



QUARTERLY STATEMENT
AS OF MARCH 31, 2018
OF THE CONDITION AND AFFAIRS OF THE
QualChoice Life and Health Insurance Company, Inc.

NAIC Group Code	4807 (Current Period)	4807 (Prior Period)	NAIC Company Code	70998	Employer's ID Number	71-0386640
Organized under the Laws of	Arkansas		State of Domicile or Port of Entry	AR		
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[X] Dental Service Corporation[] Other[]		Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[] No[X] N/A[]		Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[]	
Incorporated/Organized	10/17/1992		Commenced Business	04/25/1965		
Statutory Home Office	12615 Chenal Parkway, Suite 300 (Street and Number)		Little Rock, AR, 72211 (City or Town, State, Country and Zip Code)			
Main Administrative Office			12615 Chenal Parkway, Suite 300 (Street and Number)			
	Little Rock, AR, 72211 (City or Town, State, Country and Zip Code)					
Mail Address	12615 Chenal Parkway, Suite 300 (Street and Number or P.O. Box)		Little Rock, AR, 72211 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records			12615 Chenal Parkway, Suite 300 (Street and Number)			
	Little Rock, AR, 72211 (City or Town, State, Country and Zip Code)		(501)228-7111 (Area Code) (Telephone Number)			
Internet Web Site Address	www.qualchoice.com					
Statutory Statement Contact	Randall Crow (Name)		(501)219-5109 (Area Code)(Telephone Number)(Extension)			
	randall.crow@qualchoice.com (E-Mail Address)		(501)228-0135 (Fax Number)			

OFFICERS

Name	Title
Michael Edward Stock	President
Randall Alvin Crow	Treasurer
Charles Hanson	Secretary

OTHERS

Joni Self Daniels, Vice President - Operations
Betty Jo Tatum-Himes, Vice President - Sales & Marketing
Win Hammerly M.D., Vice President - Medical Affairs

DIRECTORS OR TRUSTEES

Mark Fred Bjornson
Philip Linwood Foster
David Allen Sorenson
Steven Charles Schramm
Charles Hanson

State of Arkansas
County of Pulaski 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.

(Signature)	(Signature)	(Signature)
Michael Edward Stock	Randall Alvin Crow	Charles Hanson
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
President	Treasurer	Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me this _____ day of _____, 2018
a. Is this an original filing?
b. If no, 1. State the amendment number
2. Date filed
3. Number of pages attached
Yes[X] No[]

(Notary Public Signature)

ASSETS

		Current Statement Date			4
		1	2	3	
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	20,833,955		20,833,955	20,098,653
2.	Stocks:				
2.1	Preferred stocks				
2.2	Common stocks				
3.	Mortgage loans on real estate:				
3.1	First liens				
3.2	Other than first liens				
4.	Real estate:				
4.1	Properties occupied by the company (less \$.....0 encumbrances)				
4.2	Properties held for the production of income (less \$.....0 encumbrances)				
4.3	Properties held for sale (less \$.....0 encumbrances)				
5.	Cash (\$.....32,725,238), cash equivalents (\$.....37,032) and short-term investments (\$.....3,836,387)	36,598,656		36,598,656	31,194,297
6.	Contract loans (including \$.....0 premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				1
12.	Subtotals, cash and invested assets (Lines 1 to 11)	57,432,611		57,432,611	51,292,951
13.	Title plants less \$.....0 charged off (for Title insurers only)				
14.	Investment income due and accrued	89,093		89,093	72,462
15.	Premiums and considerations:				
15.1	Uncollected premiums and agents' balances in the course of collection	125,393		125,393	989,068
15.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums)				
15.3	Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0)				
16.	Reinsurance:				
16.1	Amounts recoverable from reinsurers	51,407		51,407	996,119
16.2	Funds held by or deposited with reinsured companies				
16.3	Other amounts receivable under reinsurance contracts				
17.	Amounts receivable relating to uninsured plans				
18.1	Current federal and foreign income tax recoverable and interest thereon	768,937		768,937	500,684
18.2	Net deferred tax asset	28,877		28,877	25,267
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$.....0)				
22.	Net adjustments in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates	1,245,823		1,245,823	26,433
24.	Health care (\$.....0) and other amounts receivable	1,100,556	565,958	534,598	548,070
25.	Aggregate write-ins for other-than-invested assets	75,000	75,000		
26.	TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	60,917,697	640,958	60,276,739	54,451,054
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	TOTAL (Lines 26 and 27)	60,917,697	640,958	60,276,739	54,451,054
DETAILS OF WRITE-INS					
1101.	Rounding				1
1102.	.....				
1103.	.....				
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above)				1
2501.	Insurance Charter	75,000	75,000		
2502.	0				
2503.	.....				
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	75,000	75,000		

LIABILITIES, CAPITAL AND SURPLUS

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$.....0 reinsurance ceded)	12,578,694	1,121,273	13,699,967	12,625,207
2.	Accrued medical incentive pool and bonus amounts				
3.	Unpaid claims adjustment expenses	295,941		295,941	280,547
4.	Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act	8,322,531		8,322,531	6,458,220
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued	3,370,916		3,370,916	1,185,919
10.1	Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses))				
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable	70,507		70,507	60,930
12.	Amounts withheld or retained for the account of others				
13.	Remittances and items not allocated				
14.	Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current)				
15.	Amounts due to parent, subsidiaries and affiliates	118,766		118,766	323,747
16.	Derivatives				
17.	Payable for securities				
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and \$.....0 certified reinsurers)				
20.	Reinsurance in unauthorized and certified (\$.....0) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans	7,905,007		7,905,007	5,895,648
23.	Aggregate write-ins for other liabilities (including \$.....0 current)				2
24.	Total liabilities (Lines 1 to 23)	32,662,362	1,121,273	33,783,635	26,830,220
25.	Aggregate write-ins for special surplus funds	X X X	X X X		1,954,909
26.	Common capital stock	X X X	X X X	1,013,750	1,013,750
27.	Preferred capital stock	X X X	X X X	1,500,000	1,500,000
28.	Gross paid in and contributed surplus	X X X	X X X	45,537,206	45,537,206
29.	Surplus notes	X X X	X X X	5,000,000	5,000,000
30.	Aggregate write-ins for other-than-special surplus funds	X X X	X X X		
31.	Unassigned funds (surplus)	X X X	X X X	(26,557,852)	(27,385,031)
32.	Less treasury stock, at cost:				
32.1	0 shares common (value included in Line 26 \$.....0)	X X X	X X X		
32.2	0 shares preferred (value included in Line 27 \$.....0)	X X X	X X X		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	X X X	X X X	26,493,104	27,620,834
34.	Total Liabilities, capital and surplus (Lines 24 and 33)	X X X	X X X	60,276,739	54,451,054
DETAILS OF WRITE-INS					
2301.	Rounding				2
2302.	.....				
2303.	.....				
2398.	Summary of remaining write-ins for Line 23 from overflow page				
2399.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)				2
2501.	ACA Section 9010 Assessment	X X X	X X X		1,954,909
2502.	.....	X X X	X X X		
2503.	.....	X X X	X X X		
2598.	Summary of remaining write-ins for Line 25 from overflow page	X X X	X X X		
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	X X X	X X X		1,954,909
3001.	.....	X X X	X X X		
3002.	.....	X X X	X X X		
3003.	.....	X X X	X X X		
3098.	Summary of remaining write-ins for Line 30 from overflow page	X X X	X X X		
3099.	TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above)	X X X	X X X		

STATEMENT OF REVENUE AND EXPENSES

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	X X X	86,329	79,841	336,798
2.	Net premium income (including \$.....0 non-health premium income)	X X X	31,092,423	27,909,336	114,322,860
3.	Change in unearned premium reserves and reserves for rate credits	X X X			
4.	Fee-for-service (net of \$.....0 medical expenses)	X X X			
5.	Risk revenue	X X X			
6.	Aggregate write-ins for other health care related revenues	X X X			
7.	Aggregate write-ins for other non-health revenues	X X X	7,816	7,581	23,690
8.	Total revenues (Lines 2 to 7)	X X X	31,100,239	27,916,917	114,346,550
Hospital and Medical:					
9.	Hospital/medical benefits	1,711,074	18,782,370	20,283,754	73,144,747
10.	Other professional services				
11.	Outside referrals				
12.	Emergency room and out-of-area	253,645	2,784,251	3,179,235	13,220,418
13.	Prescription drugs		4,488,581	3,771,188	16,039,310
14.	Aggregate write-ins for other hospital and medical				
15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)	1,964,719	26,055,202	27,234,177	102,404,475
Less:					
17.	Net reinsurance recoveries		31,450	281,493	897,057
18.	Total hospital and medical (Lines 16 minus 17)	1,964,719	26,023,752	26,952,684	101,507,418
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$.....1,017,909 cost containment expenses		1,743,390	583,765	4,217,230
21.	General administrative expenses		4,828,002	3,259,323	11,680,488
22.	Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only)				
23.	Total underwriting deductions (Lines 18 through 22)	1,964,719	32,595,144	30,795,772	117,405,136
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	X X X	(1,494,905)	(2,878,855)	(3,058,586)
25.	Net investment income earned		152,255	120,678	386,546
26.	Net realized capital gains (losses) less capital gains tax of \$.....0		(16,593)	(6,470)	(24,818)
27.	Net investment gains or (losses) (Lines 25 plus 26)		135,662	114,208	361,728
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)]				
29.	Aggregate write-ins for other income or expenses				
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	X X X	(1,359,243)	(2,764,647)	(2,696,858)
31.	Federal and foreign income taxes incurred	X X X			(296,035)
32.	Net income (loss) (Lines 30 minus 31)	X X X	(1,359,243)	(2,764,647)	(2,400,823)
DETAILS OF WRITE-INS					
0601.	.....	X X X			
0602.	.....	X X X			
0603.	.....	X X X			
0698.	Summary of remaining write-ins for Line 6 from overflow page	X X X			
0699.	TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)	X X X			
0701.	Commission on Life Product	X X X	7,816	7,581	23,690
0702.	.....	X X X			
0703.	.....	X X X			
0798.	Summary of remaining write-ins for Line 7 from overflow page	X X X			
0799.	TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)	X X X	7,816	7,581	23,690
1401.	.....				
1402.	.....				
1403.	.....				
1498.	Summary of remaining write-ins for Line 14 from overflow page				
1499.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)				
2901.	rounding				
2902.	0				
2903.	.....				
2998.	Summary of remaining write-ins for Line 29 from overflow page				
2999.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)				

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT				
33.	Capital and surplus prior reporting year	27,620,834	29,917,638	29,917,638
34.	Net income or (loss) from Line 32	(1,359,243)	(2,764,647)	(2,400,823)
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$.....0		(27,685)	
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			28,877
39.	Change in nonadmitted assets	231,513	(31,940)	75,143
40.	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
44.1	Paid in			
44.2	Transferred from surplus (Stock Dividend)			
44.3	Transferred to surplus			
45.	Surplus adjustments:			
45.1	Paid in			
45.2	Transferred to capital (Stock Dividend)			
45.3	Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	(1)		(1)
48.	Net change in capital and surplus (Lines 34 to 47)	(1,127,731)	(2,824,272)	(2,296,804)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	26,493,103	27,093,366	27,620,834
DETAILS OF WRITE-INS				
4701.	rounding	(1)		(1)
4702.	SSAP 3 Error Correction - Return to Provision			
4703.	.....			
4798.	Summary of remaining write-ins for Line 47 from overflow page			
4799.	TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above)	(1)		(1)

CASH FLOW

		1	2	3
		Current	Prior	Prior
		Year	Year	Year Ended
		To Date	To Date	December 31
Cash from Operations				
1.	Premiums collected net of reinsurance	33,830,017	28,380,351	122,132,192
2.	Net investment income	147,116	100,042	431,551
3.	Miscellaneous income	(19,093)	(307,338)	(101,523)
4.	TOTAL (Lines 1 to 3)	33,958,040	28,173,055	122,462,220
5.	Benefit and loss related payments	24,004,280	29,108,452	102,674,964
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	2,361,642	3,688,475	10,087,053
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses)		27,685	
10.	TOTAL (Lines 5 through 9)	26,365,922	32,824,612	112,762,017
11.	Net cash from operations (Line 4 minus Line 10)	7,592,118	(4,651,557)	9,700,203
Cash from Investments				
12.	Proceeds from investments sold, matured or repaid:			
12.1	Bonds	1,626,311	7,648,200	11,976,766
12.2	Stocks			
12.3	Mortgage loans			
12.4	Real estate			
12.5	Other invested assets			
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments			
12.7	Miscellaneous proceeds			
12.8	TOTAL investment proceeds (Lines 12.1 to 12.7)	1,626,311	7,648,200	11,976,766
13.	Cost of investments acquired (long-term only):			
13.1	Bonds	2,389,698	8,204,122	13,160,950
13.2	Stocks			
13.3	Mortgage loans			
13.4	Real estate			
13.5	Other invested assets			
13.6	Miscellaneous applications			
13.7	TOTAL investments acquired (Lines 13.1 to 13.6)	2,389,698	8,204,122	13,160,950
14.	Net increase (or decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(763,387)	(555,922)	(1,184,184)
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)	(1,424,372)	1,609,533	4,333,216
17.	Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	(1,424,372)	1,609,533	4,333,216
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS				
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	5,404,359	(3,597,946)	12,849,235
19.	Cash, cash equivalents and short-term investments:			
19.1	Beginning of year	31,194,297	18,345,062	18,345,062
19.2	End of period (Line 18 plus Line 19.1)	36,598,656	14,747,116	31,194,297

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

20.0001				
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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	28,976	20,329	5,268	2,538						841
2. First Quarter	29,438	19,327	6,525	2,556						1,030
3. Second Quarter										
4. Third Quarter										
5. Current Year										
6. Current Year Member Months	86,329	56,182	19,378	7,679						3,090
Total Member Ambulatory Encounters for Period:										
7. Physician	60,224	38,904	12,006	9,314						
8. Non-Physician	57,224	26,168	26,469	4,587						
9. Total	117,448	65,072	38,475	13,901						
10. Hospital Patient Days Incurred	3,091	2,189	280	622						
11. Number of Inpatient Admissions	653	514	66	73						
12. Health Premiums Written (a)	31,321,338	24,420,748	5,389,899	1,238,318						272,373
13. Life Premiums Direct	205,357		205,357							
14. Property/Casualty Premiums Written										
15. Health Premiums Earned	31,321,338	24,420,748	5,389,899	1,238,318						272,373
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	24,570,903	19,804,950	3,414,610	1,112,578						238,765
18. Amount Incurred for Provision of Health Care Services	26,055,202	20,835,465	3,592,283	1,116,316						511,138

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.0.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 days	6 Over 120 Days	7 Total
0199999 Individually Listed Claims Unpaid						
0299999 Aggregate Accounts Not Individually Listed - Uncovered	31,362	11,348	2,811	1,439	2,375	49,335
0399999 Aggregate Accounts Not Individually Listed - Covered	312,901	113,217	28,050	14,360	23,699	492,227
0499999 Subtotals	344,263	124,565	30,861	15,799	26,074	541,562
0599999 Unreported claims and other claim reserves						13,158,405
0699999 Total Amounts Withheld						
0799999 Total Claims Unpaid						13,699,967
0899999 Accrued Medical Incentive Pool And Bonus Amounts						

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business		Claims Paid Year to Date		Liability End of Current Quarter		5	6
		1	2	3	4	Claims Incurred in Prior Years (Columns 1+3)	Estimated Claim Reserve and Claim Liability Dec 31 of Prior Year
		On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec 31 of Prior Year	On Claims Incurred During the Year		
1.	Comprehensive (hospital & medical)	9,371,576	14,882,302	879,942	11,917,147	10,251,518	11,998,442
2.	Medicare Supplement	508,861	603,717	33,394	398,965	542,255	428,621
3.	Dental only						
4.	Vision only						
5.	Federal Employees Health Benefits Plan						
6.	Title XVIII - Medicare						
7.	Title XIX - Medicaid						
8.	Other health	191,012	47,753		470,519	191,012	198,146
9.	Health subtotal (Lines 1 to 8)	10,071,449	15,533,772	913,336	12,786,631	10,984,785	12,625,209
10.	Healthcare receivables (a)	948,434	85,883	65,543	1,100,556	1,013,977	1,544,189
11.	Other non-health						
12.	Medical incentive pools and bonus amounts						
13.	Totals (Lines 9 - 10 + 11 + 12)	9,123,015	15,447,889	847,793	11,686,075	9,970,808	11,081,020

(a) Excludes \$.00 loans or advances to providers not yet expensed.

Notes to Financial Statement
QUALCHOICE LIFE AND HEALTH INSURANCE COMPANY, INC.

Notes to Financial Statements - Statutory Basis

(1) Summary of Significant Accounting Policies

The following is a summary of the significant accounting policies used in the preparation of the accompanying financial statements. Such policies are in conformity with the Annual Statement Instructions and the Accounting Practices and Procedures Manual of the National Association of Insurance Commissioners (“NAIC”) and the accounting practices as prescribed or permitted by the Arkansas Insurance Department and are not intended to be a presentation in conformity with accounting principles generally accepted in the United States of America.

	SSAP#	F/S Page	F/S Line#	3/31/2018	12/31/2017
Net Income (Loss)					
(1) QCA Health Plan, Inc. state basis (Page4, Line 32, Columns 2 & 3)				(1,359,243)	(2,400,823)
(2) State prescribed practices that increase/(decrease) NAIC SAP					
(3) State permitted practices that increase/(decrease) NAIC SAP					
(4) NAIC SAP (1 - 2 - 3 = 4)				(1,359,243)	(2,400,823)
Surplus					
(5) QCA Health Plan, Inc. state basis (Page 3, Line 33, Columns 3 & 4)				\$26,493,104	\$27,620,835
(6) State prescribed practices that increase/(decrease) NAIC SAP					
(7) State permitted practices that increase/(decrease) NAIC SAP					
(8) NAIC SAP (5 - 6 - 7 = 8)				\$26,493,104	\$27,620,835

Cash and Cash Equivalents and Short Term Investments: The Company considers all cash accounts and all highly liquid debt instruments purchased with a maturity of three months or less to be cash equivalents.

Premiums Receivable: The Company uses the allowance method of accounting for uncollectible receivables. Premiums receivable represent medical premium revenue that has been billed and recognized as revenue, but has not been collected.

Investment Securities: Bonds and other debt instruments for which the Company intends to resell in the near future are classified as available for sale and are stated at cost adjusted for amortization of premiums and accretion of discounts.

- a) Short-term investments are stated at amortized cost;
- b) Bonds not backed by other loans are stated at amortized cost using the interest method.
- c) The Company does not have common stock
- d) The Company does not have preferred stock.
- e) The commercial mortgage-backed and other loan-backed securities are stated at amortized cost using the effective interest method.
- f) The Company does not have derivatives.
- g) The Company does not anticipate investment income as a factor in the premium deficiency calculation.

Medical Claims Payable: Reported claims expected to be paid after the balance sheet date for services provided to members prior to the balance sheet date are recorded as liabilities. Claims for services provided to members during the financial reporting period which are unreported at the balance sheet date are estimated based on the Company’s claims experience and recorded as liabilities. The amounts recorded are based upon estimates of the ultimate net cost of such services provided. These reserves are subject to continuous review by management and changes in estimates are reflected in earnings currently.

Income Taxes: Income taxes are provided for the tax effects of transactions reported in the financial statements and consist of taxes currently due.

Revenue: Medical premium revenue is recognized in the month in which members are entitled to receive health care services. Medical premiums collected in advance are recorded as unearned premium revenue.

Cost of Benefits Provided: Cost of benefits provided includes the costs of all medical services delivered to enrolled members of the Company and for whom the Company has recorded medical premium revenue during the reporting period. These costs include payments for specific medical services paid to physicians, hospitals, and other health care providers on a fee-for-service basis. Costs of benefits include claims paid, claims in process and pending, estimates of unreported claims and charges, and processing costs of those estimates at the end of the fiscal year for which the Company will be responsible.

Premium Tax: The state in which the Company does business requires the remittance of premium taxes based upon a percentage of billed premiums.

Notes to Financial Statement

Advertising Costs: Advertising and promotions related expenses are charged to operations when incurred.

Non-Admitted Assets: Certain assets (principally pharmaceutical rebate receivables and deferred tax assets not expected to be realized within a 12 month period) designated as "non-admitted" are not included in the financial statements.

Accounting Estimates: The preparation of financial statements in conformity with the accounting practices described above requires management to make estimates and assumptions that affect the reported amounts in the financial statements and accompanying notes. The accounting practices also require disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

Going Concern: There are no conditions or events that raise substantial doubt about the entity's ability to continue as a going concern.

(2) Accounting Changes and Corrections of Errors

None.

(3) Business Combinations and Goodwill

None.

(4) Discontinued Operations

None.

(5) Investments

A) The Company has no real estate loans, restructured debt, or reverse mortgages.

D) The Company is relying on Bank of New York Mellon as a source used to determine the currently estimated cash flows, including new prepayment assumptions. The Company has no mortgage-backed or other loan-backed securities with a recognized other-than-temporary impairment.

E) The Company has no repurchase agreements and/or securities lending transactions.

I) The Company has no working capital finance investments

J) The Company has no investments in requiring offsetting and netting of assets and liabilities.

(6) Joint Ventures, Partnerships and Limited Liability Companies

None.

(7) Investment Income

The Company's investment income was earned on cash and cash equivalents, bonds, and stocks. Unrealized losses and gains are recorded are recorded on page 5.

(8) Derivative Instruments

None.

(9) Income Taxes

No significant changes.

(10) Information Concerning Parent, Subsidiaries and Affiliates

No significant changes.

(11) Debt

As of March 31, 2018, the Company has no outstanding Federal Home Loan Bank agreements.

(12) Retirement Plans, Deferred Compensation and Other Postretirement Benefit and Compensated Absences and Other Postretirement Benefit Plans

The Company has an employee 401(k) plan covering all full-time employees of the Company who have completed three months of employment and choose to participate. The benefit plan has not changed since the year ended 12/31/16.

(13) Capital and Surplus, Shareholders' Dividend Restrictions and Quasi- Reorganizations

No significant changes.

(14) Contingencies

No significant changes.

(15) Leases

None.

(16) Information About Financial Instruments With Off Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

None.

(17) Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

The Company did not participate in any transfer of receivables, financial assets, or wash sales.

(18) Gain or Loss To The Reporting Entity From Uninsured A&H Plans and The Uninsured Portion of Partially Insured Plans

No significant changes.

(19) Direct Premium Written/Produced By Managing General Agents/Third Party Administrators

Notes to Financial Statement

None

(20) Fair Value Measurements

No significant changes

(21) Other Items List

No significant changes

(22) Events Subsequent

None

(23) Reinsurance

No significant changes.

(24) Retrospectively Rated Contracts & Contracts Subject To Redetermination

E). The Company has accident and health insurance premiums in 2016 subject to the risk-sharing provisions of the ACA. For 2017 and 2018. Only the risk adjustment provision remains. The ACA imposes fees and premium stabilization provisions on health insurance issuers offering comprehensive commercial health insurance.

1. Permanent Risk Adjustment Program

A. Permanent ACA Risk Adjustment Program		Amount
Assets		
1.	Premium Adjustment Receivable due to ACA Risk Adjustment	
Liabilities		
2.	Risk Adjustment User Fees Payable for ACA Risk Adjustment	\$12,250
3.	Premium Adjustments Payable due to ACA Risk Adjustment	\$8,322,531
Operations (Revenue & Expense)		
4.	Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	
5.	Reported in expenses as ACA Risk Adjustment user fees (incurred/paid)	\$12,250

B. Transitional ACA Reinsurance Program		Amount
Assets		
1.	Amounts recoverable for claims paid due to ACA Reinsurance	\$51,407
2.	Amounts recoverable for claims unpaid due to ACA Reinsurance	
Liabilities		
3.	Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	
4.	Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	
5.	Ceded reinsurance premiums payable due to ACA Reinsurance	
6.	Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	
Operations (Revenue & Expense)		
7.	Ceded reinsurance premiums due to ACA Reinsurance	\$4,456
8.	Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	
9.	ACA Reinsurance contributions – not reported as ceded premium	

C. Temporary ACA Risk Corridors Program		Amount
Assets		
1.	Accrued retrospective premium due to ACA Risk Corridor	
Liabilities		
2.	Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	
Operations (Revenue & Expense)		
3.	Effect of ACA Risk Corridors on net premium income (paid/received)	
4.	Effect of ACA Risk Corridors on change in reserves for rate credits	

2. The following table is a roll forward of the prior year ACA risk-sharing provisions for asset and liability balances, along with reasons for adjustments to prior year balances.

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1–3+7)	Cumulative Balance from Prior Years (Col 2–4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable									A		
2. Premium adjustments (payable)	\$	\$(6,458,220)	\$	\$	\$	\$(6,458,220)	\$	\$(211)	B	\$	\$(6,458,431)
3. Subtotal ACA Permanent Risk Adjustment Program	\$	\$(6,458,220)	\$	\$	\$	\$(6,458,220)	\$	\$(211)		\$	\$(6,458,431)
b. Transitional ACA Reinsurance Program											

Notes to Financial Statement

1. Amounts recoverable for claims paid	\$996,119	\$	\$967,505	\$	\$28,614	\$	\$22,793	\$	C	\$51,407	\$
2. Amounts recoverable for claims unpaid (contra liability)									D		
3. Amounts receivable relating to uninsured plans									E		
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium									F		
5. Ceded reinsurance premiums payable									G		
6. Liability for amounts held under uninsured plans									H		
7. Subtotal ACA Transitional Reinsurance Program	\$996,119	\$	\$967,505	\$	\$28,614	\$	\$22,793	\$		\$51,407	\$
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium									I		
2. Reserve for rate credits or policy experience rating refunds									J		
3. Subtotal ACA Risk Corridors Program											
d. Total for ACA Provisions	\$996,119	\$(6,458,220)	\$967,505	\$	\$28,614	\$(6,458,220)	\$22,793	\$(211)		\$51,407	\$(6,458,431)

Explanations of adjustments

- A.
- B. Adjustment made for prior years
- C. Adjustment made for prior years
- D.
- E.
- F.
- G.
- H.
- I.
- J.

(4) Roll Forward of ACA Risk Corridor Asset and Liability Balances

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1–3+7)	Cumulative Balance from Prior Years (Col 2–4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Re f	Receivable	(Payable)
a. 2014											
1. Accrued Retrospective Premium									A		
2. Reserve for rate credits policy experience rating refunds									B		
b. 2015											
1. Accrued Retrospective Premium									C		
2. Reserve for rate credits policy experience rating refunds									D		
c. 2016											
1. Accrued Retrospective Premium									I		
2. Reserve for rate credits or policy experience rating refunds									J		
d. Total for Risk Corridor											

Explanations of adjustments

- A-J.

(5) ACA Risk Corridor Receivable:

Risk Corridors Program Year	1 Estimated amount to be filed or final amounts filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	4 Asset balance (gross of nonadmission) (1-2-3)	5 Nonadmitted amounts	6 Net admitted assets
a. 2014						
b. 2015	\$4,524,888	\$4,524,488	\$	\$	\$	\$
c. 2016	\$6,742,797	\$6,742,797	\$	\$	\$	\$
d. Total	\$11,267,285	\$11,267,285	\$	\$	\$	\$

Notes to Financial Statement

(25) Change In Incurred Claims and Claim Adjustment Expenses

Reserves as of March 31, 2018 were \$13,699,967. As of March 31, 2018, \$10,071,449 has been paid for incurred claims and claim adjustment expenses attributable to insured events incurred prior of January 1, 2018. Reserves remaining for prior years are now \$913,336 as a result of re-estimation of unpaid claims and claim adjustment expenses. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

(26) Intercompany Pooling Arrangements

None.

(27) Structured Settlements

None.

(28) Health Care Receivables

No significant changes.

(29) Participating Policies

None.

(30) Premium Deficiency Reserves

No significant changes.

(31) Anticipated Salvage and Subrogation

None.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

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

Yes[] No[X]
- 1.2 If yes, has the report been filed with the domiciliary state?

Yes[] No[] N/A[X]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes[] No[X]
- 2.2 If yes, date of change:

.....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

Yes[X] No[]
- If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes[] No[X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes:
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group?

Yes[] No[X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 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	2	3
Name of Entity	NAIC Company Code	State of Domicile
.....		

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

If yes, attach an explanation.

Yes[] No[] N/A[X]
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

.....12/31/2014.....
- 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.

.....04/16/2016.....
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

.....04/16/2016.....
- 6.4 By what department or departments?
- 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[] N/A[X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with?

Yes[] No[] N/A[X]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes[] No[X]
- 7.2 If yes, give full information
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes[] No[X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?

Yes[] No[X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
.....		 No	 No	 No	 No

- 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.

Yes[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 amended?

Yes[] No[X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?

Yes[] No[X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

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

Yes[X] No[]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$..... 305,520

INVESTMENT

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

Yes[] No[X]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$..... 0
13. Amount of real estate and mortgages held in short-term investments:

\$..... 0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes[] No[X]
- 14.2 If yes, please complete the following:

GENERAL INTERROGATORIES (Continued)

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

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

Yes[] No[X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

Yes[] No[] N/A[X]

If no, attach a description with this statement.

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

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

\$ 0

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

\$ 0

16.3 Total payable for securities lending reported on the liability page

\$ 0

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

Yes[X] No[]

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

1	2
Name of Custodian(s)	Custodian Address
Arvest Asset Management	200 Commerce Dr. Ste. 100, Little Rock, AR
BNY Mellon	200 Park Avenue, New York, NY

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

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

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

Yes[] No[X]

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

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

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

1	2
Name of Firm or Individual	Affiliation
Catholic Health Initiatives - Treasury Department	A

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

Yes[] No[X]

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

Yes[] No[X]

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

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
N/a	Catholic Health Initiatives - Treasury Department	47-0617373 .....	.....	.....

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

Yes[X] No[]

18.2 If no, list exceptions:

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

a. Documentation necessary to permit a full credit analysis of the security does not exist.

b. Issuer or obligor is current on all contracted interest and principal payments.

c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

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

Yes[] No[X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:	
1.1 A&H loss percent	86.972%
1.2 A&H cost containment percent	3.274%
1.3 A&H expense percent excluding cost containment expenses	17.861%
2.1 Do you act as a custodian for health savings accounts?	Yes[] No[X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date.	\$..... 0
2.3 Do you act as an administrator for health savings accounts?	Yes[] No[X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date.	\$..... 0
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes[X] No[]
3.1 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[X]

SCHEDULE S - CEDED REINSURANCE
Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
Life and Annuity - Affiliates								
11835	04-1590940	01/01/2017	PARTNERRE AMER INS CO	DE	SSL/L/G	Authorized		
11835	04-1590940	01/01/2017	PARTNERRE AMER INS CO	DE	OTH/L/I	Authorized		
77828	57-0523959	09/01/2013	COMPANION LIFE INS CO	SC	OTH/A/G	Authorized		

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS
Current Year to Date - Allocated by States and Territories

		1	Direct Business Only							
			2	3	4	5	6	7	8	9
State, Etc.		Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums and Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama (AL)	N								
2.	Alaska (AK)	N								
3.	Arizona (AZ)	N								
4.	Arkansas (AR)	L	31,321,338				205,357		31,526,695	
5.	California (CA)	N								
6.	Colorado (CO)	N								
7.	Connecticut (CT)	N								
8.	Delaware (DE)	N								
9.	District of Columbia (DC)	N								
10.	Florida (FL)	N								
11.	Georgia (GA)	N								
12.	Hawaii (HI)	N								
13.	Idaho (ID)	N								
14.	Illinois (IL)	N								
15.	Indiana (IN)	N								
16.	Iowa (IA)	N								
17.	Kansas (KS)	N								
18.	Kentucky (KY)	N								
19.	Louisiana (LA)	N								
20.	Maine (ME)	N								
21.	Maryland (MD)	N								
22.	Massachusetts (MA)	N								
23.	Michigan (MI)	N								
24.	Minnesota (MN)	N								
25.	Mississippi (MS)	N								
26.	Missouri (MO)	N								
27.	Montana (MT)	N								
28.	Nebraska (NE)	L								
29.	Nevada (NV)	N								
30.	New Hampshire (NH)	N								
31.	New Jersey (NJ)	N								
32.	New Mexico (NM)	N								
33.	New York (NY)	N								
34.	North Carolina (NC)	N								
35.	North Dakota (ND)	N								
36.	Ohio (OH)	N								
37.	Oklahoma (OK)	N								
38.	Oregon (OR)	N								
39.	Pennsylvania (PA)	N								
40.	Rhode Island (RI)	N								
41.	South Carolina (SC)	N								
42.	South Dakota (SD)	N								
43.	Tennessee (TN)	N								
44.	Texas (TX)	N								
45.	Utah (UT)	N								
46.	Vermont (VT)	N								
47.	Virginia (VA)	N								
48.	Washington (WA)	N								
49.	West Virginia (WV)	N								
50.	Wisconsin (WI)	N								
51.	Wyoming (WY)	N								
52.	American Samoa (AS)	N								
53.	Guam (GU)	N								
54.	Puerto Rico (PR)	N								
55.	U.S. Virgin Islands (VI)	N								
56.	Northern Mariana Islands (MP)	N								
57.	Canada (CAN)	N								
58.	Aggregate other alien (OT)	X X X								
59.	Subtotal	X X X	31,321,338				205,357		31,526,695	
60.	Reporting entity contributions for Employee Benefit Plans	X X X								
61.	Total (Direct Business)	X X X	31,321,338				205,357		31,526,695	
DETAILS OF WRITE-INS										
58001.	.....	X X X								
58002.	.....	X X X								
58003.	.....	X X X								
58998.	Summary of remaining write-ins for Line 58 from overflow page	X X X								
58999.	TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above)	X X X								

(a) Active Status Counts:

- L Licensed or Chartered - Licensed insurance carrier or domiciled RRG
- E Eligible - Reporting entities eligible or approved to write surplus lines in the state
- N None of the above Not allowed to write business in the state

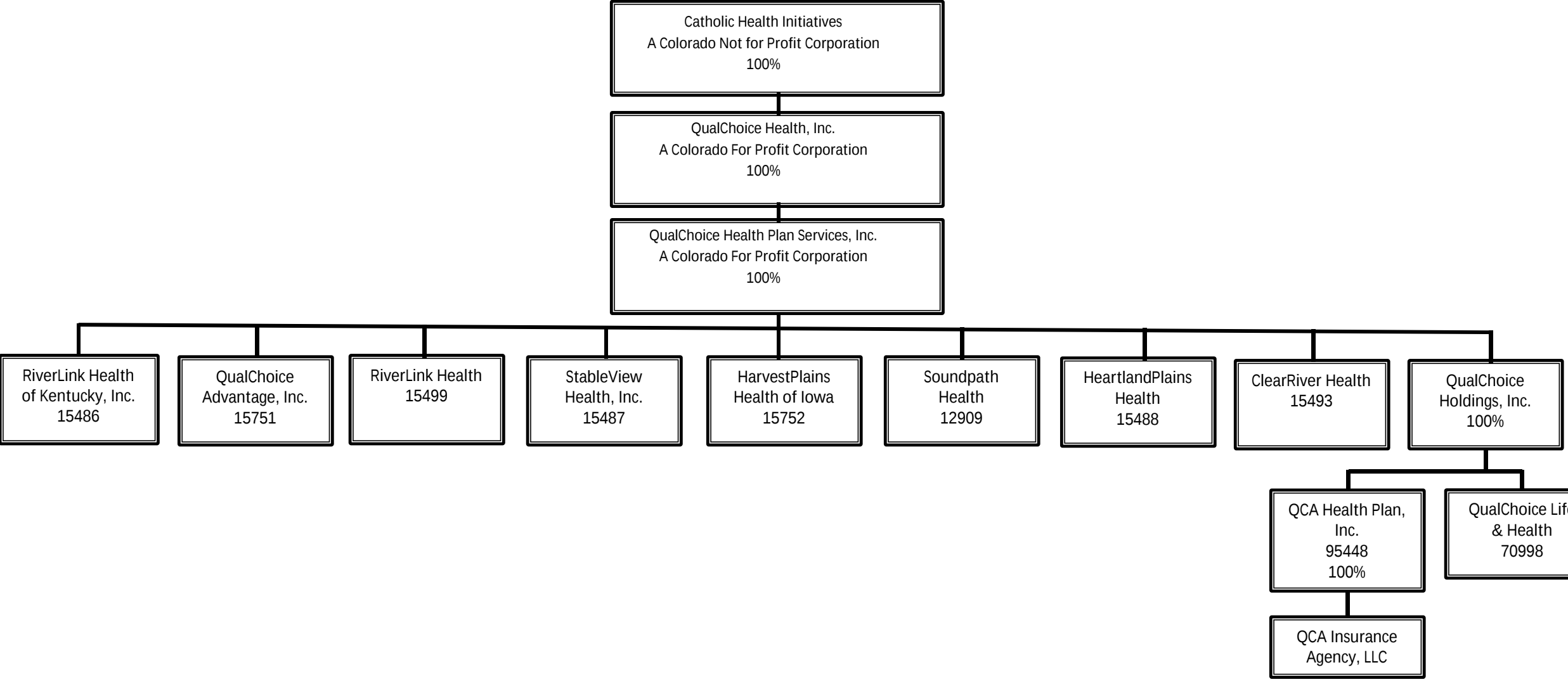
2

55

- R Registered - Non-domiciled RRGs
- Q Qualified - Qualified or accredited reinsurer

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

Q15



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
Group Code	Group Name	NAIC Comp-any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domic-iliary Loca-tion	Rela-tion-ship to Report-ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
4807 ..	Catholic Health Initiatives	70998	71-0386640 .	.....	.....	.....	QualChoice Life and Health Insurance Company, Inc.	.. AR .	... RE ..	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	95448	71-0794605 .	.....	.....	.....	QCA Health Plan, Inc.	.. AR .	... RE ..	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	12909	42-1720801 .	.....	.....	.....	Soundpath Health, Inc.	.. WA .	... IA ...	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	15493	46-4495960 .	.....	.....	.....	ClearRiver Health	.. TN .	... IA ...	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	15488	46-4368223 .	.....	.....	.....	Heartland Plains Health	.. NE .	... IA ...	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	15499	46-4380824 .	.....	.....	.....	Riverlink Health	.. OH .	... IA ...	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	15486	46-4828332 .	.....	.....	.....	Riverlink Health of Kentucky, Inc.	.. KY .	... IA ...	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	15487	46-4373713 .	.....	.....	.....	StableView Health	.. KY .	... IA ...	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	15751	47-3433912 .	.....	.....	.....	QualChoice Advantage, Inc.	.. AR .	... IA ...	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....
4807 ..	Catholic Health Initiatives	15752	47-3451750 .	.....	.....	.....	Harvest Plains Health of Iowa	.. IA .	... IA ...	Prominence Health Plan Services, Inc.	Ownership	 100.0	Catholic Health Initiatives	 N ....	.....

Asterisk	Explanation
0000001	

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.

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

RESPONSE
No

Explanations:

Bar Codes:

Medicare Part D Coverage Supplement



70998201836500001

2018

Document Code: 365

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
4704.			
4705. 0			
4706. Misc Surplus Adjustment			
4797. Summary of remaining write-ins for Line 47 (Lines 4704 through 4796)			

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	20,098,653	18,994,718
2. Cost of bonds and stocks acquired	2,389,698	13,160,951
3. Accrual of discount	3,633	15,505
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	(16,593)	(24,815)
6. Deduct consideration for bonds and stocks disposed of	1,626,311	11,976,766
7. Deduct amortization of premium	15,125	70,940
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other-than-temporary impairment recognized		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9 + 10)	20,833,955	20,098,653
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	20,833,955	20,098,653

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)	21,915,389	3,280,127	3,212,502	7,465	21,990,479			21,915,389
2. NAIC 2 (a)	2,019,303	745,762	80,401	(4,802)	2,679,862			2,019,303
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	23,934,692	4,025,889	3,292,903	2,663	24,670,341			23,934,692
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	23,934,692	4,025,889	3,292,903	2,663	24,670,341			23,934,692

(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 \$.....3,836,385; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

SCHEDULE DA - PART 1

Short - Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals	3,836,387	X X X	3,820,264		

SCHEDULE DA - Verification

Short-Term Investments

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	2,186,185	117,933
2.	Cost of short-term investments acquired	1,636,192	9,623,225
3.	Accrual of discount	14,010	23,958
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		1
6.	Deduct consideration received on disposals		7,578,233
7.	Deduct amortization of premium		699
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	3,836,387	2,186,185
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	3,836,387	2,186,185

SI04 Schedule DB - Part A Verification NONE

SI04 Schedule DB - Part B Verification NONE

SI05 Schedule DB Part C Section 1 NONE

SI06 Schedule DB Part C Section 2 NONE

SI07 Schedule DB - Verification NONE

SCHEDULE E - PART 2 - VERIFICATION
(Cash Equivalents)

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	1,680,693	4,996,494
2.	Cost of cash equivalents acquired	8,095	5,023,707
3.	Accrual of discount	145	12,397
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	1,651,901	8,351,905
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)	37,032	1,680,693
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	37,032	1,680,693

E01 Schedule A Part 2 NONE

E01 Schedule A Part 3 NONE

E02 Schedule B Part 2 NONE

E02 Schedule B Part 3 NONE

E03 Schedule BA Part 2 NONE

E03 Schedule BA Part 3 NONE

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - All Other Governments									
298785HQ2	EUROPEAN INVESTMENT BANK	D	02/06/2018	BNYM/RBCELFIXED INCO	X X X	119,600	120,000		1FE
1099999	Subtotal - Bonds - All Other Governments				X X X	119,600	120,000		X X X
Bonds - U.S. Special Revenue, Special Assessment									
3137EAE19	FEDERAL HOME LOAN MORTGAGE CORP		03/05/2018	GOLDMAN SACHS & CO	X X X	643,079	645,000	851	1
3199999	Subtotal - Bonds - U.S. Special Revenue, Special Assessment				X X X	643,079	645,000	851	X X X
Bonds - Industrial and Miscellaneous (Unaffiliated)									
09659QAD9	BMW VEHICLE OWNER TRUST 2018-A		01/17/2018	JPM SECURITIES-FIXED	X X X	104,999	105,000		1FE
126650DC1	CVS HEALTH CORP		03/06/2018	JPM SECURITIES-FIXED	X X X	59,969	60,000		2FE
14314AAC3	CARMAX AUTO OWNER TRUST 2018-1		01/17/2018	RBC CAPITAL MARKETS	X X X	114,991	115,000		1FE
151020BC7	CELGENE CORP		02/08/2018	CITIGROUP GLOBAL MKT	X X X	99,954	100,000		2FE
17275RAP7	CISCO SYSTEMS INC		02/21/2018	BANC/AMERICA SECUR.L	X X X	120,335	120,000	1,634	1FE
375558BB8	GILEAD SCIENCES INC		01/08/2018	GOLDMAN SACHS & CO	X X X	80,607	80,000	731	1FE
46625HKA7	JPMORGAN CHASE & CO		01/04/2018	BANC/AMERICA SECUR.L	X X X	114,903	115,000	1,186	1FE
47788CAC6	JOHN DEERE OWNER TRUST 2018		02/21/2018	RBC CAPITAL MARKETS	X X X	89,994	90,000		1FE
494550BB1	KINDER MORGAN ENERGY PARTNERS LP		02/21/2018	BANC/AMERICA SECUR.L	X X X	117,937	110,000	167	2FE
58013MEX8	MCDONALD'S CORP		01/18/2018	GOLDMAN SACHS & CO	X X X	45,334	45,000	148	2FE
816851BE8	SEMPRA ENERGY		01/09/2018	RBC CAPITAL MARKETS	X X X	74,898	75,000		2FE
828807CU9	SIMON PROPERTY GROUP LP		01/05/2018	UBS SECURITIES LLC	X X X	115,501	115,000	1,022	1FE
887317AK1	TIME WARNER INC		02/23/2018	BAIRD ROBERT W & CO	X X X	115,381	110,000	2,136	2FE
90131HAQ8	21ST CENTURY FOX AMERICA INC		01/08/2018	MILLENNIUM ADVISORS	X X X	37,118	35,000	634	2FE
92343VAX2	VERIZON COMMUNICATIONS INC		02/22/2018	GOLDMAN SACHS & CO	X X X	115,301	110,000	2,038	2FE
136375CN0	CANADIAN NATIONAL RAILWAY CO	A	02/01/2018	RBC CAPITAL MARKETS	X X X	69,974	70,000		1FE
45687AAM4	INGERSOLL-RAND GLOBAL HOLDING CO LTD	C	02/13/2018	BANC/AMERICA SECUR.L	X X X	79,870	80,000		2FE
961214DU4	WESTPAC BANKING CORP	D	01/17/2018	MORGAN STANLEY & CO	X X X	69,952	70,000		1FE
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)				X X X	1,627,018	1,605,000	9,696	X X X
8399997	Subtotal - Bonds - Part 3				X X X	2,389,697	2,370,000	10,547	X X X
8399998	Summary Item from Part 5 for Bonds (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X
8399999	Subtotal - Bonds				X X X	2,389,697	2,370,000	10,547	X X X
8999998	Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X
8999999	Subtotal - Preferred Stocks				X X X		X X X		X X X
9799998	Summary Item from Part 5 for Common Stocks (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X
9799999	Subtotal - Common Stocks				X X X		X X X		X X X
9899999	Subtotal - Preferred and Common Stocks				X X X		X X X		X X X
9999999	Total - Bonds, Preferred and Common Stocks				X X X	2,389,697	X X X	10,547	X X X

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

SCHEDULE D - PART 4
Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of
During the Current Quarter

1	2	3 F o r e i g n	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description		Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
Bonds - U.S. Governments																					
912828U32	UNITED STATES TREASURY																				
912828U73	NOTE/BOND UNITED STATES TREASURY NOTE/BOND		02/15/2018 01/23/2018	NOMURA SECURITIES/FI JPM SECURITIES-FIXED	X X X X X X	235,153 469,044	240,000 475,000	238,836 472,712	239,259 473,484		50 48		50 48		239,309 473,533		(4,156) (4,489)	(4,156) (4,489)	617 718	11/15/2019 12/15/2019	1 1
0599999	Subtotal - Bonds - U.S. Governments				X X X	704,197	715,000	711,548	712,743		98		98		712,842		(8,645)	(8,645)	1,335	X X X	X X X
Bonds - U.S. Special Revenue, Special Assessment																					
3137EACA5	FEDERAL HOME LOAN MORTGAGE CORP		03/05/2018	GOLDMAN SACHS & CO	X X X	650,765	640,000	696,770	660,339	(2,892)			(2,892)		657,447		(6,683)	(6,683)	10,600	03/27/2019	1
3199999	Subtotal - Bonds - U.S. Special Revenue, Special Assessment				X X X	650,765	640,000	696,770	660,339	(2,892)			(2,892)		657,447		(6,683)	(6,683)	10,600	X X X	X X X
Bonds - Industrial and Miscellaneous (Unaffiliated)																					
002824BC3	ABBOTT LABORATORIES		03/22/2018	CALL 100	X X X	10,000	10,000	9,990	9,994		1		1		9,994		6	6	78	11/22/2019	2FE
31620MAN6	FIDELITY NATIONAL INFORMATION SERVICES I		03/15/2018	NATL FINANCIAL SERVI	X X X	70,053	70,000	71,166	70,556	(149)			(149)		70,407		(354)	(354)	853	10/15/2018	2FE
36251PAA2	GS MORTGAGE SECURITIES TRUST 2016-GS3		03/01/2018	PAYDOWN	X X X	3,471	3,471	3,471	3,471						3,471				9	10/01/2049	1FM
46645UAQ0	JP MORGAN CHASE COMMERCIAL MORTGAGE SECU		03/01/2018	PAYDOWN	X X X	1,912	1,912	1,912	1,912						1,912				6	12/01/2049	1FM
47788NAC2	JOHN DEERE OWNER TRUST 2016-B		02/22/2018	BANC/AMERICA SECUR L	X X X	64,543	65,000	64,995	64,998						64,998		(455)	(455)	153	06/15/2020	1FE
65478QAE8	NISSAN AUTO LEASE TRUST 2016-A		03/09/2018	PERSHING & COMPANY	X X X	69,748	70,000	69,985	69,994	1			1		69,995		(246)	(246)	282	10/15/2021	1FE
828807CQ8	SIMON PROPERTY GROUP LP		01/05/2018	GOLDMAN SACHS & CO	X X X	50,064	50,000	50,824	50,286	(7)			(7)		50,278		(215)	(215)	483	02/01/2019	1FE
95000GAW4	WELLS FARGO COMMERCIAL MORTGAGE TRUST 20		03/01/2018	PAYDOWN	X X X	1,558	1,558	1,558	1,558						1,558				4	08/01/2049	1FM
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)				X X X	271,349	271,941	273,901	272,769	(154)			(154)		272,613		(1,264)	(1,264)	1,868	X X X	X X X
8399997	Subtotal - Bonds - Part 4				X X X	1,626,311	1,626,941	1,682,219	1,645,851	(2,948)			(2,948)		1,642,902		(16,592)	(16,592)	13,803	X X X	X X X
8399998	Summary Item from Part 5 for Bonds (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
8399999	Subtotal - Bonds				X X X	1,626,311	1,626,941	1,682,219	1,645,851	(2,948)			(2,948)		1,642,902		(16,592)	(16,592)	13,803	X X X	X X X
8999998	Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
8999999	Subtotal - Preferred Stocks				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
9799998	Summary Item from Part 5 for Common Stocks (N/A to Quarterly)				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
9799999	Subtotal - Common Stocks				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
9899999	Subtotal - Preferred and Common Stocks				X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X	X X X
9999999	Total - Bonds, Preferred and Common Stocks				X X X	1,626,311	X X X	1,682,219	1,645,851	(2,948)			(2,948)		1,642,902		(16,592)	(16,592)	13,803	X X X	X X X

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

E06 Schedule DB Part A Section 1 NONE

E07 Schedule DB Part B Section 1 NONE

E08 Schedule DB Part D Section 1 NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity NONE

E10 Schedule DL - Part 1 - Securities Lending Collateral Assets NONE

E11 Schedule DL - Part 2 - Securities Lending Collateral Assets NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1			2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
Depository			Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7	8	*
							First Month	Second Month	Third Month	
open depositories										
BANK OF NEW YORK	200 Park Avenue, New York, NY 10017						962,830	340,385	489,496	X X X
Arvest Bank	P.O. Box 1583, Little Rock, AR 72203				43		683,733	513,325	238,830	X X X
Bank of America	100 North Tryon Street, Charlotte, NC 28255			0.002	52,659		28,122,294	28,596,518	31,996,912	X X X
0199998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories ..			X X X	X X X						X X X
0199999 Totals - Open Depositories			X X X	X X X	52,702		29,768,857	29,450,228	32,725,238	X X X
0299998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories			X X X	X X X						X X X
0299999 Totals - Suspended Depositories			X X X	X X X						X X X
0399999 Total Cash On Deposit			X X X	X X X	52,702		29,768,857	29,450,228	32,725,238	X X X
0499999 Cash in Company's Office			X X X	X X X	X X X	X X X				X X X
0599999 Total Cash			X X X	X X X	52,702		29,768,857	29,450,228	32,725,238	X X X

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
Cusip	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
7799999	Subtotals - Bonds - Total Bonds - Issuer Obligations							
7899999	Subtotals - Bonds - Total Bonds - Residential Mortgage-Backed Securities							
7999999	Subtotals - Bonds - Total Bonds - Commercial Mortgage-Backed Securities							
8099999	Subtotals - Bonds - Total Bonds - Other Loan-Backed and Structured Securities							
8199999	Subtotals - Bonds - SVO Identified Funds							
8399999	Subtotals - Bonds - Total Bonds							
8499999	Subtotals - Sweep Accounts							
Exempt Money Market Mutual Funds - as Identified by SVO								
825252885	STIT-GOVERNMENT & AGENCY PORTFOLIO		03/15/2018 ...	0.000	X X X	37,031	.41	.90
8599999	Subtotals - Exempt Money Market Mutual Funds - as Identified by SVO					37,031	.41	.90
8699999	Subtotals - All Other Money Market Mutual Funds							
8799999	Subtotals - Other Cash Equivalents							
8899999	Total - Cash Equivalents					37,031	.41	.90

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