

QUARTERLY STATEMENT

AS OF JUNE 30. 2023 OF THE CONDITION AND AFFAIRS OF THE TRIAD GUARANTY ASSURANCE CORPORATION, IN REHABILITATION NAIC Group Code 00421 00421 NAIC Company Code 10217 Employer's ID Number 56-1905825 (Current Period) (Prior Period) Organized under the Laws of Illinois , State of Domicile or Port of Entry Illinois Country of Domicile United States Incorporated/Organized 12/23/1994 Commenced Business 02/15/1995 Statutory Home Office 222 Merchandise Mart Plaza Chicago, IL, US 60654 (City or To , State, Country and Zip Code 101 South Stratford Road Winston-Salem, NC, US 27104 Main Administrative Office 336-723-1282 (Area Code) (Telephone Number) (Street and Number) (City or Town, State, Country and Zip Code) Winston-Salem, NC, US 27102 (City or Town, State, Country and Zip Code) Post Office Box 2300 Mail Address er or P.O. Box (Str and Numb Primary Location of Books and Records 101 South Stratford Road Winston-Salem, NC, US 27104 336-723-1282-1155 (Area Code) (Telephone Number) (Street and Number) (City or Town, State, Country and Zip Code) www.triadguaranty.com Internet Web Site Address Statutory Statement Contact Randall Keith Shields 336-723-1282-1155 (Area Code) (Telepho 336-761-5174 none Number) (Extension) (Name) rshields@tgic.com (Fax Number (E-Mail Address) **OFFICERS** Title Title Name Name OTHER OFFICERS **DIRECTORS OR TRUSTEES** State of County of The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and

that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and and this state 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.

Subscribed and sworn to before me this _day of

a. Is this an original filing?

Yes [] No []

b. If no: 1. State the amendment number

- 2. Date filed

- 3. Number of pages attached

| | A | SSETS | | | |
|-------------------------|---|---------------------------------------|---------------------------------------|---|--|
| | | | Current Statement Date | 9 | 4 |
| | | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | December 31 Prior Year Net Admitted Assets |
| 1. | Bonds | | | | |
| | 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 | | | | |
| | 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) | | | | |
| | Cash (\$196,622), | | | | |
| | cash equivalents (\$412,933) | | | | |
| | and short-term investments (\$). | | | | |
| | Contract loans (including \$ | | | | |
| | Derivatives | i i | i i | | |
| | Other invested assets | i i i i i i i i i i i i i i i i i i i | i i i i i i i i i i i i i i i i i i i | | |
| | Receivables for securities | 1 | 1 | | |
| | Securities lending reinvested collateral assets | | | | |
| | Aggregate write-ins for invested assets | | | | |
| | Subtotals, cash and invested assets (Lines 1 to 11) | | | | |
| | Title plants less \$ | | | | |
| | only) | | | | |
| | Investment income due and accrued | | | | |
| | Premiums and considerations: | | | | |
| | 15.1 Uncollected premiums and agents' balances in the course of | 0.000 | | 0,000 | 4 700 |
| | collection | | | 6,829 | 1,730 |
| | 15.2 Deferred premiums, agents' balances and installments booked but | | | | |
| | deferred and not yet due (including \$earned | | | | |
| | but unbilled premiums) | | | | |
| | 15.3 Accrued retrospective premiums (\$ | | | | |
| | contracts subject to redetermination (\$) | | | | |
| 16. | Reinsurance: | | | | |
| | 16.1 Amounts recoverable from reinsurers | | | | |
| | 16.2 Funds held by or deposited with reinsured companies | | | | |
| | 16.3 Other amounts receivable under reinsurance contracts | i i | i i | | |
| | Amounts receivable relating to uninsured plans | | | | |
| | Current federal and foreign income tax recoverable and interest thereon | i | i | | |
| | Net deferred tax asset Guaranty funds receivable or on deposit | i | i | | |
| | | | | | |
| | Electronic data processing equipment and software | | | | |
| | Furniture and equipment, including health care delivery assets (\$) | | | | |
| | () Net adjustment in assets and liabilities due to foreign exchange rates | | | | |
| | Receivables from parent, subsidiaries and affiliates | 1 | 1 | | |
| | Health care (\$ | | 1 | | |
| | Aggregate write-ins for other-than-invested assets | 1 | 1 | | |
| | Total assets excluding Separate Accounts, Segregated Accounts and | | | | |
| | Protected Cell Accounts (Lines 12 to 25) | 12,585,049 | | 12,585,049 | 12,471,236 |
| | From Separate Accounts, Segregated Accounts and Protected | ,000,010 | | , | ,,200 |
| | Cell Accounts | | | | |
| 28 | Total (Lines 26 and 27) | 12,585,049 | | 12,585,049 | 12,471,236 |
| | DETAILS OF WRITE-INS | ,000,010 | | , 300,010 | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Summary of remaining write-ins for Line 11 from overflow page | | | | |
| | Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) | | 1 | | |
| | | | | | |
| | | | | | |
| 2501. | | 1 | | | |
| 2501. 2502. | | | | | |
| 2501. 2502. 2503. | | | | | |

ASSETS

LIABILITIES, SURPLUS AND OTHER FUNDS

| | LIADILITILS, SURFLUS AND UTTER I | | |
|-------|--|----------------|-------------------|
| | | 1 Current | 2 December 31, |
| | | Statement Date | Prior Year |
| 1. | Losses (current accident year \$ | | |
| 2. | Reinsurance payable on paid losses and loss adjustment expenses | | |
| 3. | Loss adjustment expenses | | |
| 4. | Commissions payable, contingent commissions and other similar charges | | |
| 5. | Other expenses (excluding taxes, licenses and fees) | | |
| 6. | Taxes, licenses and fees (excluding federal and foreign income taxes) | | |
| 7.1 | Current federal and foreign income taxes (including \$ | | |
| 7.2 | 2 Net deferred tax liability | | |
| 8. | Borrowed money \$ and interest thereon \$ | | |
| | Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ and | | |
| 0. | including warranty reserves of \$ | | |
| | including \$ for medical loss ratio rebate per the Public Health Service Act) | 1 207 | 1 315 |
| | | | |
| | | | |
| 11. | Dividends declared and unpaid: | | |
| | 11.1 Stockholders | | |
| | 11.2 Policyholders | | |
| | Ceded reinsurance premiums payable (net of ceding commissions) | | |
| 13. | Funds held by company under reinsurance treaties | | |
| | Amounts withheld or retained by company for account of others | | |
| 15. | Remittances and items not allocated | | |
| 16. | Provision for reinsurance (including \$ certified) | | |
| 17. | Net adjustments in assets and liabilities due to foreign exchange rates | | |
| 18. | Drafts outstanding | | |
| 19. | Payable to parent, subsidiaries and affiliates | | |
| 20. | Derivatives | | |
| 21. | Payable for securities | | |
| 22. | Payable for securities lending | | |
| | Liability for amounts held under uninsured plans | | |
| | Capital notes \$and interest thereon \$ | | |
| | Aggregate write-ins for liabilities | | |
| | Total liabilities excluding protected cell liabilities (Lines 1 through 25) | | |
| | | | |
| | | | 453 373 |
| | Total liabilities (Lines 26 and 27) | | |
| | Aggregate write-ins for special surplus funds | | 0 500 000 |
| | Common capital stock | | 2,500,000 |
| | Preferred capital stock | | |
| 32. | Aggregate write-ins for other than special surplus funds | | |
| | Surplus notes | | |
| 34. | Gross paid in and contributed surplus | 2,535,982. | 2,535,982 |
| 35. | Unassigned funds (surplus) | 7,133,985. | 6,981,882 |
| 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) | 12,169,967 | 12,017,864 |
| 38. | Totals (Page 2, Line 28, Col. 3) | 12,585,049 | 12,471,236 |
| | DETAILS OF WRITE-INS | | |
| 2501. | | | |
| | | | |
| | | | |
| | Summary of remaining write-ins for Line 25 from overflow page | | |
| | | | |
| | Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | | |
| | | | |
| | | | |
| 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. | | | |
| | Summary of remaining write-ins for Line 32 from overflow page | | |
| | Totals (Lines 3201 through 3203 plus 3298) (Line 32 above) | | |
| | | | |

STATEMENT OF INCOME

| 1 | | 1 Current Year to Date | 2 Prior Year to Date | 3 Prior Year Ended December 31 |
|--|--|------------------------------|----------------------------|--------------------------------------|
| 4 | UNDERWRITING INCOME | to Date | to Date | December 31 |
| | Premiums earned: | | | |
| | 1.1 Direct (written \$) 1.2 Assumed (written \$10,879) | | 13 /96 | |
| | 1.3 Ceded (written \$ | | | |
| | 1.4 Net (written \$ | | | |
| _ | DEDUCTIONS: | | | |
| 2. | Losses incurred (current accident year \$ | | | |
| | 2.1 Direct | | | (154.869 |
| | 2.3 Ceded | , , | , , | |
| | 2.4 Net | | · · · / | |
| | Loss adjustment expenses incurred | | | |
| | Other underwriting expenses incurred Aggregate write-ins for underwriting deductions | | | 54 , 321 |
| 6. | Total underwriting deductions (Lines 2 through 5) | (10,930) | (48,129) | |
| 7. | Net income of protected cells | | | (· · · |
| 8. | Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7) | | | |
| | INVESTMENT INCOME | | | |
| 9. | Net investment income earned | 130.275 | 115,412 | 235.934 |
| | Net realized capital gains (losses) less capital gains tax of \$ | | (26,260) | (25,964 |
| 11. | Net investment gain (loss) (Lines 9 + 10) | | | |
| | | | | |
| 10 | | | | |
| | Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ | | | |
| | Finance and service charges not included in premiums | | | |
| | Aggregate write-ins for miscellaneous income | | | |
| | Total other income (Lines 12 through 14) | | | |
| 16. | Net income before dividends to policyholders, after capital gains tax and before all other federal | 152 102 | 100 777 | 105 016 |
| 17 | and foreign income taxes (Lines 8 + 11 + 15) Dividends to policyholders | | 100,777 | |
| | Net income, after dividends to policyholders, after capital gains tax and before all other federal | | | |
| | and foreign income taxes (Line 16 minus Line 17) | | | |
| | Federal and foreign income taxes incurred | | 100 777 | 105 015 |
| 20. | Net income (Line 18 minus Line 19)(to Line 22) | 152,102 | 180,777 | 405,215 |
| | CAPITAL AND SURPLUS ACCOUNT | | | |
| 21. | Surplus as regards policyholders, December 31 prior year | | | |
| 22. | Net income (from Line 20) | | | |
| | 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) | | | |
| | Change in net deferred income tax | | | |
| | Change in nonadmitted assets | | | |
| | Change in provision for reinsurance | | | |
| | Change in surplus notes | | | |
| | Cumulative effect of changes in accounting principles | | | |
| | Capital changes: | | | |
| | 32.1 Paid in | | | |
| | 32.2 Transferred from surplus (Stock Dividend) | | | |
| 33 | 32.3 Transferred to surplus Surplus adjustments: | | | |
| 55. | 33.1 Paid in | | | |
| | 33.2 Transferred to capital (Stock Dividend) | | | |
| C (| 33.3 Transferred from capital | | | |
| | Net remittances from or (to) Home Office | | | |
| | Dividends to stockholders | | | |
| | Aggregate write-ins for gains and losses in surplus | | | |
| | Change in surplus as regards policyholders (Lines 22 through 37) | 152,102 | 180,777 | 405,215 |
| 39. | Surplus as regards policyholders, as of statement date (Lines 21 plus 38) | 12,169,967 | 11,793,427 | 12,017,865 |
| | DETAILS OF WRITE-INS | | | |
| | | | | |
| | | | | |
| | | | | |
| | TOTALS (Lines 0501 through 0503 plus 0598) (Line 5 above) | | | |
| | | | | |
| 400 | | | | |
| | Summary of remaining write-ins for Line 14 from overflow page | | | |
| 403. | , | | | |
| 403. 498. | TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above) | | | |
| 403. 498. 499. 701. | Increase in contingency reserve | | | |
| 403. 498. 499. 701. 702. | Increase in contingency reserve Decrease in contingency reserve | | | |
| 403. 498. 499. 701. 702. 703. | Increase in contingency reserve | | | |

CASH FLOW

| | | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|-----|--|------------------------------|----------------------------|--------------------------------------|
| | Cash from Operations | | | |
| | Premiums collected net of reinsurance | | | |
| | Net investment income | | 159 , 152 | |
| | Miscellaneous income | | | |
| | Total (Lines 1 to 3) | . 168,362 | 184,155 | 400,601 |
| | Benefit and loss related payments | | | |
| | Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | |
| | Commissions, expenses paid and aggregate write-ins for deductions | | | |
| | Dividends paid to policyholders | | | |
| | Federal and foreign income taxes paid (recovered) net of \$tax on capital gains (losses) | | | |
| 10. | Total (Lines 5 through 9) | . 27,341 | 16,684 | 110,714 |
| 11. | Net cash from operations (Line 4 minus Line 10) | 141,021 | 167,471 | 289,887 |
| | Cash from Investments | | | |
| | Proceeds from investments sold, matured or repaid: 12.1 Bonds | | 1,717,451 | 2,880,183 |
| | 12.2 Stocks | 1 | | |
| | 12.3 Mortgage loans | 1 | | |
| | 12.4 Real estate | | | |
| | 12.5 Other invested assets | | | |
| | 12.7 Miscellaneous proceeds | | | |
| | 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 462,861 | 1,717,451 | 2,880,183 |
| | Cost of investments acquired (long-term only): | | | 2,000,105 |
| | 13.1 Bonds | 926 002 | 2 571 397 | 3 377 384 |
| | 13.2 Stocks | | | |
| | 13.3 Mortgage loans | 1 | | |
| | 13.4 Real estate | | | |
| | 13.5 Other invested assets | 1 | | |
| | 13.6 Miscellaneous applications | | | |
| | 13.7 Total investments acquired (Lines 13.1 to 13.6) | 926,002 | 2,571,397 | 3,377,384 |
| | Net increase (or decrease) in contract loans and premium notes | | | |
| | Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | | (853,946) | (497,201) |
| | Cash from Financing and Miscellaneous Sources | | | |
| 16. | Cash provided (applied): | | | |
| | 16.1 Surplus notes, capital notes | | | |
| | 16.2 Capital and paid in surplus, less treasury stock | | | |
| | 16.3 Borrowed funds | | | |
| | 16.4 Net deposits on deposit-type contracts and other insurance liabilities | | | |
| | 16.5 Dividends to stockholders | | | |
| | 16.6 Other cash provided (applied) | | (868) | (868) |
| | Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) | | (868) | (868) |
| | RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| | Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) | | (687,343) | |
| 19. | Cash, cash equivalents and short-term investments: | | | |
| | 19.1 Beginning of year | | 1,139,856 | 1,139,856 |
| | 19.2 End of period (Line 18 plus Line 19.1) | 609,554 | 452,513 | 931,674 |

NOTES TO FINANCIAL STATEMENTS

As directed by the Office of Special Deputy Receiver, representing the Illinois Director of Insurance, Notes to the Financial Statements are no longer required by the Company. Questions regarding specific items usually included in the Notes should be directed to the annual statement contact.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

| 1.1 | Did the reporting entity experience any material tra Domicile, as required by the Model Act? | insactions requiring the filing of Disclosure | e of Material | Fransactio | ns with the S | ate of | Y | es [] | No [X] |
|------------|--|---|---|--------------------------------|--------------------------------|----------------------|---------|--------|---------|
| 1.2 | If yes, has the report been filed with the domiciliary | | | | | | Y | es [] | No [] |
| 2.1 | Has any change been made during the year of this reporting entity? | | | | | | Y | es [] | No [X] |
| 2.2 | If yes, date of change: | | | | | | | | |
| 3.1 | Is the reporting entity a member of an Insurance H which is an insurer? | olding Company System consisting of two | or more affil | iated pers | ons, one or n | nore of | Y | es [X] | No [] |
| | If yes, complete Schedule Y, Parts 1 and 1A. | | | | | | | | |
| 3.2 | Have there been any substantial changes in the or | ganizational chart since the prior quarter | end? | | | | Y | es [] | No [X] |
| 3.3 | If the response to 3.2 is yes, provide a brief descrip | 0 | | | | | | | |
| 3.4 | Is the reporting entity publicly traded or a member | of a publicly traded group? | | | | | Y | es [X] | No [] |
| 3.5 | If the response to 3.4 is yes, provide the CIK (Cent | tral Index Key) code issued by the SEC fo | r the entity/gr | oup | | | | 000 | 0911631 |
| 4.1 | Has the reporting entity been a party to a merger of | or consolidation during the period covered | by this stater | nent? | | | Y | es [] | No [X] |
| 4.2 | If yes, provide the name of entity, NAIC Company ceased to exist as a result of the merger or consol | idation. | | | | | | | |
| | r | 1 Name of Entity | 2 NAIC Comp | | 3 State of D | | | | |
| 5. | If the reporting entity is subject to a management a fact, or similar agreement, have there been any sign of yes, attach an explanation. | | | | | | Yes [] | No [] | NA [X] |
| 6.1 | State as of what date the latest financial examinati | on of the reporting entity was made or is b | eing made | | | | | 12/ | 31/2007 |
| 6.2 | State the as of date that the latest financial examin This date should be the date of the examined bala | nation report became available from either nce sheet and not the date the report was | the state of o completed o | domicile o r released | the reporting | g entity. | | 12/ | 31/2007 |
| 6.3 | State as of what date the latest financial examinati or the reporting entity. This is the release date or or sheet date). | ompletion date of the examination report | and not the d | ate of the | examination | balance | | 06/ | 30/2009 |
| 6.4 | By what department or departments? Illinois Department of Insurance | | | | | | | | 2000 |
| 6.5 | Have all financial statement adjustments within the statement filed with Departments? | e latest financial examination report been a | accounted for | in a subs | equent financ | ial | Yes [] | No [] | NA [X] |
| 6.6 7.1 | Have all of the recommendations within the latest f Has this reporting entity had any Certificates of Au | | | | | | Yes [X] | No [] | NA [] |
| | suspended or revoked by any governmental entity If yes, give full information: | | | | | | Y | es [] | No [X] |
| 8.1 | Is the company a subsidiary of a bank holding com | npany regulated by the Federal Reserve B | | | | | Y | es [] | No [X] |
| 8.2 | If response to 8.1 is yes, please identify the name | of the bank holding company. | | | | | | | |
| 8.3 | Is the company affiliated with one or more banks, t | | | | | | Y | es [] | No [X] |
| 8.4 | If response to 8.3 is yes, please provide below the federal regulatory services agency [i.e. the Federa Deposit Insurance Corporation (FDIC) and the Sec | names and location (city and state of the I Reserve Board (FRB), the Office of the 0 | main office) o Comptroller o | of any affil f the Curre | ates regulate ency (OCC), t | d by a he Federal | | | |
| | regulator.] | 2 | | 3 | 4 | 5 | 6 | | |
| | Affiliate Name | Location (City, State) | | FRB | 000 | FDIC | SEC | | |
| | | | | | | | | | |
| 9.1 | Are the senior officers (principal executive officer, similar functions) of the reporting entity subject to a (a) Honest and ethical conduct, including the ethic (b) Full, fair, accurate, timely and understandable (c) Compliance with applicable governmental laws (d) The prompt internal reporting of violations to a (e) Accountability for adherence to the code. | a code of ethics, which includes the follow cal handling of actual or apparent conflicts disclosure in the periodic reports required s, rules and regulations; | ing standards of interest be to be filed by | s? etween pe / the repor | rsonal and pr | | | es [X] | No [] |
| 9.11 | If the response to 9.1 is No, please explain: | | | | | | | | |
| 9.2 | Has the code of ethics for senior managers been a | amended? | | | | | Ye | es [] | No [X] |
| 9.21 | If the response to 9.2 is Yes, provide information re | | | | | | | | |
| 9.3 | Have any provisions of the code of ethics been wa | ived for any of the specified officers? | | | | | Ye | es [] | No [X] |
| 9.31 | If the response to 9.3 is Yes, provide the nature of | any waiver(s). | | | | | | | |
| | | FINANCIA | L | | | | | | |
| 10.1 | Does the reporting entity report any amounts due f | rom parent, subsidiaries or affiliates on Pa | age 2 of this : | statement |) | | Ye | es [X] | No [] |
| 10.2 | If yes, indicate any amounts receivable from paren | t included in the Page 2 amount: | | | | \$ | | | 1,527 |

GENERAL INTERROGATORIES

| 11.1 | Were any of the stocks for use by another per | | | | / loaned, pla | | otion agr | | | | Yes [] | No [¥] |
|--------|---|--|---|--|--|--|-----------------------------------|---|---|-------------------|---------------------------------|--------|
| 11.2 | If yes, give full and cor | | | | ang agreeme | ino.) | | | | | 100 [] | |
| 12 | Amount of real estate | | | er invested assets i | | | | | | | | |
| 13. | Amount of real estate | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 14.1 | Does the reporting er | - | - | in parent, subsidiar | ies and amilia | ates ? | | | | | Yes [] | NO [V] |
| 14.2 | If yes, please comple | te the follow | ing: | | | | 1 | 1 | | 2 | | |
| | 14.22 Prefi 14.23 Com 14.24 Shot 14.25 Mort 14.26 All C 14.27 Tota (Sub | erred Stock . mon Stock . t-Term Inve gage Loans other | stments on Real Estate in Parent, Sub 4.21 to 14.26) | e sidiaries and Affilia ded in Lines 14.21 | tes | \$ \$ \$ \$ | Prior Ye Book/A Carrying | aer-End djusted g Value | Book Carry \$ \$ \$ \$ \$ \$ \$ | | | |
| | | | | | | \$ | | | \$ | | | |
| 15.1 | Has the reporting entit | y entered in | to any hedging | transactions report | ed on Scheo | dule DB? | | | | | Yes [] | No [X] |
| 15.2 | If yes, has a comprehe | | - | edging program bee | n made avai | ilable to the | domicilia | ry state? | | Yes | [] No [] | NA [X] |
| 16. | 16.2 Total book/adj | r's security le of reinveste usted carryir | ending progran ed collateral as ng value of reir | n, state the amount sets reported on So rvested collateral as ted on the liability p | chedule DL, l ssets reporte | Parts 1 and | 2 | | | \$ | | |
| 17. | Excluding items in Sch entity's offices, vaults pursuant to a custodia Considerations, F. Out Handbook? | or safety dep l agreement tsourcing of | oosit boxes, we with a qualifie Critical Functio | ere all stocks, bonds d bank or trust com ons, Custodial or Sa | s and other s pany in acco ifekeeping A | ecurities, ov ordance with greements o | vned thro Section of the NA | oughout the curren 1, III – General Ex NC <i>Financial Cond</i> | nt year held camination <i>lition Examiner</i> s | 5 | Yes [X] | No [] |
| 17.1 | For all agreements that | t comply wit | h the requirem | | inancial Con | dition Exami | ners Har | | the following: | | | |
| | | The Northe | Name of rn Trust Compa | 1 f Custodian(s) any | | 50 South La | C aSalle S | 2 Custodian Address Street, Chicago, | : Illinois 60603 | k | | |
| 17.2 | For all agreements tha location and a comple | | | equirements of the N | IAIC Financi | ial Condition | Examin | <i>ers Handbook</i> , pro | ovide the name, | | | |
| | | | 1 Name(s) | | 2 Location(s) | | | 3 Complete Expla | nation(s) | | | |
| 17.3 | Have there been any o | changes, inc | luding name cl | hanges, in the custo | odian(s) iden | tified in 17.1 | during t | the current quarter | ? | | Yes [] | No [X] |
| 17.4 | If yes, give full and cor | nplete inforr 1 | nation relating | thereto: | | 3 | | | 4 | | | |
| | | Old Cust | odian | New Custodi | an | Date of Cha | nge | Rea | | | | |
| 17.5 | Investment manageme authority to make inve reporting entity, note a | stment decis | sions on behalf | f of the reporting en | tity. For asse | ets that are n | nanaged | l internally by emp | that have the loyees of the | | | |
| | Na Mesirow Financial I | | <mark>or Individual</mark> lanagement Ir | nc III | | | Affiliati | on | | | | |
| 17.509 | 7 For those firms/individ (i.e., designated with | luals listed in | n the table for | Question 17.5, do a | ny firms/indi | viduals unaf | filiated w | | | | Yes [X] | No [] |
| 17.509 | 8 For firms/individuals u does the total assets | naffiliated w under mana | ith the reportin gement aggreg | ng entity (i.e., desigr gate to more than 5 | nated with a ' 0% of the rep | "U") listed in porting entity | the table 's invest | e for Question 17.5 ted assets? | 5, | | Yes [X] | No [] |
| 17.6 | For those firms or indiv | viduals listed | l in the table fo | or 17.5 with an affilia 2 | ation code of | "A" (affiliate | d) or "U" | ' (unaffiliated), prov | | ation for the tab | ble below. | 1 |
| | Central Registr Depository Nu | | | e of Firm or dividual | | egal Entity entifier (LEI) | | Register | | | ent Manageme nent (IMA) File | |
| | 1111135 | | | ncial Investment Inc | IWFK35GSRKL | _20LE5C129 | | SEC | | DS | | |
| | Have all the filing requ If no, list exceptions: | irements of | the <i>Purposes</i> a | and Procedures Ma | nual of the N | IAIC Investn | nent Ana | alysis Office been f | ollowed? | ······ | Yes [X] | No [] |
| 19. | PL security is b. Issuer or oblig | n necessary not available or is current s an actual o | to permit a full on all contract expectation of | l credit analysis of the credit analysis of the credit analysis of the credit and prine ultimate payment of the credit of the cr | he security d cipal paymen f all contracte | loes not exis nts. ed interest a | t or an N nd princi | NAIC CRP credit ra | ating for an FE | | Yes [] | No [X] |
| 20. | By self-designating PL | | | | | | | | | | 100 [] | [/] |
| 20. | a. The security w | as purchase | ed prior to Janu | , , , | Ū | | | Ū | n security. | | | |

GENERAL INTERROGATORIES

| | c. 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. 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] |
| 21. | By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self- designated FE fund: | | |
| | a. The shares were purchased prior to January 1, 2019. | | |
| | b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. | | |
| | c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019. | | |
| | d. The fund only or predominantly holds bonds in its portfolio. | | |
| | e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO. | | |
| | f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed. | | |
| | Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? | Yes [] No | [X] |

GENERAL INTERROGATORIES PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves,") discounted at a rate of interest greater than zero?

Yes [] No [X]

4.2 If yes, complete the following schedule:

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

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

| 1 | 2 | 3 | 4 | 5 | 6 Certified Reinsurer Rating (1 through 6) | 7 Effective Date of Certified Reinsurer Rating |
|----------------------|---------------|-------------------|-----------------------------|-------------------|---|---|
| | | | | | Certified | Effective Date |
| NAIC Company Code | | | | | Reinsurer Rating | of Certified |
| Company Code | ID Number | Name of Reinsurer | Domiciliary Jurisdiction | Type of Reinsurer | (1 through 6) | Reinsurer Rating |
| | 12 110 112 01 | | 2 on monitary our routed of | | (1 anough 0) | - terrearer i tatrig |
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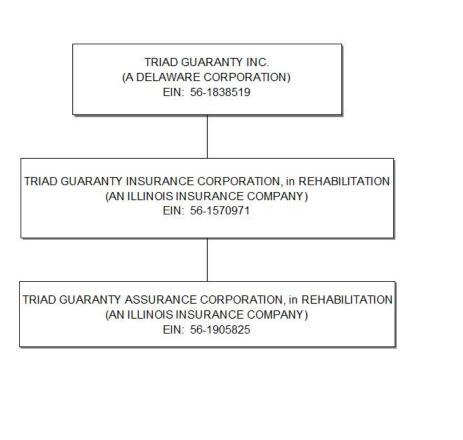
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

| | | 1 | | Current Year to Date - Allocated by States and Territories Direct Premiums Written Direct Losses Paid (Deducting Salvage) Direct Losses Unpaid | | | | | | |
|-----------------|--|--------------|-------------------------|--|-----------------------|-------------------------|-----------------------|-------------------------|-----------------------|--|
| | | | | 2 | 3 | 4 | 5 | 6 | 7 | |
| | States, etc. | | Active Status (a) | Current Year To Date | Prior Year To Date | Current Year To Date | Prior Year To Date | Current Year To Date | Prior Year To Date | |
| 1. | Alabama | AL | N N | To Date | TODAte | TO Date | TODAte | To Date | TODAte | |
| | Alaska | | N | | | | | | | |
| 3. | Arizona | AZ | N | | | | | | | |
| 4. | Arkansas | AR | N | | | | | | | |
| 5. | California | CA | N | | | | | | | |
| | Colorado | | N | | | | | | | |
| | Connecticut | | N | | | | | | | |
| | Delaware | | N | | | | | | | |
| | Dist. Columbia | | N | | | | | | | |
| | Florida | | N N | | | | | | | |
| | Georgia Hawaii | | NNNNN | | | | | | | |
| | Idaho | | NQ | | | | | | | |
| | | ID | v | | | | | | | |
| | Indiana | | N | | | | | | | |
| | lowa | | N | | | | | | | |
| | Kansas | | Q | | | | | | | |
| | Kentucky | | N | | | | | | | |
| | Louisiana | | N | | | | | | | |
| | Maine | | N | | | | | | | |
| 21. | Maryland | MD | N | | | | | | | |
| | Massachusetts | | N | | | | | | | |
| | Michigan | | N | | | | | | | |
| | Minnesota | | N | | | | | | | |
| | Mississippi | | N | | | | | | | |
| | Missouri | | Q N | | | | | | | |
| | Montana Nebraska | | NNNNN | | | | | | | |
| | Nevada | | NNNNN | | | | | | | |
| | New Hampshire | | NN. | | | | | | | |
| | New Jersey | | N | | | | | | | |
| | New Mexico | | N | | | | | | | |
| | New York | | Q | | | | | | | |
| | No. Carolina | | Ν | | | | | | | |
| | No. Dakota | | N | | | | | | | |
| 36. | Ohio | ОН | Q | | | | | | | |
| 37. | Oklahoma | OK | N | | | | | | | |
| 38. | Oregon | OR | N | | | | | | | |
| 39. | Pennsylvania | .PA | N | | | | | | | |
| | Rhode Island | | N | | | | | | | |
| | So. Carolina | | N | | | | | | | |
| | So. Dakota | SD | N | | | | | | | |
| | Tennessee | | N | <u></u> | + | | | | + | |
| | Texas | | Q | | | | | | | |
| | Utah Vermont | | N N | L | † | | | | <u>†</u> | |
| | Vermont Virginia | | NNNNN | | | | | | | |
| | Washington | | N | | 1 | | | | | |
| | Washington | | NN | | 1 | | | | | |
| | Wisconsin | | N | | | | | | | |
| | Wyoming | | N | | | | | | | |
| | American Samoa | | N | | | | | | | |
| 53. | Guam | GU | N | | | | | | | |
| 54. | Puerto Rico | PR | N | | | | | | | |
| 55. | U.S. Virgin Islands | VI | N | | | | | | | |
| | Northern Mariana Islands. | | N | | | | | | | |
| | Canada | | | | | | | | | |
| | Aggregate Other Alien | OT | XXX | | + | | | | + | |
| 59. | Totals DETAILS OF WRITE-INS | | XXX | | | | | | | |
| 58001. | DETAILS OF WRITE-INS | | ХХХ | | | | | | | |
| 58002. | | | ХХХ | | | | | | | |
| 58003. 58998 | Summary of remaining wri | | XXX | <u> </u> | | | | | | |
| | for Line 58 from overflow p TOTALS (Lines 58001 thro 58003 plus 58998) (Line 5 | bage bugh | XXX | | | | | | | |
| 1 | above) | | XXX | | | | | | | |

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG
 R – Registered – Non-domiciled RRGs

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

TRIAD GUARANTY INC. and SUBSIDIARIES



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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 |
|-------|--------------------------|---------|---------------------|---------|------------|---------------------------|---|-------------|--------------|---------------------------|-----------------------|---------------|-----------------------|-----------|--------|
| | | | | | | Name of | | | | | Type of Control | | | | |
| | | | | | | Securities Exchange if | | | Relationship | | (Ownership, Board. | If Control is | | ls an SCA | |
| | | NAIC | | | | Publicly | Names of | | to | | | Ownership | | Filing | |
| Group | | Company | ID | Federal | | Traded (U.S. or | Parent, Subsidiaries | Domiciliary | Reporting | Directly Controlled by | Attorney-in-Fact, | Provide | Ultimate Controlling | Required? | |
| Code | Group Name | Code | Number | RSSD | CIK | International) | or Affiliates | Location | Entity | (Name of Entity/Person) | Influence, Other) | Percentage | Entity(ies)/Person(s) | (Yes/No) | * |
| 00404 | | 00000 | 50 4000540 | | 0000044004 | | | USA | UDP | | OWNERSHIP | 10.0 | WILLIAM T. RATLIFF | NO | 4 |
| 00421 | COLLATERAL HOLDINGS, LTD | 00000 | 56 - 1838519 | | 0000911631 | UICBB | TRIAD GUARANTY INC TRIAD GUARANTY INSUURANCE | USA | UDP | COLLATERALHOLDINGS, LTD | UWINERSHIP | | WILLIAM T. RATLIFF | NU | ······ |
| 00421 | COLLATERAL HOLDINGS, LTD | 24350 | 56-1570971 | | | | CORPORATION, IN REHABILITATION | USA | RE | TRIAD GUARANTY INC. | OWNERSHIP. | 100.0 | AND FAMILY | NO | |
| | | | | | | | | | | TRIAD GUARANTY INSUURANCE | | | | | |
| | | | | | | | TRIAD GUARANTY ASSUURANCE | | | CORPORATION, IN | | | WILLIAM T. RATLIFF | | |
| 00421 | COLLATERAL HOLDINGS, LTD | 10217 | 56 - 1905825 | | | | CORPORATION, IN REHABILITATION | USA | DS | REHABILITATION | OWNERSHIP | | AND FAMILY | NO | |
| | | | | | | | | | | | | | | | |
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Asterisk

12

Explanation

Part 1 NONE Part 2 NONE

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) | 2023 Loss and LAE Payments on Claims Reported as of Prior Year-End | 2023 Loss and LAE Payments on Claims Unreported as of Prior Year-End | Total 2023 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. 2020 + Prior | | | | 15 | | 15 | 291 | | | | | | |
| 2. 2021 | | 1 | 12 | | | | | | | 12 | | (1) | (1) |
| 3. Subtotals 2021 + prior | | 1 | | 15 | | 15 | | | | | (36) | (1) | (37) |
| 4. 2022 | | 7 | 62 | | | | | | 1 | | (23) | (6) | (30) |
| 5. Subtotals 2022 + prior | | 8 | 417 | 15 | | 15 | | | | | (60) | (7) | (67) |
| 6. 2023 | xxx | xxx | xxx | xxx | | | xxx | | 7 | | xxx | xxx | |
| 7. Totals | . 409 | 8 | 417 | 15 | | 15 | 334 | 28 | 7 | 370 | (60) | (7) | (67) |
| 8. Prior Year-End Surplus As Regards Policy- holders | - 12,018 | | | | | | | | | | 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. (14.7) | 2. (90.3) | Col. 13, Line 7 |
| | | | | | | | | | | | | | Line 8 4. (0.6) |

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

| | | Response |
|----|---|----------|
| 1. | Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? | NO |
| 2. | Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? | NO |
| 3. | Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? | NO |
| 4. | Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement? | NO |
| 5. | AUGUST FILING Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter. | NO |

Explanation:

Bar Code:

1.

2.

3.

4.

5.

5. The Company is in Rehabilitation and is not required to file this report.

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OVERFLOW PAGE FOR WRITE-INS

STATEMENT AS OF JUNE 30, 2023 OF THE TRIAD GUARANTY ASSURANCE CORPORATION, IN REHABILITATION

SCHEDULE A – VERIFICATION

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

SCHEDULE B – VERIFICATION

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

SCHEDULE BA – VERIFICATION

| Other Long-Term Invested Assets | Other | Lona-Term | Invested | Assets |
|---------------------------------|-------|-----------|----------|--------|
|---------------------------------|-------|-----------|----------|--------|

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

SCHEDULE D – VERIFICATION

Bonds and Stocks

| | 1 | 2 | |
|---|--------------|------------------|--|
| | | Prior Year Ended | |
| | Year To Date | December 31 | |
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | | | |
| 2. Cost of bonds and stocks acquired | | | |
| 3. Accrual of discount | | | |
| 4. Unrealized valuation increase (decrease) | | <u> </u> | |
| 5. Total gain (loss) on disposals | | (25,964) | |
| 6. Deduct consideration for bonds and stocks disposed of | | | |
| 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. Total investment income recognized as a result of prepayment penalties and/or acceleration fees | <u> </u> | | |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) | | | |
| 12. Deduct total nonadmitted amounts | | | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 11,877,184 | 11,452,486 | |

SCHEDULE D - PART 1B

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

| NAIC Designation | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|--|---|--|--|---|---|--|---|---|
| BONDS | | | | | | | | |
| 1. NAIC 1 (a) 2. NAIC 2 (a) | | | | | | | | |
| 3. NAIC 3 (a) 4. NAIC 4 (a) | | | | | | | | |
| 5. NAIC 5 (a) 6. NAIC 6 (a) 7. Total Bonds | | 323,535 | 306.999 | (18,682) | 11.879.326 | 11,877,180 | | 11,452,481 |
| PREFERRED STOCK | 11,0/9,320 | 323,333 | 300,399 | (16,002) | 11,079,320 | 11,077,100 | | 11,432,401 |
| 8. NAIC 1 | | | | | | | | |
| 9. NAIC 2 | | | | | | | | |
| 10. NAIC 3 | | | | | | | | |
| 11. NAIC 4 | | | | | | | | |
| 12. NAIC 5 | | | | | | | | |
| 13. NAIC 6 | | | | | | | | |
| 14. Total Preferred Stock | | | | | | | | |
| 15. Total Bonds & Preferred Stock | 11,879,326 | 323,535 | 306,999 | (18,682) | 11,879,326 | 11,877,180 | | 11,452,481 |

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

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

Schedule DA - Part 1

Schedule DA - Verification

Schedule DB - Part A - Verification

Schedule DB - Part B - Verification

Schedule DB - Part C - Section 1

Schedule DB - Part C - Section 2 NONE

Schedule DB - Verification

SCHEDULE E – PART 2 – VERIFICATION

(Cash Equivalents)

| | | 1 Year To Date | 2 Prior Year Ended December 31 |
|-----|---|----------------------|--------------------------------------|
| 1. | Book/adjusted carrying value, December 31 of prior year | | |
| 2. | Cost of cash equivalents acquired | | |
| 3. | Accrual of discount | | |
| 4. | Unrealized valuation increase (decrease) | | |
| 5. | Total gain (loss) on disposals | | |
| 6. | Deduct consideration received on disposals | 2,421,529 | |
| 7. | Deduct amortization of premium | | |
| 8. | Total foreign exchange change in book/adjusted carrying value | | |
| 9. | Deduct current year's other-than-temporary impairment recognized | | |
| 10. | Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | | |
| 11. | Deduct total nonadmitted amounts | | |
| 12. | Statement value at end of current period (Line 10 minus Line 11) | 412,933 | 855,287 |

Schedule A - Part 2

Schedule A - Part 3

Schedule B - Part 2

Schedule B - Part 3

Schedule BA - Part 2

Schedule BA - Part 3

SCHEDULE D - PART 3

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

| - | | | Snow | v All Long-Term Bonds and Stock Acquired During the Cu | irrent Quarter | | | | |
|-------------------------|---|-----------------------|--|---|------------------------------|----------------|-----------|--|--------------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| | | | | | | | | | NAIC Designation, |
| | | | | | | | | | NAIC Designation |
| | | | | | Number of | A stual | | Deid fen Asemied | Modifier and SVO |
| CUSIP Identification | Description | Foreign | Date Acquired | Name of Vendor | Number of Shares of Stock | Actual Cost | Par Value | Paid for Accrued Interest and Dividends | Administrative Symbol |
| Bonds - U.S. Gover | | TURIN | Date Acquired | | Shares of Stock | COSI | | | Symbol |
| | US TREASURY N/B 4.25 31/05/25 | | 06/14/2023 | WELLS FARGO BANK MINNESOTA NA | XXX | | | | 1.A FE |
| | Bonds - U.S. Governments | | | | | 223,383 | 225.000 | 392 | |
| Bonds - All Other G | | | | | | 220,000 | 220,000 | 002 | |
| | Territories and Possessions | | | | | | | | |
| | al Subdivisions of States. Territories and Possessions | | | | | | | | |
| | , | anteed Obligations of | of Agencies and Aut | thorities of Governments and Their Political Subdivisions | | | | | |
| | nd Miscellaneous (Unaffiliated) | antood opngatorio e | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| | CITIGROUP INC 5.61 29/09/26 | | | RBC DAIN RAUSCHER DAINRAUS | XXX | | | | 1.G FE |
| 1109999999 - E | Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | 100,152 | 100,000 | 1,200 | ХХХ |
| Bonds - Hybrid Secu | urities | | | | • | | , | · · · · · · | |
| Bonds - Parent, Sub | osidiaries and Affiliates | | | | | | | | |
| Bonds - SVO Identif | ied Funds | | | | | | | | |
| Bonds - Unaffiliated | Bank Loans | | | | | | | | - |
| Bonds - Unaffiliated | Certificates of Deposit | | | | | | | | |
| 2509999997 - E | Bonds - Subtotals - Bonds - Part 3 | | | | | 323,535 | 325,000 | 1,592 | XXX |
| 2509999999 - E | Bonds - Subtotals - Bonds | | | | | 323,535 | 325,000 | 1,592 | XXX |
| Preferred Stocks - I | ndustrial and Miscellaneous (Unaffiliated) Perpetual Pre | eferred | | | • | | | | - |
| Preferred Stocks - II | ndustrial and Miscellaneous (Unaffiliated) - Redeemabl | e Preferred | | | | | | | |
| Preferred Stocks - F | Parent, Subsidiaries and Affiliates - Perpetual Preferred | | | | | | | | |
| Preferred Stocks - F | Parent, Subsidiaries and Affiliates - Redeemable Prefer | red | | | | | | | |
| Common Stocks - Ir | ndustrial and Miscellaneous (Unaffiliated) Publicly Trade | ed | | | | | | | |
| Common Stocks - Ir | ndustrial and Miscellaneous (Unaffiliated) Other | | | | | | | | |
| Common Stocks - N | Iutual Funds - Designations Assigned by the SVO | | | | | | | | |
| | Iutual Funds - Designations Not Assigned by the SVO | | | | | | | | |
| | Init Investment Trusts - Designations Assigned by the S | | | | | | | | |
| | Init Investment Trusts - Designations Not Assigned by t | | | | | | | | |
| | Closed-End Funds - Designations Assigned by the SVO | | | | | | | | |
| | Closed-End Funds - Designations Not Assigned by the S | SVO | | | | | | | |
| | xchange Traded Funds | | | | | | | | |
| | arent, Subsidiaries and Affiliates - Publicly Traded | | | | | | | | |
| | arent, Subsidiaries and Affiliates - Other | | | | | | | | |
| 6009999999 Total | ls | | | | | 323,535 | XXX | 1,592 | XXX |

SCHEDULE D - PART 4

| | | | | | Sho | w All Long-T | erm Bonds a | nd Stock Solo | I, Redeemed | or Otherwise | Disposed of | During the C | urrent Quart | er | | | | | | |
|----------------|--|------------------------------|---|---------------------------------------|-------------------|---------------------|--------------------|---------------------|-------------|-----------------|----------------------|---------------|---------------|----------------|---------------|---------------|------------|----------------|-------------|-------------------------------------|
| 1 | 2 | 3 4 | 5 | 6 | 7 | 8 | 9 | 10 | | Change in E | ook/Adjusted Ca | arrying Value | | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| | | F | | | | | | | 11 | 12 | 13 Current Year's | 14 | 15 | Book/ | | | | Bond | | NAIC Designation, NAIC Desig. |
| | | e | | | | | | | Unrealized | | Other Than | Total Change | Total Foreign | Adjusted | Foreign | | | Interest/Stock | Stated | Modifier and |
| CUSIP | | i | | Number of | | | | Prior Year | Valuation | Current Year's | Temporary | in | Exchange | Carrying Value | Exchange Gain | Realized Gain | Total Gain | Dividends | Contractual | SVO |
| Identi- | | g Disposal | | Shares of | | | | Book/Adjusted | Increase/ | (Amortization)/ | Impairment | B./A.C.V. | Change in | at | (Loss) on | (Loss) on | (Loss) on | Received | Maturity | Administrative |
| fication | Description | n Date | Name of Purchaser | Stock | Consideration | Par Value | Actual Cost | Carrying Value | (Decrease) | Accretion | Recognized | (11+12-13) | B./A.C.V. | Disposal Date | Disposal | Disposal | Disposal | During Year | Date | Symbol |
| Bonds - U.S. (| | | | | | | | | | | | | | | | | | | | |
| | her Governments | | | | | | | | | | | | | | | | | | | |
| | States, Territories and P | | | | | | | | | | | | | | | | | | | |
| | Political Subdivisions of | | and Possessions t and all Non-Guaranteed O | hlighting of A | Verneine and Auth | a suiting of Course | managements and Th | ain Dalitical Cubdi | visione | | | | | | | | | | | |
| | ANNIE MAE 2.5 POOL ID | Decial Assessment | | I I I I I I I I I I I I I I I I I I I | Agencies and Autr | ionities of Gove | inments and Th | T Political Subu | VISIONS | | | 1 | 1 | 1 | | I I | | 1 | | |
| 3140X4-NT-9 F | M1301 | 06/01/2023 | MBS PAYDOWN | ХХХ | 1,974 | 1.974 | | 1,994 | | (4) | | (4) | | 1.974 | | | | 16 | 03/01/2029 | 1.A |
| F | ANNIE MAE 4.5 POOL ID | | | 1 | | | | | | , , | | , , | | | | | | | | 1 |
| | 930770 | | MBS PAYDOWN | XXX | | | | | | (4) | | (4) | | | | | | 11 | 03/01/2029 | 1.A |
| 0909999999 | | | ecial Assessment and all No | | | | | | | | | | | | | | | | | i |
| | | is of Agencies and | d Authorities of Government | ts and Their | 0.000 | 0.000 | 0.770 | 0.700 | | (8) | | (0) | | 0.000 | | | | | | 1007 |
| Dan da da da d | Political Subdivisions trial and Miscellaneous | (1 ha - 66 1; - t1) | | | 2,686 | 2,686 | 2,772 | 2,733 | | (8) | | (8) | | 2,686 | | | | 27 | XXX | XXX |
| | COMM MORTGAGE TRUST 3.612 | | | 1 | | | 1 | | | 1 | | 1 | 1 | 1 | 1 | . I | | 1 | | |
| 12625K-AE-5_P | 200L ID CR8 | | MBS PAYDOWN | ХХХ | | | | | | (31) | | (31) | | | | | | | 06/10/2046 | 1.A FE |
| 30231G-BL-5.1 | 1.571 15/04/23 | | MATURITY | ХХХ | | | | 100,044 | | (44) | | (44) | | | | | | | 04/15/2023 | 1.D FE |
| 437076-AZ-5_0 | | | MATURITY | ХХХ | 150,000 | | 158,435 | 150,741 | | (741) | | (741) | | 150,000 | | | | 2,025 | 04/01/2023 | 1.F FE |
| 1109999999 | - Bonds - Industrial and | Miscellaneous (L | Jnaffiliated) | | 304,313 | 304,313 | 315,687 | 305,109 | | (816) | | (816) | | 304,313 | | | | 3,539 | XXX | XXX |
| Bonds - Hybrid | d Securities | | | | | | • | | | | • | | • | | • | | | • | | |
| Bonds - Paren | nt, Subsidiaries, and Affi | liates | | | | | | | | | | | | | | | | | | |
| | Identified Funds | | | | | | | | | | | | | | | | | | | |
| | iliated Bank Loans | | | | | | | | | | | | | | | | | | | |
| | iliated Certificates of De | | | | | | | | | | | | | | | | | | | |
| | 7 - Bonds - Subtotals - B | | | | 306,999 | 306,999 | 318,459 | 307,842 | | (824) | | (824) | | 306,999 | | | | 3,566 | XXX | XXX |
| | 9 - Bonds - Subtotals - B | | | | 306,999 | 306,999 | 318,459 | 307,842 | | (824) | | (824) | | 306,999 | | | | 3,566 | XXX | XXX |
| | | | iated) - Perpetual Preferred | | | | | | | | | | | | | | | | | |
| | | | iated) - Redeemable Prefer | red | | | | | | | | | | | | | | | | |
| | cks - Parent, Subsidiarie | | | | | | | | | | | | | | | | | | | |
| | cks - Parent, Subsidiarie | | | | | | | | | | | | | | | | | | | |
| | cks - Industrial and Misco cks - Industrial and Misco | | | | | | | | | | | | | | | | | | | |
| | ks - Industrial and Misco | | | | | | | | | | | | | | | | | | | |
| | ks - Mutual Funds - Des | | | | | | | | | | | | | | | | | | | |
| | ks - Unit Investment Tru | | | | | | | | | | | | | | | | | | | |
| | | | s Not Assigned by the SVO | | | | | | | | | | | | | | | | | |
| | ks - Closed-End Funds | | | | | | | | | | | | | | | | | | | |
| | ks - Closed-End Funds | | | | | | | | | | | | | | | | | | | |
| | ks - Exchange Traded F | | | | | | | | | | | | | | | | | | | |
| | ks - Parent, Subsidiarie | | Publicly Traded | | | | | | | | | | | | | | | | | |
| | ks - Parent, Subsidiarie | | | | | | | | | | | | | | | | | | | |
| | , Allo | | | | | | | | | | | | l | | | ļ | | | | ····· |
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| | | ·· <u></u> †·- <u></u> †···· | | | łł | | <u>+</u> | + | | + | | + | <u>+</u> | <u>+</u> | | <u>+</u> | | <u>+</u> | | r |
| 60099999999 | | ···· | | | 306.999 | XXX | 318.459 | 307.842 | | (824) | | (824) | | 306.999 | | | | 3.566 | ХХХ | ХХХ |
| 0009999999 | 10(a)5 | | | | 300,999 | ۸۸۸ | 310,409 | JU1,042 | | (024) | | (024) | L | 200,999 | | 1 | | 3,000 | ۸۸۸ | AAA |

Schedule DB - Part A - Section 1

Schedule DB - Part B - Section 1

Schedule DB - Part D - Section 1

Schedule DB - Part D - Section 2

Schedule DB - Part E

Schedule DL - Part 1

Schedule DL - Part 2

E06, E07, E08, E09, E10, E11, E12

SCHEDULE E - PART 1 - CASH

| | Mont | th End De | oository Baland | ces | | | | |
|---|------------|------------|--|---|---|--------------|--------------|------------|
| 1 | 2 | 3 | 4 | 5 | Book Balance at End of Each Month During Current Quarter | | | 9 |
| | | Rate | Amount of Interest Received During Current | Amount of Interest Accrued at Current Statement | 6 | 7 | 8 | * |
| Open Depositories | Code | Interest | Quarter | Date | First Month | Second Month | i nira Month | ^ |
| Winston-Salem, North Truist BankCarolina | | | | | | | | XXX |
| 0199998 Deposits in1 depositories that do | | | | | | | | |
| 0199998 Deposits in1 depositories that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories | ХХХ | ХХХ | | | 1,673 | 2,785 | 3,515 | ХХХ |
| 0199999 Total Open Depositories | XXX | XXX | | | 202,511 | 504,505 | 196,622 | XXX |
| | | | | | | | | |
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| ······ | | | | | | | | |
| 0399999 Total Cash on Deposit 0499999 Cash in Company's Office | XXX XXX | XXX XXX | XXX | XXX | 202,511 | 504,505 | 196,622 | XXX XXX |
| 0599999 Total | XXX | XXX | | | 202,511 | 504,505 | 196,622 | XXX |

SCHEDULE E - PART 2 - CASH EQUIVALENTS

| Show Investments Owned End of Current Quarter | | | | | | | | | |
|---|--|-----------------------------|------------------------|----------------------------|--------------------------|-----------------|--------------------|-----------------|--|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | |
| | - | l ů | Date | Rate of | Maturity | Book/Adjusted | Amount of Interest | Amount Received | |
| CUSIP | Description | Code | Acquired | Interest | Date | Carrying Value | Due & Accrued | During Year | |
| | ents - Issuer Obligations | Code | | Interest | Date | Carrying value | Due & Accided | Duning real | |
| | ents - Residential Mortgage-Backed Securities | | | | | | | | |
| | ents - Commercial Mortgage-Backed Securities | | | | | | | | |
| Bondo U.S. Governme | ents - Other Loan-Backed and Structured Securities | | | | | | | | |
| | vernments - Issuer Obligations | | | | | | | | |
| | | | | | | | | | |
| Bonds - All Other Go | vernments – Residential Mortgage-Backed Securities | | | | | | | | |
| Deads All Other Co | vernments – Commercial Mortgage-Backed Securities | | | | | | | | |
| | vernments - Other Loan-Backed and Structured Securities | | | | | | | | |
| | | | | | | | | | |
| | Territories and Possessions (Direct and Guaranteed) - Issuer Obligations | | | | | | | | |
| | Territories and Possessions (Direct and Guaranteed) - Residential Mortgage-Backed | | | | | | | | |
| | Territories and Possessions (Direct and Guaranteed) - Commercial Mortgage-Backed S | | | | | | | | |
| | Territories and Possessions (Direct and Guaranteed) - Other Loan-Backed and Struc | | | | | | | | |
| | al Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - I | | | | | | | | |
| | al Subdivisions of States, Territories and Possessions (Direct and Guaranteed) – R | | | | | | | | |
| Bonds - U.S. Politica | al Subdivisions of States, Territories and Possessions (Direct and Guaranteed) – C | ommercial Mortgage-Backed : | Securities | | | | | | |
| Bonds - U.S. Politica | al Subdivisions of States, Territories and Possessions (Direct and Guaranteed) - C | ther Loan-Backed and Struc | tured Securities | | | | | | |
| Bonds - U.S. Special | Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of | Agencies and Authorities o | f Governments and Thei | r Political Subdivisions - | Issuer Obligations | | | | |
| | Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of | | | | | cked Securities | | | |
| | Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of | | | | | | | | |
| | Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of | | | | | | | | |
| | nd Miscellaneous (Unaffiliated) - Issuer Obligations | | | | Strief Zoan Baonoa ana S | | | | |
| | nd Miscellaneous (Unaffiliated) - Residential Mortgage-Backed Securities | | | | | | | | |
| | nd Miscellaneous (Unaffiliated) - Commercial Mortgage-Backed Securities | | | | | | | | |
| | nd Miscellaneous (Unaffiliated) - Other Loan-Backed and Structured Securities | | | | | | | | |
| | ities - Issuer Obligations | | | | | | | | |
| | ities - Residential Mortgage-Backed Securities | | | | | | | | |
| | | | | | | | | | |
| | ities - Commercial Mortgage-Backed Securities | | | | | | | | |
| | ities - Other Loan-Backed and Structured Securities | | | | | | | | |
| | idiaries and Affiliates Bonds - Issuer Obligations | | | | | | | | |
| | idiaries and Affiliates Bonds - Residential Mortgage-Backed Securities | | | | | | | | |
| | idiaries and Affiliates Bonds - Commercial Mortgage-Backed Securities | | | | | | | | |
| | idiaries and Affiliates Bonds - Other Loan-Backed and Structured Securities | | | | | | | | |
| | idiaries and Affiliates Bonds - Affiliated Bank Loans - Issued | | | | | | | | |
| | idiaries and Affiliates Bonds - Affiliated Bank Loans - Acquired | | | | | | | | |
| | ed Funds – Exchange Traded Funds – as Identified by the SVO | | | | | | | | |
| | Bank Loans - Unaffiliated Bank Loans - Issued | | | | | | | | |
| Bonds - Unaffiliated | Bank Loans - Unaffiliated Bank Loans - Acquired | | | | | | | | |
| Sweep Accounts | · | | | | | | | | |
| Exempt Money Market I | Mutual Funds - as Identified by SVO | | | | | | | | |
| All Other Money Marke | | | | | | | | | |
| | NORTHERN INSTITUTIONAL TREASURY PORTFOLI | | | | XXX | | 2.252 | | |
| |)ther Money Market Mutual Funds | | | | | 412.932 | | 12.12 | |
| Qualified Cash Pools | | | | | | 112,002 | 2,202 | 1 12,12 | |
| Other Cash Equivalen | | | | | | | | | |
| | Cash Equivalents | | | | I | 412.932 | 2 2.252 | | |
| | | | | | | | | 12.12 | |