# QUARTERLY STATEMENT 

## AS OF SEPTEMBER 30, 2010

OF THE CONDITION AND AFFAIRS OF THE
TRIAD GUARANTY ASSURANCE CORPORATION


## DIRECTORS OR TRUSTEES

| Howard Anthony Davis | Kenneth Stephen Dwyer | Mark Raphael Goodman | Kenneth Wayne Jones |
| :---: | :---: | :---: | :---: |
| William Thomas Ratliff III | Jerome Francis Schutzbach | Earl Franklin Wall |  |
|  |  |  |  |
| County of Forsth | 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.

Kenneth Wayne Jones
CEO AND Chief Financial Office

Subscribed and sworn to before me this

| $29 \quad$ day of $\quad$ October, 2010 |
| :---: | :---: |

Earl Franklin Wall Secretary

Kenneth Stephen Dwyer Chief Accounting Officer
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
$\qquad$


## LIABILITIES, SURPLUS AND OTHER FUNDS

|  | $\begin{gathered} \hline 1 \\ \text { Current } \\ \text { Statement Date } \end{gathered}$ | $\begin{gathered} 2 \\ \hline \text { December 31, } \\ \text { Prior Year } \end{gathered}$ |
| :---: | :---: | :---: |
| 1. Losses (current accident year \$ .-.- 4, 260,393 ) | 11,969, 270 | 14,435,040 |
| 2. Reinsurance payable on paid losses and loss adjustment expenses | 454,173 | 731,772 |
| 3. Loss adjustment expenses |  | 0 |
| 4. Commissions payable, contingent commissions and other similar charges | 75,030 | 78,772 |
| 5. Other expenses (excluding taxes, licenses and fees) |  | 0 |
| 6. Taxes, licenses and fees (excluding federal and foreign income taxes) |  | 0 |
|  |  | 1,179,567 |
| 7.2 Net deferred tax liability |  | 0 |
| 8. Borrowed money \$ ............................. and interest thereon \$ |  | 0 |
| 9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ $\qquad$ and including warranty reserves of \$ $\qquad$ ). | 56,711 | 71,287 |
| 10. Advance premium |  | 0 |
| 11. Dividends declared and unpaid: |  |  |
| 11.1 Stockholders ....- |  | 0 |
| 11.2 Policyholders |  | 0 |
| 12. Ceded reinsurance premiums payable (net of ceding commissions) |  | 0 |
| 13. Funds held by company under reinsurance treaties |  | 0 |
| 14. Amounts withheld or retained by company for account of others |  | 0 |
| 15. Remittances and items not allocated |  | 0 |
| 16. Provision for reinsurance |  | 0 |
| 17. Net adjustments in assets and liabilities due to foreign exchange rates |  | 0 |
| 18. Drafts outstanding |  | 0 |
| 19. Payable to parent, subsidiaries and affiliates | 48,728 | 38,751 |
| 20. Derivatives |  |  |
| 21. Payable for securities |  | 0 |
| 22. Liability for amounts held under uninsured plans |  | 0 |
|  |  | 0 |
| 24. Aggregate write-ins for liabilities | 293,682 | 0 |
| 25. Total liabilities excluding protected cell liabilities (Lines 1 through 24) | 12,897,594 | 16,535,189 |
| 26. Protected cell liabilities |  | 0 |
| 27. Total liabilities (Lines 25 and 26) | 12,897,594 | 16,535,189 |
| 28. Aggregate write-ins for special surplus funds | 0 | 0 |
| 29. Common capital stock | 2,500,000 | 2,500,000 |
| 30. Preferred capital stock |  | 0 |
| 31. Aggregate write-ins for other than special surplus funds | 0 | 0 |
| 32. Surplus notes |  | 0 |
| 33. Gross paid in and contributed surplus | 2,535,982 | 2,535,982 |
| 34. Unassigned funds (surplus) | 1,912,004 | . 1,757,228 |
| 35. Less treasury stock, at cost: |  |  |
|  |  | 0 |
| $35.2 \ldots$ shares preferred (value included in Line 30 \$ ...-a |  | 0 |
| 36. Surplus as regards policyholders (Lines 28 to 34, less 35) | 6,947,986 | 6,793,210 |
| 37. Totals | 19,845,580 | 23,328,399 |
| DETAILS OF WRITE-INS |  |  |
| 2401. Contingency Reserve | 293,682 |  |
| 2402. |  |  |
| 2403. |  |  |
| 2498. Summary of remaining write-ins for Line 24 from overflow page | 0 | 0 |
| 2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above) | 293,682 | 0 |
| 2801. ...-- |  |  |
| 2802. |  |  |
| 2803. |  |  |
| 2898. Summary of remaining write-ins for Line 28 from overflow page | 0 | 0 |
| 2899. Totals (Lines 2801 through 2803 plus 2898) (Line 28 above) | 0 | 0 |
| 3101. |  |  |
| 3102. |  |  |
| 3103. |  |  |
| 3198. Summary of remaining write-ins for Line 31 from overflow page | 0 | 0 |
| 3199. Totals (Lines 3101 through 3103 plus 3198) (Line 31 above) | 0 | 0 |

## STATEMENT OF INCOME

|  | $\begin{gathered} 1 \\ \begin{array}{c} \text { Current Year } \\ \text { to Date } \end{array} \end{gathered}$ | Prior Year to Date | $\begin{gathered} 3 \\ \hline \text { Prior Year Ended } \\ \text { December 31 } \\ \hline \end{gathered}$ |
| :---: | :---: | :---: | :---: |
| UNDERWRITING INCOME |  |  |  |
| 1. Premiums earned: <br> 11 Direct (written \$ | 0 | 0 | 0 |
| 1.2 Assumed (written \$ ................ 2,418,396 ) | 2,432,972 | 3,008,022 | 3,909,666 |
|  |  | 0 |  |
| 1.4 Net (written \$ | 2,432,972 | 3,008,022 | 3,909,666 |
| DEDUCTIONS: |  |  |  |
| 2. Losses incurred (current accident year \$ ............6,653,051 ): |  |  |  |
| 2.1 Direct | $\cdots$ | 0 | 0 |
| 2.2 Assumed | 1,774,344 | 5,624,260 | 7,559,919 |
| 2.3 Ceded |  | - 0 |  |
| 2.4 Net | 1,774,344 | 5,624,260 | 7,559,919 |
| 3. Loss adjustment expenses incurred |  | 0 | 0 |
| 4. Other underwriting expenses incurred | 929,075 | 1,135,533 | 1,444,941 |
| 5. Aggregate write-ins for underwriting deductions | 0 | 0 | 0 |
| 6. Total underwriting deductions (Lines 2 through 5) | 2,703,419 | 6,759,793 | 9,004,860 |
| 7. Net income of protected cells |  | - | 0 |
| 8. Net underwriting gain (loss) (Line 1 minus Line $6+$ Line 7) | $(270,447)$ | $(3,751,771)$ | $(5,095,194)$ |
| investment income |  |  |  |
| 9. Net investment income earned | 718,444 | 865,592 | 1,069,231 |
| 10. Net realized capital gains (losses) less capital gains tax of \$ | 462 | $(122,214)$ | $(122,425)$ |
| 11. Net investment gain (loss) (Lines $9+10$ ) | 718,906 | 743,378 | 946,806 |
| OTHER INCOME |  |  |  |
| 12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ $\qquad$ amount charged off \$ $\qquad$ ) |  | 0 | 0 |
| 13. Finance and service charges not included in premiums |  | 0 | 0 |
| 14. Aggregate write-ins for miscellaneous income | 0 | 0 | 0 |
| 15. Total other income (Lines 12 through 14) | 0 | 0 | 0 |
| 16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines $8+11+15$ ) | 448,459 | $(3,008,393)$ | $(4,148,388)$ |
| 17. Dividends to policyholders |  | 0 | 0 |
| 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) | 448,459 | $(3,008,393)$ | $(4,148,388)$ |
| 19. Federal and foreign income taxes incurred |  | 0 | 0 |
| 20. Net income (Line 18 minus Line 19)(to Line 22) | 448,459 | $(3,008,393)$ | $(4,148,388)$ |
| CAPITAL AND SURPLUS ACCOUNT |  |  |  |
| 21. Surplus as regards policyholders, December 31 prior year | 6,793,210 | 10,956,599 | 10,956,599 |
| 22. Net income (from Line 20) | 448,459 | $(3,008,393)$ | $(4,148,388)$ |
| 23. Net transfers (to) from Protected Cell accounts |  | 0 | 0 |
| 24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ ..._- 0 | 0 | $(9,750)$ | $(9,750)$ |
| 25. Change in net unrealized foreign exchange capital gain (loss) |  | 0 | 0 |
| 26. Change in net deferred income tax | 2,011,885 | $(1,164,374)$ | 1,584,063 |
| 27. Change in nonadmitted assets | $(2,011,885)$ | . 1,159, 124 | $(1,589,313)$ |
| 28. Change in provision for reinsurance |  | 0 | 0 |
| 29. Change in surplus notes |  | 0 | 0 |
| 30. Surplus (contributed to) withdrawn from protected cells |  | 0 | 0 |
| 31. Cumulative effect of changes in accounting principles |  | 0 | 0 |
| 32. Capital changes: |  | 0 | 0 |
| 32.2 Transferred from surplus (Stock Dividend) |  | 0 | 0 |
| 32.3 Transferred to surplus |  | 0 | 0 |
| 33. Surplus adjustments: |  |  |  |
| 33.1 Paid in |  | 0 | 0 |
| 33.2 Transferred to capital (Stock Dividend) |  | 0 | 0 |
| 33.3 Transferred from capital |  | 0 | 0 |
| 34. Net remittances from or (to) Home Office |  | 0 | 0 |
| 35. Dividends to stockholders |  | $\ldots$ | 0 |
| 36. Change in treasury stock |  | 0 | 0 |
| 37. Aggregate write-ins for gains and losses in surplus | $(293,683)$ | 0 | 0 |
| 38. Change in surplus as regards policyholders (Lines 22 through 37) | 154,776 | $(3,023,393)$ | $(4,163,388)$ |
| 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) | 6,947,986 | 7,933,206 | 6,793,210 |
| DETAILS OF WRITE-INS |  |  |  |
| 0501. |  |  |  |
| 0502. |  |  |  |
| 0503. |  |  |  |
| 0598. Summary of remaining write-ins for Line 5 from overflow page | 0 | 0 | 0 |
| 0599. TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) | 0 | 0 | 0 |
| 1401. |  |  |  |
| 1402. |  |  |  |
| 1403. |  |  |  |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | 0 | 0 | 0 |
| 1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above) | 0 | 0 | 0 |
| 3701. Increase in contingency reserve | $(1,216,487)$ | $(1,504,011)$ | $(1,954,833)$ |
| 3702. Decrease in contingency reserve. | 922,804 | 1,504,011 | 1,954,833 |
| 3703. |  |  |  |
| 3798. Summary of remaining write-ins for Line 37 from overflow page | 0 | 0 | 0 |
| 3799. TOTALS (Lines 3701 through 3703 plus 3798) (Line 37 above) | $(293,683)$ | 0 | 0 |

## CASH FLOW

|  | $\qquad$ To Date | $\begin{gathered} 2 \\ \text { Prior Year } \\ \text { To Date } \end{gathered}$ | Prior Year Ended December 31 |
| :---: | :---: | :---: | :---: |
| Cash from Operations |  |  |  |
| 1. Premiums collected net of reinsurance | 2,430,873 | 3,959,157 | 4,865,665 |
| 2. Net investment income | 809,299 | 918,679 | 1,125,818 |
| 3. Miscellaneous income | 0 | 0 | 0 |
| 4. Total (Lines 1 to 3) | 3,240,171 | 4,877,836 | 5,991,483 |
| 5. Benefit and loss related payments | 4,517,713 | 5,056,034 | 6,499,662 |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | 0 | 0 | 0 |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | 932,817 | 1,427,933 | 1,740,761 |
| 8. Dividends paid to policyholders | 0 | 0 | 0 |
| 9. Federal and foreign income taxes paid (recovered) net of \$ $\qquad$ tax on capital gains (losses) | 1,179,567 | 0 | 0 |
| 10. Total (Lines 5 through 9) | 6,630,097 | 6,483,967 | 8,240,423 |
| 11. Net cash from operations (Line 4 minus Line 10) | $(3,389,926)$ | $(1,606,131)$ | $(2,248,940)$ |
| Cash from Investments |  |  |  |
| 12. Proceeds from investments sold, matured or repaid: 12.1 Bonds | 2,944,742 | 946,434 | 519,858 |
| 12.2 Stocks | - 2,423 | - 93,123 | - $\quad$ - 93,123 |
| 12.3 Mortgage loans | 0 | 0 | 0 |
| 12.4 Real estate | 0 | 0 | 0 |
| 12.5 Other invested assets | 0 | 0 | 0 |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | 0 | 0 | 0 |
| 12.7 Miscellaneous proceeds | 0 | 0 | 0 |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 2,947,165 | 5,039,557 | 5,612,981 |
| 13. Cost of investments acquired (long-term only): 13.1 Bonds | 0 | 3,452,765 | 3,452,765 |
| 13.2 Stocks | 0 | 0 | 0 |
| 13.3 Mortgage loans | 0 | 0 | 0 |
| 13.4 Real estate | 0 | 0 | 0 |
| 13.5 Other invested assets | 0 | 0 | 0 |
| 13.6 Miscellaneous applications | 0 | 0 | 0 |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 0 | 3,452,765 | 3,452,765 |
| 14. Net increase (or decrease) in contract loans and premium notes | 0 | 0 | 0 |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | 2,947,165 | 1,586,792 | 2,160,216 |
| Cash from Financing and Miscellaneous Sources |  |  |  |
| 16. Cash provided (applied): <br> 16.1 Surplus notes, capital notes | 0 | 0 | 0 |
| 16.2 Capital and paid in surplus, less treasury stock | 0 | 0 | 0 |
| 16.3 Borrowed funds | 0 | 0 | 0 |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities |  | 0 | 0 |
| 16.5 Dividends to stockholders | 0 | 0 | 0 |
| 16.6 Other cash provided (applied). | 9,976 | 6,214 | $(19,897)$ |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6). | 9,976 | 6,214 | $(19,897)$ |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS <br> 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) |  |  |  |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) 19. Cash, cash equivalents and short-term investments: | $(432,784)$ | $(13,125)$ | $(108,621)$ |
| 19.1 Beginning of year..-................................................ | 2,119,630 | 2,228,251 | 2,228,251 |
| 19.2 End of period (Line 18 plus Line 19.1) | 1,686,845 | 2,215,126 | 2,119,630 |

## NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies
a. Accounting Practices

The Accompanying financial statements of Triad Guaranty Assurance Corporation ("the Company") have been prepared in conformity with accounting practices prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the State of Illinois.
b. No change since year-end 2009.
c. No change since year-end 2009.
2. Accounting Changes and Corrections of Errors

No change since year-end 2009.
3. Business Combinations and Goodwil

No change since year-end 2009 .
4. Discontinued Operations

No change since year-end 2009.
5. Investments
a. No change since year-end 2009.
b. No change since year-end 2009.
c. No change since year-end 2009.
d. Loan-Backed Securities:
(1) Carrying value for structured securities have been determined in accordance with the guidelines of the NAIC. Fair value is determined using a pricing hierarchy starting with a widely accepted pricing vendor, followed by external broker/dealers, Bloomberg analytic modeling and a benchmark to index model.
(2) The Company uses a proprietary model for loss assumptions and widely accepted models for prepayment assumptions in valuing mortgage-back and asset-backed securities with inputs from major third party data providers. It combines the effects of interest rates, volatility, and pre-payment speeds based on various scenario (Monte Carlo) simulations with credit loss analysis and resulting effective analytics (spreads, duration, convexity) and cashflows on a monthly basis. Model assumptions are specific to asset class and collateral types and are regularly evaluated and adjusted where appropriate.
(3) Credit risk concentrations are evaluated in our base security analysis through exposure stratification of the collateral attributes. The Company will then apply an appropriate credit default curve reflecting our forecasted expectations of future defaults and losses.
(4) An OTTI is recognized on any security whose market value is less than its amortized cost because the Company may not have the ability to hold the security for a period of time sufficient to recover the amortized cost basis.
(5) The Company does not have investments held showing Unrealized Losses - Greater and Less than 1 year.
(6) There are a number of factors that are considered in determining if there is not an other-than-temporary-impairment on an investment, including but not limited to, debt burden, credit ratings, sector, liquidity, financial flexibility, company management, expected earnings and cash flow stream, and economic prospects associated with the investment.
e. No change since year-end 2009.
f. No change since year-end 2009.
g. No change since year-end 2009.
6. Joint Ventures, Partnerships and Limited Liability Companies

No change since year-end 2009.
7. Investment Income

No change since year-end 2009.
8. Derivative Instruments

No change since year-end 2009.
9. Income Taxes

No changes have occurred since year-end 2009 that would have a material impact on the Company.
10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties
a. No change since year-end 2009.
b. No change since year-end 2009.
c. No change since year-end 2009.
d. No change since year-end 2009.
e. No change since year-end 2009.
f. No change since year-end 2009.
g. No change since year-end 2009.
h. No change since year-end 2009.
i. No change since year-end 2009.
j. No change since year-end 2009.
k. No change since year-end 2009.

1. No change since year-end 2009.
2. Debt

No change since year-end 2009.

## NOTES TO FINANCIAL STATEMENTS

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans No change since year-end 2009.
13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations
(1) No change since year-end 2009
(2) No change since year-end 2009.
14. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations- Continued
(3) No change since year-end 2009
(4) No change since year-end 2009.
(5) No change since year-end 2009.
(6) No change since year-end 2009 .
(7) No change since year-end 2009.
(8) No change since year-end 2009.
(9) No change since year-end 2009 .
(10) The portion of unassigned funds (surplus) represented by cumulative unrealized gains and losses was $\$ 0$.
(11) No change since year-end 2009.
(12) No change since year-end 2009.
(13) No change since year-end 2009.
15. Contingencies
a. No change since year-end 2009 .
b. No change since year-end 2009 .
c. No change since year-end 2009 .
d. No change since year-end 2009
e. No change since year-end 2009 .
16. Leases

No change since year-end 2009
16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

No change since year-end 2009.
17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

No change from year-end 2009. The Company did not have any transfers of receivables reported as sales, transfer and servicing of financial assets, or wash sales.
18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

No change since year-end 2009.
19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No change since year-end 2009.
20. Other Items

Changes since year-end 2009 are not significant in either amount or composition except as noted in the tables below.
The total reserves based upon the credit classifications of TGAC as of September 30, 2010 were as follows:

|  | (in thousands) | As a $\%$ of total |
| :--- | ---: | ---: |
| Prime | $\$ 5,573$ | $53.8 \%$ |
| Alt-A | 3,562 | $34.4 \%$ |
| A-Minus | 974 | $9.4 \%$ |
| Subprime (A) | 246 | $\underline{2.4 \%}$ |
| Total | $\$ 10,355$ | $100 \%$ |

Losses and reserves related as of September 30, 2010 were as follows:

| (in thousands) |  |  |  |
| :--- | ---: | ---: | ---: |
|  | Total | $\frac{\text { Subprime }}{}$ | $\$ 103$ |
| 2,918 | 246 | $3.5 \%$ |  |
| Losses paid | 10,355 | - | $2.4 \%$ |
| Case reserves | - | $-\%$ |  |

## NOTES TO FINANCIAL STATEMENTS

21. Events Subsequent

No change since year-end 2009.
22. Reinsurance
a. No change since year-end 2009
b. No change since year-end 2009 .
c. Account changes since year-end 2009 are not significant in either amount or composition.
d. No change since year-end 2009.
e. No change since year-end 2009.
f. No change since year-end 2009.
g. No change since year-end 2009
23. Retrospectively Rated Contracts and Contracts Subject to Redetermination

No change since year-end 2009.
24. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2009 were $\$ 14.4$ million. As of September 30, 2010, $\$ 3.8$ million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now $\$ 7.7$ million as a result of reestimation of unpaid claims and claim adjustment expenses. Therefore, there has been a $\$ 2.9$ million favorable prior year development since December 31, 2010.
25. Intercompany Pooling Arrangements

No change since year-end 2009.
26. Structured Settlements

No change since year-end 2009.
27. Health Care Receivables

No change since year-end 2009.
28. Participating Policies

No change since year-end 2009.
29. Premium Deficiency Reserves

No change since year-end 2009.
30. High Deductibles

No change since year-end 2009.
31. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

No change since year-end 2009.
32. Asbestos/Environmental Reserves

No change since year-end 2009
33. Subscriber Savings Accounts

No change since year-end 2009.
34. Multiple Peril Crop Insurance

No change since year-end 2009.
35. Financial Guaranty Insurance

The Company has no financial guaranty insurance exposure.

## 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 Yes [ ] No [X] Domicile, as required by the Model Act?
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?
2.2 If yes, date of change:
3. Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [ ] No [X]
If yes, complete the Schedule Y-Part 1 - organizational chart.
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 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 Name of Entity | NAIC Company Code | 3 State of Domicile |
| :---: | :---: | :---: |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

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

12/31/2007
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.

12/31/2007
6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).
6.4 By what department or departments?

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

Yes [ ] No [ ] NA [X]
6.6 Have all of the recommendations within the latest financial examination report been complied with?

Yes [X] No [ ] NA [ ]
Yes [ ] No [X]

Yes [ ] No [X]

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 Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

| 1 Affiliate Name | $\begin{gathered} 2 \\ \text { Location } \\ \text { (City, State) } \end{gathered}$ | $\begin{gathered} \hline 3 \\ \text { FRB } \end{gathered}$ | $\begin{gathered} 4 \\ \mathrm{OCC} \end{gathered}$ | $\begin{gathered} 5 \\ \text { OTS } \\ \hline \end{gathered}$ | $\begin{gathered} 6 \\ \text { FDIC } \end{gathered}$ | $\begin{gathered} 7 \\ \text { SEC } \\ \hline \end{gathered}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

## GENERAL INTERROGATORIES

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.
9.11 If the response to 9.1 is No , please explain:
9.2 Has the code of ethics for senior managers been amended?
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?
9.31 19
15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

If no, attach a description with this statement.

## GENERAL INTERROGATORIES

16. 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?
16.1 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 |
| :---: | :---: |
| Bank of America | 540 W. Madison Street, Chicago, IITinois 60661 |

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

| 1 | 2 | 3 |
| :---: | :---: | :---: |
| Name(s) | Location(s) | Complete Explanation(s) |
|  |  |  |

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter?
16.4 If yes, give full and complete information relating thereto:

| 1 | 2 | 3 | 4 |
| :---: | :---: | :---: | :---: |
| Old Custodian | New Custodian | Date of Change | Reason |
|  |  |  |  |

16.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

| $\stackrel{1}{1}$ | $\begin{gathered} 2 \\ \text { Name(s) } \end{gathered}$ | $\begin{gathered} 3 \\ \text { Address } \end{gathered}$ |
| :---: | :---: | :---: |
| DTC ABA:107423 | CONNING ASSET MANAGEMENT | ONE FINANCIAL PLAZA, HARTFORD, .. CT. , 06103 |

17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

Yes [X] No [ ]
17.2 If no, list exceptions

## GENERAL INTERROGATORIES

(Responses to these interrogatories should be based on changes that have occurred since prior year end unless otherwise noted.) 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.
2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?

If yes, attach an explanation.
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?
4.2 If yes, complete the following schedule:

|  |  |  | TOTAL DISCOUNT |  |  |  | DISCOUNT TAKEN DURING PERIOD |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 Line of Business | 2 <br> Maximum Interest | $\begin{gathered} 3 \\ \text { Discount } \\ \text { Rate } \end{gathered}$ | 4 Unpaid Losses | Unpaid LAE | $\begin{gathered} 6 \\ \text { IBNR } \end{gathered}$ | 7 TOTAL | 8 Unpaid Losses | Unpaid LAE | $\begin{gathered} 10 \\ \text { IBNR } \end{gathered}$ | $\begin{gathered} \hline 11 \\ \text { TOTAL } \end{gathered}$ |
|  |  |  |  |  |  |  |  |  |  |  |
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|  |  | TOTAL | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

5. Operating Percentages:
5.1 A\&H loss percent
5.2 A\&H cost containment percent
5.3 A\&H expense percent excluding cost containment expenses
6.1 Do you act as a custodian for health savings accounts?
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?

SCHEDULE F-CEDED REINSURANCE

| 1 NAIC Company Code | 2 Federal ID Number | 3 Name of Reinsurer | 4 Location | 5 <br> Is Insurer <br> Authorized? <br> (Yes or No) |
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SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN
Current Year to Date - Allocated by States and Territories

| States, etc. | 1 | Direct Premiums Written |  | Direct Losses Paid (Deducting Salvage) |  | Direct Losses Unpaid |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 2 | 3 | 4 | 5 | 6 | 7 |
|  | Active Status | 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. Alabama .....anemene AL | N. |  | 0 |  | 0 |  | 0 |
| 2. Alaska .....a) AK | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 4. Arkansas ... AR | N |  | 0 |  | 0 |  | 0 |
| 5. California | N |  | 0 |  | 0 |  | 0 |
| 6. Colorado ...-----a | N |  | 0 |  | 0 |  | 0 |
| 7. Connecticut .............. CT | N. |  | 0 |  | 0 |  | 0 |
| 8. Delaware ...anemeneme DE | N |  | 0 |  | 0 |  | 0 |
| 9. District of Columbia _-_-_ DC | N |  | 0 |  | 0 |  | 0 |
| 10. Florida -.- FL | N |  | 0 |  | 0 |  | 0 |
| 11. Georgia | N |  | 0 |  | 0 |  | 0 |
| 12. Hawaii ...-. | N |  | 0 |  | 0 |  | 0 |
| 13. Idaho -...-a | N |  | 0 |  | 0 |  | 0 |
|  | L |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 16. Iowa _..._-a IA | N |  | 0 |  | 0 |  | 0 |
| 17. Kansas ..._) | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 19. Louisiana ..._-a-a | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 21. Maryland ..._-a | N |  | 0 |  | 0 |  | 0 |
| 22. Massachusetts ...--m MA | N |  | 0 |  | 0 |  | 0 |
| 23. Michigan _-_M | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 25. Mississippi _-_-momememer MS | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 27. Montana -_-a | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 29. Nevada -.._-a | N |  | 0 |  | 0 |  | 0 |
| 30. New Hampshire .-..-_- ${ }_{\text {a }}$ | N |  | 0 |  | 0 |  | 0 |
| 31. New Jersey .....-.-.-.-...... NJ | N |  | 0 |  | 0 |  | 0 |
| 32. New Mexico _-_-_ NM | N |  | 0 |  | 0 |  | 0 |
| 33. New York ....-................ ${ }^{\text {N }}$ | N |  | 0 |  | 0 |  | 0 |
| 34. North Carolina -....-.-........ NC | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 37. Oklahoma .................... OK | N |  | 0 |  | 0 |  | 0 |
| 38. Oregon .-.an | N |  | 0 |  | 0 |  | $\ldots$ |
| 39. Pennsylvania _-._PA | N |  | 0 |  | 0 |  | 0 |
| 40. Rhode Island _..-_ RI | N |  | 0 |  | 0 |  | 0 |
| 41. South Carolina _..-_-_- SC | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 43. Tennessee -..-a | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 45. Utah _-.-a | N |  | 0 |  | 0 |  | 0 |
| 46. Vermont ....-.a_) | N |  | 0 |  | 0 |  | 0 |
| 47. Virginia _-_-_-a | N |  | 0 |  | 0 |  | 0 |
| 48. Washington ...-. WA | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
|  | N |  | 0 |  | 0 |  | 0 |
| 51. Wyoming .....-.-. WY | N |  | 0 |  | 0 |  | 0 |
| 52. American Samoa ............. AS | N |  | 0 |  | 0 |  | 0 |
| 53. Guam .-...an | N |  | $\cdots$ |  | 0 |  | 0 |
| 54. Puerto Rico _-_ PR | N |  | 0 |  | 0 |  | 0 |
| 55. U.S. Virgin Islands ___ VI | N |  | 0 |  | 0 |  | 0 |
| 56. Northern Mariana Islands MP | N |  | 0 |  | 0 |  | 0 |
| 57. Canada | N |  | 0 |  | 0 |  | 0 |
| 58. Aggregate Other Alien _-_. OT | XXX | 0 | 0 | 0 | 0 | 0 | 0 |
| 59. Totals | (a) 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| DETAILS OF WRITE-INS |  |  |  |  |  |  |  |
| 5801. | xxx |  |  |  |  |  |  |
| 5802. | . XXX . |  |  |  |  |  |  |
| 5803. | XXX |  |  |  |  |  |  |
| 5898. Summary of remaining writeins for Line 58 from overflow page | XXX. |  | 0 | 0 | 0 | 0 | 0 |
| 5899. Totals (Lines 5801 through 5803 plus 5898) (Line 58 above) | XXX | 0 | 0 | 0 | 0 | 0 | 0 |

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.
(a) Insert the number of $L$ responses except for Canada and Other Alien.

Schedule Y - Part 1
NONE

Part 1
NONE
Part 2
NONE

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


## 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 on "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.

1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?

Explanation:
1.
2.
3.

Bar Code:


## OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A - VERIFICATION


## SCHEDULE B - VERIFICATION

| Mortgage Loans |  |  |
| :---: | :---: | :---: |
|  | 1 Year To Date | $\begin{gathered} 2 \\ \begin{array}{c} \text { Prior Year Ended } \\ \text { December } 31 \end{array} \end{gathered}$ |
| 1. Book value/recorded investment excluding accrued interest, December 31 of prior year | 0 | 0 |
| 2. Cost of acquired: |  |  |
| 2.1. Actual cost at time of acquisition |  | 0 |
| 2.2. Additional investment made after acquisition |  | 0 |
|  |  | 0 |
| 4. Accrual of discount |  | 0 |
| 5. Unrealized valuation increase (decrease) |  | 0 |
| 6. Total gain (loss) on disposals |  | 0 |
| 7. Deduct amounts received on disposals |  | 0 |
| 8. Deduct amortization of premium and mortgage interest points and commitment fees |  | 0 |
| 9. Total foreign exchange change in book value/recorded investment excluding accrued interest |  | 0 |
| 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) | 0 | 0 |
| 12. Total valuation allowance - |  | 0 |
| 13. Subtotal (Line 11 plus Line 12) | 0 | 0 |
| 14. Deduct total nonadmitted amounts | 0 | 0 |
| 15. Statement value at end of current period (Line 13 minus Line 14) | 0 | 0 |

## SCHEDULE BA - VERIFICATION



SCHEDULE D - VERIFICATION

| Bonds and Stocks |  |  |
| :---: | :---: | :---: |
|  | Year To Date | $\begin{gathered} 2 \\ \hline \text { Prior Year Ended } \\ \text { December } 31 \end{gathered}$ |
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 20,645,677 | 23,006,221 |
| 2. Cost of bonds and stocks acquired |  | 3,452,765 |
| 3. Accrual of discount | 51,006 | 36,154 |
| 4. Unrealized valuation increase (decrease). |  | $(15,000)$ |
| 5. Total gain (loss) on disposals | 2,423 | 144,351 |
| 6. Deduct consideration for bonds and stocks disposed of | 2,947,165 | 5,612,980 |
| 7. Deduct amortization of premium | 47,843 | 99,058 |
| 8. Total foreign exchange change in book/adjusted carrying value |  |  |
| 9. Deduct current year's other than temporary impairment recognized | 1,961 | 266,776 |
| 10. Book/adjusted carrying value at end of current period (Lines $1+2+3+4+5-6-7+8-9$ ) | 17,702,137 | 20,645,677 |
| 11. Deduct total nonadmitted amounts | 0 |  |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 17,702,137 | 20,645,677 |

SCHEDULE D - PART 1B
Showing the Acquisitions, Dispositions and Non-Trading Activity


## SCHEDULE DA - PART 1

Short-Term Investments

|  | 1 | 2 | 3 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Pook/Adjusted |  |  |  |
| Carrying Value |  |  |  |

## SCHEDULE DA - VERIFICATION

Short-Term Investments

|  | \% $\begin{gathered}1 \\ \text { Year To Date }\end{gathered}$ | $\begin{gathered} 2 \\ \text { Prior Year } \\ \text { Ended December } 31 \end{gathered}$ |
| :---: | :---: | :---: |
| 1. Book/adjusted carrying value, December 31 of prior year | 1,418,345 | 1,118,036 |
| 2. Cost of short-term investments acquired | 13,331,604 | 19,950,374 |
| 3. Accrual of discount |  | 0 |
| 4. Unrealized valuation increase (decrease) |  | 0 |
| 5. Total gain (loss) on disposals |  | 0 |
| 6. Deduct consideration received on disposals | 13,214,302 | 19,648,498 |
| 7. Deduct amortization of premium |  | 1,567 |
| 8. Total foreign exchange change in book/adjusted carrying value |  | 0 |
| 9. Deduct current year's other than temporary impairment recognized |  | 0 |
| 10. Book/adjusted carrying value at end of current period (Lines $1+2+3+4+5-6-7+8-9$ ). | 1,535,647 | . 1,418,345 |
| 11. Deduct total nonadmitted amounts |  | 0 |
| 12. Statement value at end of current period (Line 10 minus Line 11) | 1,535,647 | 1,418,345 |

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 - Verification
NONE

Schedule A - Part 2
NONE
Schedule A - Part 3
NONE
Schedule B - Part 2
NONE
Schedule B - Part 3
NONE

Schedule BA - Part 2
NONE

Schedule BA - Part 3
NONE

Schedule D - Part 3
NONE

## SCHEDULE D - PART 4



Schedule DB - Part A - Section 1
NONE
Schedule DB - Part B - Section 1
NONE
Schedule DB - Part D
NONE

## SCHEDULE E-PART 1 - CASH



SCHEDULE E-PART 2 - CASH EQUIVALENTS


