceleration Fees:** Not applicable.
- 6. **Joint Ventures, Partnerships and Limited Liability Companies:** Not applicable.
- 7. **Investment Income:** No significant change.
- 8. **Derivative Instruments:** Not applicable.
- 9. **Income Taxes:** No significant change.
- 10. **Information Concerning Parent, Subsidiaries and Affiliates:** No significant change.
- 11. **Debt:** No significant change.
  - B. **FHLB Agreements:** Not applicable.
- 12. **Retirement Plans, Deferred Compensation, Post-employment Benefits and Compensated Absences and Other Postretirement Benefit Plans:** Not applicable.
  - A. **(4) Defined Benefit Plan:** Not applicable.
- 13. **Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations:** No significant change.
- 14. **Liabilities, Contingencies and Assessments:** Not applicable.
- 15. **Leases:** Not applicable.
- 16. **Information About Financial Instruments With Off-Balance Sheet Risk And Financial Instruments With Concentrations of Credit Risk:** Not applicable.
- 17. **Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities:** Not applicable.
  - A. **Transfers of Receivables Reported as Sales:** Not applicable.
  - B. **Transfer and Servicing of Financial Assets:** Not applicable.
    - 2) **Servicing Assets and Servicing Liabilities:** Not applicable.
    - 4) **Securitizations and Asset-backed Financing Arrangements:** Not applicable.
  - C. **Wash Sales:** Not applicable.
- 18. **Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans:** Not applicable.

NOTES TO FINANCIAL STATEMENTS

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

Name and Address of MGA	FEIN	Exclusive Contract	Types of Business Written	Types of Authority Granted	Total Direct Premium Written
Aggressive Insurance Services, LLC 28470 Avenue Stanford, Suite 250 Santa Clarita, CA 91355	20-8521100	No	Personal auto liability and physical damage	Underwriting/Claims	\$48,298,267
Connect Insurance P.O. Box 2149 Frisco, TX 75034	45-1475095	No	Personal auto liability and physical damage	Underwriting/Claims	\$2,253,001
Embark General Insurance Agency, LLC 400 Northridge Rd, Suite 300 Atlanta, GA 30350-3354	83-0707283	No	Personal auto liability and physical damage	Underwriting/Claims	\$1,768,964

20. Fair Value Measurement:

The Company does not own any investments that are considered to be other than temporarily impaired. All bonds held are NAIC Class 1, which are reported at amortized cost in the statement of financial position. Short term securities and cash equivalents are valued at amortized cost.

Fair value of the Company’s invested assets is determined and reported for disclosure purposes in accordance with the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* when available. For those investments not valued by the NAIC Securities Valuation Office, prices were obtained from an independent pricing service vendor such as Interactive Data Corporation, Merrill Lynch indices, Reuters, S&P or Bloomberg. Under certain circumstances, if neither an SVO price nor a vendor price is available, a price may be obtained from a broker.

Transfers between fair value levels are recognized as of the end of the reporting period. As of September 30, 2019, the Company did not have any transfers between Levels 1, 2 or 3 for assets measured and reported at fair value.

As of September 30, 2019, the fair value of the Company’s financial instruments is summarized as below:

- A. Fair Value Measurements at Reporting Date: Not applicable
- C. Fair Value Measurement for all Financial Instruments and Placement in the Fair Value Hierarchy as of September 30, 2019:

	Aggregate Fair Value	Admitted Asets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 9,933,579	9,890,357	3,236,509	6,697,071	—	—	—
Cash, cash equivalents and short-term investments	3,677,690	3,677,690	3,677,690	—	—	—	—
Cash and invested assets	13,611,269	13,568,047	6,914,199	6,697,071	—	—	—

- D. Not Practicable (Carrying Value): Not applicable.

21. Other Items

- A. Extraordinary Items: Not applicable.
- B. Troubled Debt Restructuring: Not applicable.
- C. Other Disclosures and Unusual Items: The Company elected to use rounding in reporting amounts in this statement.
- D. Business Interruption Insurance Recoveries: Not applicable.
- E. State Transferable and Non-Transferable Tax Credits: Not applicable.
- F. Subprime Mortgage Related Risk Exposure: Not applicable.

22. Events Subsequent: None.



NOTES TO FINANCIAL STATEMENTS

23. Reinsurance

- A. **Unsecured Reinsurance Recoverables:** No significant change.
- B. **Reinsurance Recoverable in Dispute:** Not applicable.
- C. **Reinsurance Assumed and Ceded:**

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
Affiliates	\$ -	\$ -	\$ 612,433	\$ 134,735	\$ (612,433)	\$ (134,735)
All Other	-	-	15,977,775	3,212,444	(15,977,775)	(3,212,444)
Total	\$ -	\$ -	\$ 16,590,208	\$ 3,347,179	\$ (16,590,208)	\$ (3,347,179)

Direct unearned premium reserve is \$17,202,643 as of September 30, 2019.

- D. **Uncollectible Reinsurance:** Not applicable.
- E. **Commutation of Ceded Reinsurance:** Not applicable.
- F. **Retroactive Reinsurance:** Not applicable
- G. **Reinsurance Accounted for as a Deposit:** Not applicable.
- H. **Disclosure for the Transfer of Property and Casualty Run-off Agreements:** Not Applicable.
- I. **Certified reinsurer Rating Downgraded or Status Subject to Revocation:** Not Applicable.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination: Not applicable.

- F. **Risk-Sharing Provisions of the Affordable Care Act (ACA):** Not applicable.

25. Changes in Incurred Losses and Loss Adjustment Expenses

Reserves as of December 31, 2018 were \$133,749. As of September 30, 2019, \$30,846 has been paid for incurred losses and loss adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$63,497 as a result of re-estimation of unpaid losses and loss adjustment expenses. Therefore, there has been a favorable loss and loss expense development of \$39,405 since December 31, 2018 through September 30, 2019 on prior accident years. The decrease is generally a result of ongoing analysis of recent loss development trends.

- 26. **Intercompany Pooling Arrangements:** Not applicable.
- 27. **Structured Settlements:** Not applicable.
- 28. **Health Care Receivables:** Not applicable.
- 29. **Participating Policies:** Not applicable.
- 30. **Premium Deficiency Reserves:** Not significant change.
- 31. **High Deductibles:** Not applicable.
- 32. **Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses:** Not applicable.
- 33. **Asbestos/Environmental Reserves:** Not applicable.
- 34. **Subscriber Savings Accounts:** Not applicable.
- 35. **Multiple Peril Crop Insurance:** Not applicable.
- 36. **Financial Guaranty Insurance Exposures:** Not applicable.
  - B. **Financial Guaranty Claim Liability:** Not applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES  
GENERAL

- 1.1

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

Yes ☐ No ☒
- 1.2

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

Yes ☐ No ☐
- 2.1

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

Yes ☐ No ☒
- 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 ☒ No ☐

If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2

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

Yes ☐ No ☒
- 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 ☒ 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

0001352713
- 4.1

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

Yes ☐ No ☒

If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.
- 4.2

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

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

5.

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

Yes ☐ No ☒ NA ☐

If yes, attach an explanation.
- 6.1

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

12/31/2018
- 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.

12/31/2013
- 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).

04/29/2015
- 6.4

By what department or departments?

KENTUCKY DEPARTMENT OF INSURANCE
- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☐ No ☐ NA ☒
- 6.6

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

Yes ☒ No ☐ NA ☐
- 7.1

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

Yes ☐ No ☒
- 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 ☒
- 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 ☒
- 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

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? .....

Yes ☒ No ☐
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 9.11

If the response to 9.1 is No, please explain:

.....
- 9.2

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

Yes ☐ No ☒
- 9.21

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

.....
- 9.3

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

Yes ☐ No ☒
- 9.31

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

.....

FINANCIAL

- 10.1

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

Yes ☐ No ☒
- 10.2

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

INVESTMENT

- 11.1

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

Yes ☐ No ☒
- 11.2

If yes, give full and complete information relating thereto:

.....
12.

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

\$ .....
13.

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

\$ .....
- 14.1

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

Yes ☐ No ☒
- 14.2

If yes, please complete the following:

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

- 15.1

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

Yes ☐ No ☒
- 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.
- 16

For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1

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

\$ .....
- 16.2

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

\$ .....
- 16.3

Total payable for securities lending reported on the liability page

\$ .....

GENERAL INTERROGATORIES

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

Yes [X] No [ ]

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

1 Name of Custodian(s)	2 Custodian Address
CITIBANK, N.A.....	NEW YORK, NY.....

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? .....

Yes [ ] No [X]

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

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

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

1 Name of Firm or Individual	2 Affiliation
NEW ENGLAND ASSET MANAGEMENT, INC.....	U.....

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

Yes [ X ] No [ ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity’s assets?

Yes [ ] No [ X ]

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105900.....	NEW ENGLAND ASSET MANAGEMENT, INC.....	KUR85E5PS4G0FZTFC130.....	SEC.....	NO.....

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

Yes [X] No [ ]

18.2 If no, list exceptions:

.....

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

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

Has the reporting entity self-designated 5GI securities?.....

Yes [ ] No [X]

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

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

Has the reporting entity self-designated PLGI securities?.....

Yes [ ] No [X]

GENERAL INTERROGATORIES  
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? ..... Yes [ ] No [ ] NA [X]  
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? ..... Yes [ ] No [X]  
If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? ..... Yes [ ] No [X]

3.2 If yes, give full and complete information thereto.  
.....

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

4.2 If yes, complete the following schedule:

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

5. Operating Percentages:

5.1 A&H loss percent.....

%

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

%

5.3 A&H expense percent excluding cost containment expenses.....

%

6.1 Do you act as a custodian for health savings accounts?..... Yes [ ] No [X]

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

6.3 Do you act as an administrator for health savings accounts?..... Yes [ ] No [X]

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

7. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?..... Yes [X] No [ ]

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

## 6

## 6

6

6

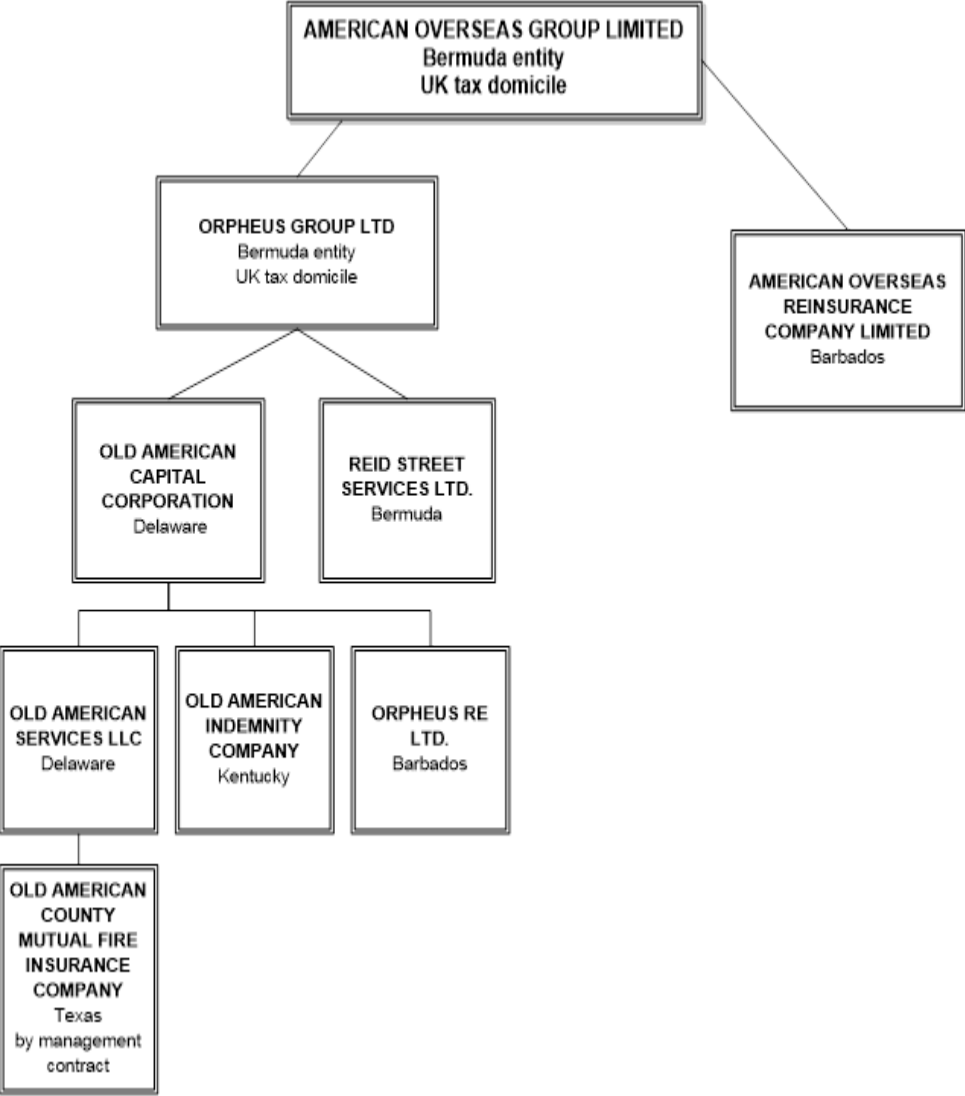
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date – Allocated by States and Territories							
States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama .....	AL..	L					
2. Alaska .....	AK..	N					
3. Arizona .....	AZ..	L			15,000	1,185	7,116
4. Arkansas .....	AR..	N					
5. California .....	CA..	N					
6. Colorado .....	CO..	N					
7. Connecticut .....	CT..	N					
8. Delaware .....	DE..	N					
9. Dist. Columbia .....	DC..	N					
10. Florida .....	FL..	N					
11. Georgia .....	GA..	L	1,768,964	(7,434)	190,332	1,195,222	478,773
12. Hawaii .....	HI..	N					
13. Idaho .....	ID..	N					
14. Illinois .....	IL..	N					
15. Indiana .....	IN..	L					
16. Iowa .....	IA..	N					
17. Kansas .....	KS..	N					
18. Kentucky .....	KY..	L					
19. Louisiana .....	LA..	L	48,298,267		7,036,603	9,530,646	
20. Maine .....	ME..	N					
21. Maryland .....	MD..	N					
22. Massachusetts .....	MA..	N					
23. Michigan .....	MI..	N					
24. Minnesota .....	MN..	N					
25. Mississippi .....	MS..	N					
26. Missouri .....	MO..	L					
27. Montana .....	MT..	N					
28. Nebraska .....	NE..	N					
29. Nevada .....	NV..	N					
30. New Hampshire .....	NH..	N					
31. New Jersey .....	NJ..	N					
32. New Mexico .....	NM..	L					
33. New York .....	NY..	N					
34. No. Carolina .....	NC..	L					
35. No. Dakota .....	ND..	L					
36. Ohio .....	OH..	N					
37. Oklahoma .....	OK..	L	1,186,982	1,275,817	562,213	926,001	884,113
38. Oregon .....	OR..	N					
39. Pennsylvania .....	PA..	N					
40. Rhode Island .....	RI..	N					
41. So. Carolina .....	SC..	L					
42. So. Dakota .....	SD..	N					
43. Tennessee .....	TN..	L					
44. Texas .....	TX..	L					
45. Utah .....	UT..	L	1,066,018	535,836	369,387	44,221	401,611
46. Vermont .....	VT..	N					
47. Virginia .....	VA..	N					
48. Washington .....	WA..	N					
49. West Virginia .....	WV..	N					
50. Wisconsin .....	WI..	N					
51. Wyoming .....	WY..	N					
52. American Samoa .....	AS..	N					
53. Guam .....	GU..	N					
54. Puerto Rico .....	PR..	N					
55. U.S. Virgin Islands .....	VI..	N					
56. Northern Mariana Islands .....	MP..	N					
57. Canada .....	CAN..	N					
58. Aggregate Other Alien .....	OT..	XXX					
59. Totals .....	XXX	52,320,232	1,804,219	8,158,535	2,180,444	11,296,328	2,326,778
DETAILS OF WRITE-INS							
58001. ....	XXX						
58002. ....	XXX						
58003. ....	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page.....	XXX						
58999. TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX						

(a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG .....15 R – Registered – Non-domiciled RRGs .....  
E – Eligible – Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile – See DSLI) ..... Q – Qualified – Qualified or accredited reinsurer .....  
D – Domestic Surplus Lines Insurer (DSLII) – Reporting entities authorized to write surplus lines in the state of domicile ..... N – None of the above – Not allowed to write business in the state .....42

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





## 12

## PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

[illegible]

PART 1 - LOSS EXPERIENCE

Line of Business		Current Year to Date			4 Prior Year to Date Direct Loss Percentage
		1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1.	Fire .....				
2.	Allied lines .....				
3.	Farmowners multiple peril .....				
4.	Homeowners multiple peril .....				
5.	Commercial multiple peril .....				
6.	Mortgage guaranty .....				
8.	Ocean marine .....				
9.	Inland marine .....				
10.	Financial guaranty .....				
11.1	Medical professional liability -occurrence .....				
11.2	Medical professional liability -claims made .....				
12.	Earthquake .....				
13.	Group accident and health .....				
14.	Credit accident and health .....				
15.	Other accident and health .....	769,184	22,500	2.9	
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 .....	25,611,157	14,421,640	56.3	78.9
19.3,19.4	Commercial auto liability .....				
21.	Auto physical damage .....	6,718,760	3,106,154	46.2	45.8
22.	Aircraft (all perils) .....				
23.	Fidelity .....				
24.	Surety .....				
26.	Burglary and theft .....				
27.	Boiler and machinery .....				
28.	Credit .....				
29.	International .....				
30.	Warranty .....				
31.	Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business .....	2,803,553			
35.	TOTALS .....	35,902,652	17,550,294	48.9	65.0
DETAILS OF WRITE-INS					
3401.	Gross Policy Fees .....	2,803,553			
3402.	.....				
3403.	.....				
3498.	Sum. of remaining write-ins for Line 34 from overflow page .....				
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34) .....	2,803,553			

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 .....			
12.	Earthquake .....			
13.	Group accident and health .....			
14.	Credit accident and health .....			
15.	Other accident and health .....		367,130	1,169,848
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 .....		11,849,392	38,239,134
19.3,19.4	Commercial auto liability .....			
21.	Auto physical damage .....		3,284,869	10,107,697
22.	Aircraft (all perils) .....			
23.	Fidelity .....			
24.	Surety .....			
26.	Burglary and theft .....			
27.	Boiler and machinery .....			
28.	Credit .....			
29.	International .....			
30.	Warranty .....			
31.	Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business .....	582,908	2,803,553	67,781
35.	TOTALS .....	16,084,299	52,320,232	1,804,219
DETAILS OF WRITE-INS				
3401.	Gross Policy Fees .....	582,908	2,803,553	67,781
3402.	.....			
3403.	.....			
3498.	Sum. of remaining write-ins for Line 34 from overflow page .....			
3499.	Totals (Lines 3401 through 3403 plus 3498) (Line 34) .....	582,908	2,803,553	67,781

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE OLD AMERICAN INDEMNITY COMPANY

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1 + 2)	2019 Loss and LAE Payments on Claims Reported as of Prior Year-End	2019 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2019 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. 2016 + Prior .....	21	34	54	9		9	9		19	28	(3)	(15)	(18)
2. 2017 .....	9	19	28	4	1	5	6	1	8	15	1	(8)	(8)
3. Subtotals 2017 + prior .....	30	53	83	13	1	14	15	1	27	43	(3)	(23)	(26)
4. 2018 .....	19	32	51	10	7	17	6	4	11	21	(3)	(10)	(13)
5. Subtotals 2018 + prior .....	50	84	134	23	8	31	20	5	38	63	(6)	(33)	(39)
6. 2019 .....	XXX	XXX	XXX	XXX	289	289	XXX	100	243	343	XXX	XXX	XXX
7. Totals .....	50	84	134	23	297	320	20	105	280	406	(6)	(33)	(39)
8. Prior Year-End Surplus As Regards Policy-holders	9,600										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. (12.3)	2. (39.5)	3. (29.5)
											Col. 13, Line 7 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?	.....SEE EXPLANATION.....
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	.....SEE EXPLANATION.....
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	.....SEE EXPLANATION.....
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	.....SEE EXPLANATION.....

Explanation:

1. BUSINESS NOT WRITTEN
2. BUSINESS NOT WRITTEN
3. BUSINESS NOT WRITTEN
4. BUSINESS NOT WRITTEN

Bar Code:

**OVERFLOW PAGE FOR WRITE-INS**

SCHEDULE A – VERIFICATION

Real Estate

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		
2.2 Additional investment made after acquisition .....		
3. Current year change in encumbrances .....		
4. Total gain (loss) on disposals .....		
5. Deduct amounts received on disposals .....		
6. Total foreign exchange change in book/adjusted carrying value .....		
7. Deduct current year's other-than-temporary impairment recognized .....		
8. Deduct current year's depreciation .....		
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) .....		
10. Deduct total nonadmitted amounts .....		
11. Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B – VERIFICATION

Mortgage Loans

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

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		
2.2 Additional investment made after acquisition .....		
3. Capitalized deferred interest and other .....		
4. Accrual of discount .....		
5. Unrealized valuation increase (decrease) .....		
6. Total gain (loss) on disposals .....		
7. Deduct amounts received on disposals .....		
8. Deduct amortization of premium and depreciation .....		
9. Total foreign exchange change in book/adjusted carrying value .....		
10. Deduct current year's other-than-temporary impairment recognized .....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....		
12. Deduct total nonadmitted amounts .....		
13. Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	7,224,141	8,326,105
2. Cost of bonds and stocks acquired .....	13,992,151	2,024,731
3. Accrual of discount .....	5,247	9,309
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....	50,262	
6. Deduct consideration for bonds and stocks disposed of .....	11,350,700	3,119,418
7. Deduct amortization of premium .....	30,745	16,586
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) .....	9,890,356	7,224,141
12. Deduct total nonadmitted amounts .....		
13. Statement value at end of current period (Line 11 minus Line 12)	9,890,356	7,224,141

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE OLD AMERICAN INDEMNITY COMPANY

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity  
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a).....	8,610,178	3,150,665	1,851,132	(19,355)	9,309,329	8,610,178	9,890,356	9,091,765
2. NAIC 2 (a).....					250,213			400,576
3. NAIC 3 (a).....								
4. NAIC 4 (a).....								
5. NAIC 5 (a).....								
6. NAIC 6 (a).....								
7. Total Bonds	8,610,178	3,150,665	1,851,132	(19,355)	9,559,542	8,610,178	9,890,356	9,492,341
<b>PREFERRED STOCK</b>								
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	8,610,178	3,150,665	1,851,132	(19,355)	9,559,542	8,610,178	9,890,356	9,492,341

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ ..... ; NAIC 2 \$ ..... ;  
NAIC 3 \$ ..... ; NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

SCHEDULE DA - PART 1  
Short-Term Investments

	1 Book/adjusted Carrying value	2 Prior Year Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999		XXX			

SCHEDULE DA - VERIFICATION  
Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	371,679	498,572
2. Cost of short-term investments acquired .....	1,100,000	1,359,849
3. Accrual of discount .....	1,723	13,258
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals .....	(25)	
6. Deduct consideration received on disposals .....	1,473,377	1,500,000
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).....		371,679
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11)		371,679



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
1. Book/adjusted carrying value, December 31 of prior year.....	1,896,520	1,499,181
2. Cost of cash equivalents acquired .....	3,390,930	12,283,159
3. Accrual of discount .....	7,846	18,657
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals.....	33	32
6. Deduct consideration received on disposals .....	5,295,329	11,904,509
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) .....		1,896,520
11. Deduct total nonadmitted amounts .....		
12. Statement value at end of current period (Line 10 minus Line 11)		1,896,520

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

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE OLD AMERICAN INDEMNITY COMPANY

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation and Administrative Symbol/Market Indicator <sup>(a)</sup>
Bonds - U.S. Governments									
912828-7C-8	UNITED STATES TREASURY NOTE		08/02/2019	NOMURA SECURITIES INTL	XXX	500,959	500,000	499	1
912828-VB-3	UNITED STATES TREASURY NOTE		07/02/2019	GOLDMAN SACHS	XXX	500,373	500,000	1,165	1
912828-VZ-0	UNITED STATES TREASURY NOTE		08/29/2019	HSBC SECURITIES USA INC	XXX	501,369	500,000	4,153	1
0599999 - Bonds - U.S. Governments						1,502,701	1,500,000	5,817	XXX
Bonds - All Other Governments									
Bonds - U.S. States, Territories and Possessions									
Bonds - U.S. Political Subdivisions of States, Territories and Possessions									
64763F-XE-4	NEW ORLEANS LA		09/17/2019	JP MORGAN SECURITIES INC	XXX	100,000	100,000		1FE
68666P-AA-4	ORLEANS PARISH LA SCH BRD REVE		08/14/2019	RAYMOND JAMES	XXX	1,033,980	1,000,000	1,833	1FE
2499999 - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						1,133,980	1,100,000	1,833	XXX
Bonds - U.S. Special Revenue									
54627R-AK-6	LOUISIANA ST LOCAL GOVT ENVRNM		08/27/2019	BARCLAYS CAPITAL	XXX	513,985	500,000	1,260	1FE
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						513,985	500,000	1,260	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)									
Bonds - Hybrid Securities									
Bonds - Parent, Subsidiaries and Affiliates									
Bonds - SVO Identified Funds									
Bonds - Bank Loans									
8399997 - Subtotals - Bonds - Part 3						3,150,666	3,100,000	8,910	XXX
8399999 - Subtotals - Bonds						3,150,666	3,100,000	8,910	XXX
Preferred Stocks - Industrial and Miscellaneous (Unaffiliated)									
Preferred Stocks - Parent, Subsidiaries and Affiliates									
Common Stocks - Industrial and Miscellaneous									
Common Stocks - Parent, Subsidiaries and Affiliates									
Common Stocks - Mutual Funds									
9999999 Totals						3,150,666	XXX	8,910	XXX

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

## STATEMENT AS OF SEPTEMBER 30, 2019 OF THE OLD AMERICAN INDEMNITY COMPANY

## SCHEDULE D - PART 4

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

1  CUSIP Identifi- cation	2  Description	3 F o r e i g n	4  Disposal Date	5  Name of Purchaser	6  Number of Shares of Stock	7  Consideration	8  Par Value	9  Actual Cost	10  Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16  Book/ Adjusted Carrying Value at Disposal Date	17  Foreign Exchange Gain (Loss) on Disposal	18  Realized Gain (Loss) on Disposal	19  Total Gain (Loss) on Disposal	20  Bond Interest/Stock Dividends Received During Year	21  Stated Contractual Maturity Date	22  NAIC Designation and Administrative Symbol/Market Indicator <sup>(a)</sup>
										11  Unrealized Valuation Increase/ (Decrease)	12  Current Year's (Amortization)/ Accretion	13  Current Year's Other Than Temporary Impairment Recognized	14  Total Change in B./A.C.V. (11+12-13)	15  Total Foreign Exchange Change in B./A.C.V.							
Bonds - U.S. Governments																					
912828-6Y-1	UNITED STATES TREASURY NOTE		08/15/2019	BARCLAYS CAPITAL	XXX	503,494	500,000	500,685			(28)		(28)		500,657		2,837	2,837	1,482	06/15/2022	1
912828-7C-8	UNITED STATES TREASURY NOTE		08/15/2019	NW CAPITAL MARKETS INC.	XXX	251,698	250,000	250,479			(5)		(5)		250,475		1,224	1,224	380	07/15/2022	1
0599999 - Bonds - U.S. Governments						755,192	750,000	751,164			(33)		(33)		751,132		4,061	4,061	1,862	XXX	XXX
Bonds - All Other Governments																					
Bonds - U.S. States, Territories and Possessions																					
Bonds - U.S. Political Subdivisions of States, Territories and Possessions																					
Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																					
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
Bonds - Hybrid Securities																					
Bonds - Parent, Subsidiaries, and Affiliates																					
Bonds - SVO Identified Funds																					
Bonds - Bank Loans																					
8399997 - Subtotals - Bonds - Part 4						755,192	750,000	751,164			(33)		(33)		751,132		4,061	4,061	1,862	XXX	XXX
8399999 - Subtotals - Bonds						755,192	750,000	751,164			(33)		(33)		751,132		4,061	4,061	1,862	XXX	XXX
Preferred Stocks - Industrial and Miscellaneous (Unaffiliated)																					
Preferred Stocks - Parent, Subsidiaries, and Affiliates																					
Common Stocks - Industrial and Miscellaneous (Unaffiliated)																					
Common Stocks - Parent, Subsidiaries, and Affiliates																					
Common Stocks - Mutual Funds																					
9999999 Totals						755,192	XXX	751,164			(33)		(33)		751,132		4,061	4,061	1,862	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

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

**STATEMENT AS OF SEPTEMBER 30, 2019 OF THE OLD AMERICAN INDEMNITY COMPANY**

## SCHEDULE E - PART 1 - CASH

[illegible]

## STATEMENT AS OF SEPTEMBER 30, 2019 OF THE OLD AMERICAN INDEMNITY COMPANY

## SCHEDULE E - PART 2 - CASH EQUIVALENTS

**Show Investments Owned End of Current Quarter**

[illegible]