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HEALTH QUARTERLY STATEMENT

As of March 31, 2019

of the Condition and Affairs of the

QualChoice Advantage, Inc.

NAIC Group Code.....4807, 4807 (Current Period) (Prior Period) | NAIC Company Code..... 15751 | Employer's ID Number..... 47-3433912

Organized under the Laws of AR | State of Domicile or Port of Entry AR | Country of Domicile US

Licensed as Business Type Health Maintenance Organization | Is HMO Federally Qualified? Yes [X] No [ ]

Incorporated/Organized..... March 20, 2015 | Commenced Business..... January 1, 2016

Statutory Home Office	12615 Chenal Parkway, Suite 300 .. Little Rock .. AR .. US .. 72211 *(Street and Number) (City or Town, State, Country and Zip Code)*	
Main Administrative Office	12615 Chenal Parkway, Suite 300 .. Little Rock .. AR .. US .. 72211 *(Street and Number) (City or Town, State, Country and Zip Code)*	866-789-7747 *(Area Code) (Telephone Number)*
Mail Address	PO Box 27510 .. Federal Way .. WA .. US .. 98093 *(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)*	
Primary Location of Books and Records	33820 Weyerhaeuser Way S .. Federal Way .. WA .. US .. 98001 *(Street and Number) (City or Town, State, Country and Zip Code)*	253-517-4300 *(Area Code) (Telephone Number)*
Internet Web Site Address	www.QualChoiceAdvantage.com	
Statutory Statement Contact	Thuy Le *(Name)*	253-517-4340 *(Area Code) (Telephone Number) (Extension)*
	thuy.le@qualchoicehealth.com *(E-Mail Address)*	253-517-4385 *(Fax Number)*

OFFICERS

Name	Title	Name	Title
1. Mark Fred Bjornson	CEO/President	2. Charles William Hanson	Treasurer
3.		4.	

OTHER

DIRECTORS OR TRUSTEES

Mark Fred Bjornson
Charles William Hanson
Gregory Porter Moore
Jennifer Jean Boeff
Randall Alvin Crow

State of...Washington
County of.....King

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)
Mark Fred Bjornson	Charles William Hanson	
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
CEO/President	Treasurer	
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This 7th day of May, 2019

a. Is this an original filing? Yes [X] No [ ]
b. If no: 1. State the amendment number
2. Date filed
3. Number of pages attached

STEPHANIE BERINGER
Notary Public
State of Washington
Commission # 173660
My Comm. Expires Jul 22, 2022

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Statutory Statement Contact	Thuy Le *(Name)*	253-517-4340 *(Area Code) (Telephone Number) (Extension)*
	thuy.le@qualchoicehealth.com *(E-Mail Address)*	253-517-4385 *(Fax Number)*

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3.		4.	

OTHER

DIRECTORS OR TRUSTEES

Mark Fred Bjornson
Charles William Hanson
Gregory Porter Moore
Jennifer Jean Boeff
Randall Alvin Crow

State of...Minnesota
County of...Hennepin

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)	Charles William Hanson (Signature)	(Signature)
Mark Fred Bjornson 1. (Printed Name)	Charles William Hanson 2. (Printed Name)	3. (Printed Name)
CEO/President (Title)	Treasurer (Title)	(Title)

Subscribed and sworn to before me
This 6th day of May

Tammy Harrison

a. Is this an original filing? Yes [X] No [ ]
b. If no: 1. State the amendment number
2. Date filed
3. Number of pages attached

TAMMY L HARRISON
NOTARY PUBLIC
MINNESOTA
My Commission Expires Jan. 31, 2020

* 1 5 7 5 1 2 0 1 9 2 0 1 0 0 1 0 1 *

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As of March 31, 2019

of the Condition and Affairs of the

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State of.....
County of.....

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Mark Fred Bjornson	Charles William Hanson	
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
CEO/President	Treasurer	
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This _____ day of _____

a. Is this an original filing? Yes [X] No [ ]
b. If no: 1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

ASSETS

	Current Statement Date 1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Prior Year Net Admitted Assets
1. Bonds	2,269,976		2,269,976	3,260,489
2. Stocks:				
2.1 Preferred stocks			0	
2.2 Common stocks			0	
3. Mortgage loans on real estate:				
3.1 First liens			0	
3.2 Other than first liens			0	
4. Real estate:				
4.1 Properties occupied by the company (less $.....0 encumbrances)			0	
4.2 Properties held for the production of income (less $.....0 encumbrances)			0	
4.3 Properties held for sale (less $.....0 encumbrances)			0	
5. Cash ($.....864,267), cash equivalents ($.....313,432) and short-term investments ($.....0)	1,177,700		1,177,700	257,449
6. Contract loans (including $.....0 premium notes)			0	
7. Derivatives			0	
8. Other invested assets			0	
9. Receivables for securities			0	
10. Securities lending reinvested collateral assets			0	
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	3,447,676	0	3,447,676	3,517,938
13. Title plants less $.....0 charged off (for Title insurers only)			0	
14. Investment income due and accrued	14,324		14,324	18,467
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection			0	228
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $.....0 earned but unbilled premiums)			0	
15.3 Accrued retrospective premiums ($.....346,422) and contracts subject to redetermination ($.....91,073)	437,495		437,495	576,650
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	
16.2 Funds held by or deposited with reinsured companies			0	
16.3 Other amounts receivable under reinsurance contracts			0	
17. Amounts receivable relating to uninsured plans	480,233		480,233	820,150
18.1 Current federal and foreign income tax recoverable and interest thereon	240,351		240,351	240,351
18.2 Net deferred tax asset			0	
19. Guaranty funds receivable or on deposit			0	
20. Electronic data processing equipment and software			0	
21. Furniture and equipment, including health care delivery assets ($.....0)			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	
23. Receivables from parent, subsidiaries and affiliates			0	148,768
24. Health care ($.....115,052) and other amounts receivable	140,555	25,503	115,052	297,574
25. Aggregate write-ins for other than invested assets	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)	4,760,635	25,503	4,735,132	5,620,126
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28. Total (Lines 26 and 27)	4,760,635	25,503	4,735,132	5,620,126

DETAILS OF WRITE-INS

1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0
2501.			0	
2502.			0	
2503.			0	
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	0	0	0	0

LIABILITIES, CAPITAL AND SURPLUS

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less $.....0 reinsurance ceded)	252,712	2,946	255,659	1,555,933
2.	Accrued medical incentive pool and bonus amounts	1,300,282		1,300,282	1,300,282
3.	Unpaid claims adjustment expenses	6,816		6,816	38,965
4.	Aggregate health policy reserves, including the liability of $.....0 for medical loss ratio rebate per the Public Health Service Act			0	
5.	Aggregate life policy reserves			0	
6.	Property/casualty unearned premium reserve			0	
7.	Aggregate health claim reserves			0	
8.	Premiums received in advance			0	490
9.	General expenses due or accrued	3,188		3,188	3,223
10.1	Current federal and foreign income tax payable and interest thereon (including $.....0 on realized gains (losses))			0	
10.2	Net deferred tax liability			0	
11.	Ceded reinsurance premiums payable			0	
12.	Amounts withheld or retained for the account of others			0	
13.	Remittances and items not allocated			0	
14.	Borrowed money (including $.....0 current) and interest thereon $.....0 (including $.....0 current)			0	
15.	Amounts due to parent, subsidiaries and affiliates	494,269		494,269	93,189
16.	Derivatives			0	
17.	Payable for securities			0	
18.	Payable for securities lending			0	
19.	Funds held under reinsurance treaties with ($.....0 authorized reinsurers, $.....0 unauthorized reinsurers and certified $.....0 reinsurers)			0	
20.	Reinsurance in unauthorized and certified ($.....0) companies			0	
21.	Net adjustments in assets and liabilities due to foreign exchange rates			0	
22.	Liability for amounts held under uninsured plans			0	
23.	Aggregate write-ins for other liabilities (including $.....0 current)	0	0	0	0
24.	Total liabilities (Lines 1 to 23)	2,057,267	2,946	2,060,214	2,992,082
25.	Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26.	Common capital stock	XXX	XXX		
27.	Preferred capital stock	XXX	XXX		
28.	Gross paid in and contributed surplus	XXX	XXX	3,500,000	3,500,000
29.	Surplus notes	XXX	XXX		
30.	Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31.	Unassigned funds (surplus)	XXX	XXX	(825,082)	(871,956)
32.	Less treasury stock, at cost:				
	32.1 .....0.000 shares common (value included in Line 26 $.....0)	XXX	XXX		
	32.2 .....0.000 shares preferred (value included in Line 27 $.....0)	XXX	XXX		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	2,674,918	2,628,044
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	4,735,132	5,620,126

DETAILS OF WRITE-INS

2301.			0	
2302.			0	
2303.			0	
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	0	0	0	0
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001.				
3002.				
3003.				
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

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	XXX		3,336	13,001
2. Net premium income (including $.....0 non-health premium income)	XXX	(1,556)	2,280,147	9,269,786
3. Change in unearned premium reserves and reserve for rate credits	XXX			91,073
4. Fee-for-service (net of $.....0 medical expenses)	XXX			
5. Risk revenue	XXX			
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	(1,556)	2,280,147	9,360,859
Hospital and Medical:				
9. Hospital/medical benefits		(574,081)	1,351,127	8,036,627
10. Other professional services			38,537	149,926
11. Outside referrals				
12. Emergency room and out-of-area			24,721	100,734
13. Prescription drugs		24,418	242,088	855,552
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts				
16. Subtotal (Lines 9 to 15)	0	(549,662)	1,656,473	9,142,839
Less:				
17. Net reinsurance recoveries				
18. Total hospital and medical (Lines 16 minus 17)	0	(549,662)	1,656,473	9,142,839
19. Non-health claims (net)				
20. Claims adjustment expenses, including $.....0 cost containment expenses			37,282	189,155
21. General administrative expenses		505,252	325,445	1,260,461
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)	0	(44,410)	2,019,200	10,592,455
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	42,854	260,947	(1,231,596)
25. Net investment income earned		17,918	14,387	70,495
26. Net realized capital gains (losses) less capital gains tax of $.....0		(9,185)	(4,310)	(20,374)
27. Net investment gains or (losses) (Lines 25 plus 26)	0	8,732	10,077	50,121
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered $.....0) (amount charged off $.....0)]		67	(1,100)	(5,355)
29. Aggregate write-ins for other income or expenses	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	51,654	269,924	(1,186,830)
31. Federal and foreign income taxes incurred	XXX			(240,351)
32. Net income (loss) (Lines 30 minus 31)	XXX	51,654	269,924	(946,479)

DETAILS OF WRITE-INS

0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	0	0	0	0
2901.				
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
33. Capital and surplus prior reporting year	2,628,044	3,573,047	3,573,047
34. Net income or (loss) from Line 32	51,654	269,924	(946,479)
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			
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax			(14,329)
39. Change in nonadmitted assets	(3,642)	26,729	15,806
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	(1,138)	0	0
48. Net change in capital and surplus (Lines 34 to 47)	46,874	296,653	(945,003)
49. Capital and surplus end of reporting period (Line 33 plus 48)	2,674,918	3,869,700	2,628,044

DETAILS OF WRITE-INS

4701. PY tax adjustment	(1,138)		
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above)	(1,138)	0	0

CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance	137,337	2,970,649	9,540,461
2. Net investment income	22,843	15,191	73,408
3. Miscellaneous income			
4. Total (Lines 1 through 3)	160,180	2,985,840	9,613,869
5. Benefit and loss related payments	571,732	1,764,559	8,370,253
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	197,452	404,217	2,344,281
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of $.....0 tax on capital gains (losses)			66,999
10. Total (Lines 5 through 9)	769,184	2,168,777	10,781,533
11. Net cash from operations (Line 4 minus Line 10)	(609,003)	817,064	(1,167,665)
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	1,336,403	410,628	2,011,724
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)	1,336,403	410,628	2,011,724
13. Cost of investments acquired (long-term only):			
13.1 Bonds	355,855	388,385	1,755,350
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)	355,855	388,385	1,755,350
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)	980,548	22,243	256,374
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)	548,706	(84,044)	(254,261)
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	548,706	(84,044)	(254,261)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	920,251	755,262	(1,165,552)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	257,449	1,423,001	1,423,001
19.2 End of period (Line 18 plus Line 19.1)	1,177,700	2,178,263	257,449

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001			

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	2 Individual	3 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	1,042							1,042		
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	0									
Total Member Ambulatory Encounters for Period:										
7. Physician	0									
8. Non-Physician	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (a)	(1,556)							(1,556)		
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	(1,556)							(1,556)		
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	(549,662)							(549,662)		
18. Amount Incurred for Provision of Health Care Services	(549,662)							(549,662)		

(a) For health premiums written: Amount of Medicare Title XVIII exempt from state taxes or fees $.....(1,556).

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
Claims Unpaid (Reported)						
0599999. Unreported Claims and Other Claim Reserves						255,659
0799999. Total Claims Unpaid						255,659
0899999. Accrued Medical Incentive Pool and Bonus Amounts						1,300,282

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 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)					0	
2. Medicare Supplement					0	
3. Dental only					0	
4. Vision only					0	
5. Federal Employees Health Benefits Plan					0	
6. Title XVIII - Medicare	765,297		255,659		1,020,956	1,555,932
7. Title XIX - Medicaid					0	
8. Other health					0	
9. Health subtotal (Lines 1 to 8)	765,297	0	255,659	0	1,020,956	1,555,932
10. Healthcare receivables (a)	193,565		140,555		334,120	319,435
11. Other non-health					0	
12. Medical incentive pools and bonus amounts			1,300,282		1,300,282	1,300,282
13. Totals (Lines 9-10+11+12)	571,732	0	1,415,386	0	1,987,118	2,536,779

(a) Excludes $.....0 loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statement of the company are presented on the basis of accounting practice prescribed or permitted by the Arkansas Insurance Department.

The Arkansas Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Arkansas for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Arkansas Insurance Law. The National Association of Insurance Commissioners (NAIC) Accounting Practices and Procedures Manual has been adopted as a component of prescribed or permitted practices by the state of Arkansas. The Department has the right to permit other specific practices that deviate from the prescribed practices. However, the Company does not employ any such practices.

	SSAP #	F/S Page	F/S Line #	Current Year to Date	2018
NET INCOME					
(1) QualChoice Advantage, Inc. Company state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	$ 51,654	$ (946,479)
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				$	$
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				$	$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	$ 51,654	$ (946,479)
SURPLUS					
(5) QualChoice Advantage, Inc. Company state basis (Page 3, line 33, Columns 3 & 4)	XXX	XXX	XXX	$2,674,918	$2,628,044
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				$	$
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				$	$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	$2,674,918	$2,628,044

C. Accounting Policy

Revenue Recognition: The Company provides health benefits to Medicare-eligible members under contract with the Centers for Medicare and Medicaid Services (CMS). Premium revenue is fixed in advance of the periods covered and is not generally subject to significant accounting estimates.

Recognition of Health Care Costs: The Company arranges for medical care for its members through a combination of capitation agreements and fee-for-service programs with medical services providers. Medical and hospital expenses are recorded in the period the member receives or is entitled to the services. These expenses include payments to primary care physicians, specialists, hospitals, pharmacies and other medical services providers.

(2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method

Bonds are stated at amortized cost using the interest method.

(6) Basis for Loan-Backed Securities and Adjustment Methodology - None.

D. Going Concern

Disclosures specific to going concern is not required because it is not probable that the entity will be unable to meet obligations within the next year.

Note 2 – Accounting Changes and Corrections of Errors

None.

Note 3 – Business Combinations and Goodwill

None.

Note 4 – Discontinued Operations

The Company ceased writing insurance business as of January 1, 2019.

Note 5 – Investments

D. Loan-Backed Securities

(1) Description of Sources Used to Determine Prepayment Assumptions - None.

NOTES TO FINANCIAL STATEMENTS

(2) Other-Than-Temporary Impairments - None.

(3) Recognized OTTI securities - None.

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains): None.

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary - None.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None.

b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged	$

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) Company Policies or Strategies for Repo Programs - None.

(2) Type of Repo Trades Used - None.

(3) Maturity Time Frame - None.

(4) Counterparty, Jurisdiction and Fair Value (FV) - None.

(5) Securities "Sold" Under Repo – Secured Borrowing - None.

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation - None.

(7) Collateral Received – Secured Borrowing - None.

(8) Cash & Non-Cash Collateral Received – Secured Borrowing by NAIC Designation - None.

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity - None.

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity - None.

(11) Liability to Return Collateral – Secured Borrowing (Total) - None.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions

(1) Company Policy or Strategies for Engaging in Repo Programs - None.

(2) Type of Repo Trades Used - None.

(3) Original (Flow) and Residual Maturity - None.

(4) Counterparty, Jurisdiction and Fair Value (FV) - None.

(5) Fair Value of Securities Acquired Under Repo – Secured Borrowing - None.

(6) Securities Acquired Under Repo – Secured Borrowing by NAIC Designation - None.

(7) Collateral Pledged – Secured Borrowing - None.

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity - None.

(9) Recognized Receivable for Return of Collateral – Secured Borrowing - None.

(10) Recognized Liability to Return Collateral – Secured Borrowing (Total) - None.

H. Repurchase Agreements Transactions Accounted for as a Sale
Repurchase Transaction – Cash Taker – Overview of Sale Transactions

(1) Company Policy or Strategies for Engaging in Repo Programs - None.

(2) Type of Repo Trades Used - None.

(3) Original (Flow) & Residual Maturity - None.

(4) Counterparty, Jurisdiction and Fair Value (FV) - None.

(5) Securities "Sold" Under Repo – Sale - None.

(6) Securities Sold Under Repo – Sale by NAIC Designation - None.

(7) Proceeds Received – Sale - None.

(8) Cash & Non-Cash Collateral Received – Sale by NAIC Designation - None.

(9) Recognized Forward Resale Commitment - None.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale Repurchase Transaction – Cash Provider – Overview of Sale Transactions

(1) Company Policy or Strategies for Engaging in Repo Programs - None.

(2) Type of Repo Trades Used - None.

(3) Original (Flow) & Residual Maturity - None.

(4) Counterparty, Jurisdiction and Fair Value (FV) - None.

(5) Securities Acquired Under Repo – Sale - None.

(6) Securities Acquired Under Repo – Sale by NAIC Designation - None.

(7) Proceeds Provided – Sale - None.

(8) Recognized Forward Resale Commitment - None.

M. Working Capital Finance Investments

(2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs - None.

(3) Any Events of Default or Working Capital Finance Investments - None.

N. Offsetting and Netting of Assets and Liabilities - None.

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

None.

Note 7 – Investment Income

No significant changes

Note 8 – Derivative Instruments

H. Total Premium Costs for Contracts - None.

Note 9 – Income Taxes

No significant changes

Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant changes

Note 11 – Debt

B. FHLB (Federal Home Loan Bank) Agreements

(1) Nature of the Agreement - None.

(2) FHLB Capital Stock - None.

(3) Collateral Pledged to FHLB - None.

(4) Borrowing from FHLB - None.

c. FHLB – Prepayment Obligations

	Does the Company have Prepayment Obligations under the Following Arrangements (YES/NO)
1. Debt	NO
2. Funding Agreements	NO
3. Other	NO

NOTES TO FINANCIAL STATEMENTS

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan - None.

Note 13 – Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations

No significant changes

Note 14 – Liabilities, Contingencies and Assessments

No significant changes

Note 15 – Leases

No significant changes

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

None.

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

B. Transfer and Servicing of Financial Assets

(2) Servicing Assets and Servicing Liabilities - None.

(4) Securitizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales - None.

C. Wash Sales

(1) Description of the Objectives Regarding These Transactions - None.

(2) The details by NAIC designation 3 or below, or unrated of securities sold during the current period and reacquired within 30 days of the sale date are: None.

Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans

Not applicable.

Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

Note 20 – Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

The Company reports investments at amortized cost.

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy - None.

(3) Policies when Transfers Between Levels are Recognized

The Company has no transfers between fair-value levels.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement - None.

(5) Fair Value Disclosures - None.

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements - None.

C. Fair Value Level - None.

D. Not Practicable to Estimate Fair Value - None.

E. NAV Practical Expedient Investments - None.

Note 21 – Other Items

None.

NOTES TO FINANCIAL STATEMENTS

Note 22 – Events Subsequent

There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

Note 23 – Reinsurance

No significant changes

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

E. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions Yes [ ] No [X]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year to date: None.

(3) Roll forward of prior year ACA Risk Sharing Provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance: None.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year - None.

(5) ACA Risk Corridors Receivable as of Reporting Date - None.

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

A. Change in Incurred Losses and Loss Adjustment Expenses

The following schedule represents the changes in claims unpaid, unpaid claims adjustment expense and aggregate health claim reserves from the beginning of the year to the end of the period.

	2019	2018
Beginning liability for unpaid losses and loss adjustment expenses	1,594,898	1,183,464
Health Care Receivable	(319,435)	(716,860)
Beginning liability for unpaid losses and loss adjustment expense, net of Health Care Rec.	1,275,463	466,604
Incurred related to:		
Current year	0	8,025,372
Prior Years	797,446	1,459,047
Total paid	797,446	9,484,419
Ending liability for unpaid losses and loss adjustment expenses	262,475	1,594,898
Health Care Receivable	(140,555)	(319,435)
Ending liability for unpaid losses and loss adjustment, net of Health Care Rec.	121,920	1,275,463

Loss and Loss Adjustment Expenses reserves as of December 31, 2018 were $1,594,898. As of March 31, 2019, $797,446 has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now $262,475 as a result of re-estimation of unpaid claims and claim adjustment expenses. This has generated a $534,977 favorable prior year development from December 31, 2018 to March 31, 2019. The change 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.

B. Information about Significant Changes in Methodologies and Assumptions - None.

Note 26 – Intercompany Pooling Arrangements

None.

Note 27 – Structured Settlements

Not Applicable for Health Companies

Note 28 – Health Care Receivables

NOTES TO FINANCIAL STATEMENTS

No significant changes

Note 29 – Participating Policies

No significant changes

Note 30 – Premium Deficiency Reserves

No significant changes

Note 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 [ ]

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 [X] No [ ]

3.3 If the response to 3.2 is yes, provide a brief description of those changes.

Effective March 29, 2019 Steven Schramm resigned his position as President/CFO/Treasurer and William Ze'ev Young resigned his position as Chief Medical Officer.

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

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

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-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 [X] N/A [ ]

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2017

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2017

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

6.4 By what department or departments?

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 [X] No [ ] N/A [ ]

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

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 with 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 the 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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No [ ]

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c) Compliance with applicable governmental laws, rules and regulations;

(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

9.2 Has the code of ethics for senior managers been amended? Yes [ ] No [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).

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [ ] No [X]

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: $ 0

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:

		1 Prior Year End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21	Bonds	$ 0	$ 0
14.22	Preferred Stock	0	0
14.23	Common Stock	0	0
14.24	Short-Term Investments	0	0
14.25	Mortgage Loans on Real Estate	0	0
14.26	All Other	0	0
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	$ 0	$ 0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	$ 0	$ 0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [ ] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ]

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of 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 Name of Custodian(s)	2 Custodian Address
BNY Mellon Asset Servicing	BNY Mellon Center, 500 Grant Street, Suite 410, Pittsburgh, PA 15258

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [ ] No [X]

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

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

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

1 Name of Firm or Individual	2 Affiliation
Catholic Health Initiatives - Treasury department	A
BNY Mellon Asset Management North America	U

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets? Yes [X] No [ ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [X] No [ ]

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105764	BNY Mellon Asset Management North America		SEC	DS

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:

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
    a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
    b. Issuer or obligor is current on all contracted interest and principal payments.
    c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

    Has the reporting entity self-designated 5GI securities? Yes [ ] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:
    a. The security was purchased prior to January 1, 2018.
    b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
    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]

GENERAL INTERROGATORIES (continued)

PART 2 - HEALTH

1. Operating Percentages:
   - 1.1 A&H loss percent ..... 0.0 %
   - 1.2 A&H cost containment percent ..... 0.0 %
   - 1.3 A&H expense percent excluding cost containment expenses ..... 0.0 %

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 amount of 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 [ ] No [X]

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
A&H Non-Affiliates								
64890.....	91-6034263.....	01/01/2017	Berkley Life and Health Insurance Company.....	IA.....	CO/I.....	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							0	
2. Alaska AK	N							0	
3. Arizona AZ	N							0	
4. Arkansas AR	L		(1,556)					(1,556)	
5. California CA	N							0	
6. Colorado CO	N							0	
7. Connecticut CT	N							0	
8. Delaware DE	N							0	
9. District of Columbia DC	N							0	
10. Florida FL	N							0	
11. Georgia GA	N							0	
12. Hawaii HI	N							0	
13. Idaho ID	N							0	
14. Illinois IL	N							0	
15. Indiana IN	N							0	
16. Iowa IA	N							0	
17. Kansas KS	N							0	
18. Kentucky KY	N							0	
19. Louisiana LA	N							0	
20. Maine ME	N							0	
21. Maryland MD	N							0	
22. Massachusetts MA	N							0	
23. Michigan MI	N							0	
24. Minnesota MN	N							0	
25. Mississippi MS	N							0	
26. Missouri MO	N							0	
27. Montana MT	N							0	
28. Nebraska NE	N							0	
29. Nevada NV	N							0	
30. New Hampshire NH	N							0	
31. New Jersey NJ	N							0	
32. New Mexico NM	N							0	
33. New York NY	N							0	
34. North Carolina NC	N							0	
35. North Dakota ND	N							0	
36. Ohio OH	N							0	
37. Oklahoma OK	N							0	
38. Oregon OR	N							0	
39. Pennsylvania PA	N							0	
40. Rhode Island RI	N							0	
41. South Carolina SC	N							0	
42. South Dakota SD	N							0	
43. Tennessee TN	N							0	
44. Texas TX	N							0	
45. Utah UT	N							0	
46. Vermont VT	N							0	
47. Virginia VA	N							0	
48. Washington WA	N							0	
49. West Virginia WV	N							0	
50. Wisconsin WI	N							0	
51. Wyoming WY	N							0	
52. American Samoa AS	N							0	
53. Guam GU	N							0	
54. Puerto Rico PR	N							0	
55. U.S. Virgin Islands VI	N							0	
56. Northern Mariana Islands MP	N							0	
57. Canada CAN	N							0	
58. Aggregate Other alien OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal	XXX	0	(1,556)	0	0	0	0	(1,556)	0
60. Reporting entity contributions for Employee Benefit Plans	XXX							0	
61. Total (Direct Business)	XXX	0	(1,556)	0	0	0	0	(1,556)	0

DETAILS OF WRITE-INS

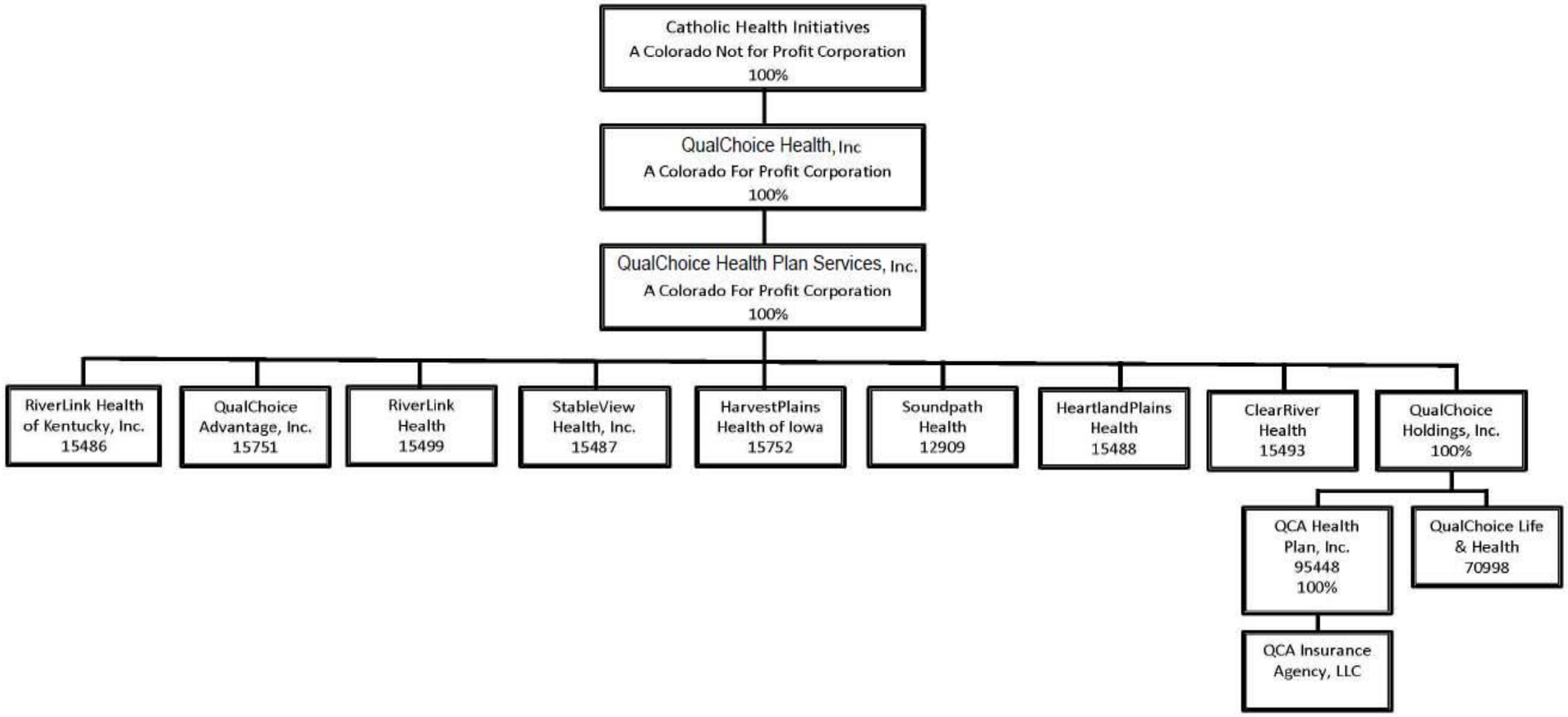
58001.								0	
58002.								0	
58003.								0	
58998. Summary of remaining write-ins for line 58 from overflow page		0	0	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above)		0	0	0	0	0	0	0	0

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG	1	R - Registered - Non-domiciled RRGs	0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state	0	Q - Qualified - Qualified or accredited reinsurer	0
		N - None of the above - Not allowed to write business in the state	56

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
Members															
			46-1224037				QualChoice Health Plan Services, Inc.	CO	UDP	QualChoice Health, Inc.	Ownership	100.000	Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	12909	42-1720801				Soundpath Health	WA	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	95448	71-0794605				QCA Health Plan, Inc.	AR	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	70998	71-0386640				QualChoice Life and Health	AR	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	15493	46-4495960				ClearRiver Health	TN	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	15488	46-4368223				HeartlandPlains Health	NE	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	15499	46-4380824				RiverLink Health	OH	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	15486	46-4828332				RiverLink Health of Kentucky, Inc.	KY	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	15487	46-4373713				StableView Health Inc.	KY	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	15751	47-3433912				QualChoice Advantage Inc.	AR	RE	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	
4807	Catholic Hlth Initatives Grp.	15752	47-3451750				HarvestPlains Health of Iowa	IA	IA	QualChoice Health Plan Services, Inc.	Ownership	100.000	QualChoice Health, Inc /Catholic Health Initiatives	N	

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 Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Explanation:

1.

Bar Code:

* 1 5 7 5 1 2 0 1 9 3 6 5 0 0 0 0 1 *

Overflow Page for Write-Ins

NONE

SCHEDULE A - VERIFICATION

Real Estate

NONE

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	
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 end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

NONE

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest points and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other-than-temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)	0	0
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)	0	0

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

NONE

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	
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)	0	0
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	3,260,488	3,543,856
2. Cost of bonds and stocks acquired	355,855	1,755,351
3. Accrual of discount	565	2,675
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	(9,185)	(20,374)
6. Deduct consideration for bonds and stocks disposed of	1,337,155	2,012,668
7. Deduct amortization of premium	1,348	9,296
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	756	944
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	2,269,976	3,260,488
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	2,269,976	3,260,488

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)	2,863,417	395,767	1,265,996	(209)	1,992,979			2,863,417
2. NAIC 2 (a)	422,049	9,996	154,589	(460)	276,996			422,049
3. NAIC 3 (a)					0			
4. NAIC 4 (a)					0			
5. NAIC 5 (a)					0			
6. NAIC 6 (a)					0			
7. Total Bonds	3,285,466	405,763	1,420,585	(669)	2,269,975	0	0	3,285,466
PREFERRED STOCK								
8. NAIC 1					0			
9. NAIC 2					0			
10. NAIC 3					0			
11. NAIC 4					0			
12. NAIC 5					0			
13. NAIC 6					0			
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	3,285,466	405,763	1,420,585	(669)	2,269,975	0	0	3,285,466

(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 $.....0; NAIC 2 $.....0; NAIC 3 $.....0; NAIC 4 $.....0; NAIC 5 $.....0; NAIC 6 $.....0.

Sch. DA - Pt. 1
NONE

Sch. DA - Verification
NONE

Sch. DB - Pt. A - Verification
NONE

Sch. DB - Pt. B - Verification
NONE

Sch. DB - Pt. C - Sn. 1
NONE

Sch. DB - Pt. C - Sn. 2
NONE

Sch. DB - Verification
NONE

SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	337,056	3,874
2. Cost of cash equivalents acquired	51,649	334,710
3. Accrual of discount	114	18
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals	75,387	1,546
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)	313,432	337,056
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	313,432	337,056

Sch. A Pt. 2
NONE

Sch. A Pt. 3
NONE

Sch. B - Pt. 2
NONE

Sch. B - Pt. 3
NONE

Sch. BA - Pt. 2
NONE

Sch. BA - Pt. 3
NONE

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation and Administrative Symbol/Market Indicator (a)
Bonds - U.S. Government									
912828 5R 7	UNITED STATES TREASURY NOTE/BOND		01/02/2019	NOMURA SECURITIES/FI		80,347	80,000	110	1
912828 5V 8	UNITED STATES TREASURY NOTE/BOND		02/12/2019	VARIOUS		75,004	75,000	117	1
912828 6C 9	UNITED STATES TREASURY NOTE/BOND		03/05/2019	JPM SECURITIES-FIXED		69,932	70,000	92	1
0599999.	Total - Bonds - U.S. Government					225,283	225,000	319	XXX
Bonds - U.S. Special Revenue and Special Assessment									
3135G0 U9 2	FEDERAL NATIONAL MORTGAGE ASSOCIATION		01/09/2019	NOMURA SECURITIES/FI		64,953	65,000		1
3199999.	Total - Bonds - U.S. Special Revenue and Special Assessments					64,953	65,000	0	XXX
Bonds - Industrial and Miscellaneous									
12189L AF 8	BURLINGTON NORTHERN SANTA FE LLC		02/07/2019	STIFEL NICHOLAUS & C		10,139	10,000	140	1FE
47789J AD 8	JOHN DEERE OWNER TRUST 2019-A		03/05/2019	CITIGROUP GLOBAL MKT		9,999	10,000		1FE
585055 BR 6	MEDTRONIC INC		02/07/2019	MARKETAXESS CORP		10,085	10,000	128	1FE
717081 ER 0	PFIZER INC		03/04/2019	BARCLAYS CAPITAL FIX		9,999	10,000		1FE
74432Q BT 1	PRUDENTIAL FINANCIAL INC		02/26/2019	SUMRIDGE PARTNERS LL		10,401	10,000	128	1FE
80285H AD 2	SANTANDER DRIVE AUTO RECEIVABLES TRUST 2		02/12/2019	WELLS FARGO SECS LLC		5,000	5,000		1FE
907818 EZ 7	UNION PACIFIC CORP		02/11/2019	CREDIT SUISSE FIRST		9,996	10,000		2FE
3899999.	Total - Bonds - Industrial and Miscellaneous					65,619	65,000	396	XXX
8399997.	Total - Bonds - Part 3					355,855	355,000	715	XXX
8399999.	Total - Bonds					355,855	355,000	715	XXX
9999999.	Total - Bonds, Preferred and Common Stocks					355,855	XXX	715	XXX

(a) For all common stock bearing NAIC market indicator "U" provide the number of such issues: 0.

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value 11	12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	Foreign	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 and Administrative Symbol/ Market Indicator (a)
Bonds - U.S. Government																					
912828 2Q 2	UNITED STATES TREASURY NOTE/BOND		01/28/2019.	ABN AMRO SECURITIES		152,378	155,000	155,397	155,221		(10)		(10)		155,211		(2,833)	(2,833)	1,055	08/15/2020.	1
912828 4G 2	UNITED STATES TREASURY NOTE/BOND		01/28/2019.	CITADEL SECURITEIS L		129,375	130,000	128,979	129,203		26		26		129,229		146	146	899	04/15/2021.	1
912828 4W 7	UNITED STATES TREASURY NOTE/BOND		01/28/2019.	JPM SECURITIES-FIXED		165,645	165,000	165,238	165,215		(6)		(6)		165,209		436	436	2,059	08/15/2021.	1
912828 5R 7	UNITED STATES TREASURY NOTE/BOND		01/28/2019.	CITADEL SECURITEIS L		165,258	165,000	165,181	84,836		(4)		(4)		165,179		79	79	524	12/15/2021.	1
912828 X2 1	UNITED STATES TREASURY NOTE/BOND		01/02/2019.	DEUTSCHE BANC/ALEX B		78,947	80,000	80,072	80,032				0		80,032		(1,085)	(1,085)	264	04/15/2020.	1
0599999.	Total - Bonds - U.S. Government					691,603	695,000	694,867	614,507	0	6	0	6	0	694,860	0	(3,257)	(3,257)	4,801	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment																					
3135G0 T2 9	FEDERAL NATIONAL MORTGAGE ASSOCIATION		01/09/2019.	DEUTSCHE BANC/ALEX B		78,987	80,000	79,501	79,803		5		5		79,808		(820)	(820)	443	02/28/2020.	1
3137EA EF 2	FEDERAL HOME LOAN MORTGAGE CORP		01/25/2019.	NOMURA SECURITIES/FI		14,770	15,000	14,902	14,956		2		2		14,959		(188)	(188)	56	04/20/2020.	1
3137EA EJ 4	FEDERAL HOME LOAN MORTGAGE CORP		01/25/2019.	DEUTSCHE BK SECS INC		29,504	30,000	29,946	29,968		1		1		29,970		(466)	(466)	161	09/29/2020.	1
3199999.	Total - Bonds - U.S. Special Revenue and Special Assessments.					123,261	125,000	124,349	124,727	0	8	0	8	0	124,737	0	(1,474)	(1,474)	660	XXX	XXX
Bonds - Industrial and Miscellaneous																					
00206R CY 6	AT&T INC		02/07/2019.	MORGAN STANLEY & CO		5,112	5,000	5,406	5,165		(15)		(15)		5,150		(38)	(38)	105	03/15/2020.	2FE
02007F AC 9	ALLY AUTO RECEIVABLES TRUST 2017-4		02/13/2019.	LLOYDS SECS INC		14,885	15,000	15,000	15,000				0		15,000		(115)	(115)	44	12/15/2021.	1FE
02007Y AC 8	ALLY AUTO RECEIVABLES TRUST 2017-5		01/28/2019.	DEUTSCHE BANC/ALEX B		14,742	15,000	14,999	14,999				0		14,999		(257)	(257)	36	03/15/2022.	1FE
0258M0 DX 4	AMERICAN EXPRESS CREDIT CORP		01/25/2019.	MORGAN STANLEY & CO		14,899	15,000	15,190	15,112		(5)		(5)		15,106		(207)	(207)	146	09/14/2020.	1FE
03066H AD 9	AMERICREDIT AUTOMOBILE RECEIVABLES TRUST		01/28/2019.	SG AMERICAS SECURITI		14,963	15,000	14,997	14,998				0		14,998		(36)	(36)	52	12/19/2022.	1FE
031162 CM 0	AMGEN INC		01/25/2019.	GOLDMAN SACHS & CO		9,901	10,000	9,995	9,997				0		9,998		(97)	(97)	48	05/11/2020.	2FE
035242 AJ 5	ANHEUSER-BUSCH INBEV FINANCE INC		01/22/2019.	NON-BROKER TRADE, BO		7,933	8,000	8,064	8,042		(2)		(2)		8,040		(107)	(107)	112	02/01/2021.	2FE
037833 DJ 6	APPLE INC		01/25/2019.	GOLDMAN SACHS & CO		14,868	15,000	14,987	14,992				0		14,992		(125)	(125)	63	11/13/2020.	1FE
06051G FW 4	BANK OF AMERICA CORP		01/25/2019.	MILLENNIUM ADVISORS		24,755	25,000	24,562	24,640		12		12		24,651		103	103	182	04/19/2021.	1FE
09659Q AD 9	BMW VEHICLE OWNER TRUST 2018-A		01/28/2019.	MITSUBISHI UFJ SECS		14,766	15,000	15,000	15,000				0		15,000		(234)	(234)	33	04/25/2022.	1FE
12189T BC 7	BURLINGTON NORTHERN SANTA FE LLC		02/07/2019.	MILLENNIUM ADVISORS		5,055	5,000	5,399	5,108		(16)		(16)		5,092		(37)	(37)	85	10/01/2019.	1FE
12652V AC 1	CNH EQUIPMENT TRUST 2018-A		01/28/2019.	MITSUBISHI UFJ SECS		14,878	15,000	14,997	14,998				0		14,998		(119)	(119)	57	07/17/2023.	1FE
126650 CJ 7	CVS HEALTH CORP		01/25/2019.	GOLDMAN SACHS & CO		14,927	15,000	15,350	15,182		(9)		(9)		15,173		(246)	(246)	221	07/20/2020.	2FE
14314A AC 3	CARMAX AUTO OWNER TRUST 2018-1		01/28/2019.	MITSUBISHI UFJ SECS		14,728	15,000	14,999	14,999				0		14,999		(271)	(271)	45	11/15/2022.	1FE
166764 BP 4	CHEVRON CORP		01/25/2019.	GOLDMAN SACHS & CO		14,885	15,000	14,978	14,991		1		1		14,992		(107)	(107)	121	03/03/2020.	1FE
172967 KB 6	CITIGROUP INC		01/25/2019.	DEUTSCHE BANC/ALEX B		14,880	15,000	15,131	15,081		(3)		(3)		15,078		(198)	(198)	103	10/26/2020.	2FE

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value 11	12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	Foreign	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 and Administrative Symbol/ Market Indicator (a)
172967 LF 6	CITIGROUP INC.		02/01/2019.	MARKETAXESS CORP.		9,941	10,000	9,996	9,999				0		9,999		(57)	(57)	140	01/10/2020.	2FE
20030N CQ 2	COMCAST CORP.		01/25/2019.	GOLDMAN SACHS & CO.		15,124	15,000	14,985	14,986				0		14,986		137	137	164	10/01/2021.	1FE
24422E TS 8	JOHN DEERE CAPITAL CORP.		01/25/2019.	GOLDMAN SACHS & CO.		14,826	15,000	14,991	14,995				0		14,996		(170)	(170)	30	06/22/2020.	1FE
26875P AD 3	EOG RESOURCES INC.		02/07/2019.	MILLENNIUM ADVISORS.		5,039	5,000	5,476	5,075		(20)		(20)		5,055		(16)	(16)	55	06/01/2019.	1FE
34528Q FP 4	FORD CREDIT FLOORPLAN MASTER OWNER TRUST		01/28/2019.	WELLS FARGO SECS LLC.		14,712	15,000	14,998	14,999				0		14,999		(287)	(287)	40	09/15/2022.	1FE
34532A AD 5	FORD CREDIT AUTO OWNER TRUST 2017-C		01/28/2019.	LLOYDS SECS INC.		14,700	15,000	14,997	14,999				0		14,999		(299)	(299)	37	03/15/2022.	1FE
36251P AA 2	GS MORTGAGE SECURITIES TRUST 2016-GS3		03/01/2019.	PAYDOWN.		790	790	790	790				0		790			0	2	10/01/2049.	1FM
38013M AE 6	GM FINANCIAL AUTOMOBILE LEASING TRUST 20		01/28/2019.	MITSUBISHI UFJ SECS.		24,781	25,000	24,995	24,998				0		24,998		(217)	(217)	59	06/21/2021.	1FE
38013R AD 7	GM FINANCIAL CONSUMER AUTOMOBILE RECEIVA		01/28/2019.	MITSUBISHI UFJ SECS.		14,780	15,000	14,998	14,999				0		14,999		(219)	(219)	50	12/16/2022.	1FE
38141G WP 5	GOLDMAN SACHS GROUP INC/THE.		01/25/2019.	GOLDMAN SACHS & CO.		14,938	15,000	14,998	14,999				0		15,000		(61)	(61)	151	07/23/2019.	1FE
46625H HS 2	JPMORGAN CHASE & CO.		01/25/2019.	GOLDMAN SACHS & CO.		15,288	15,000	16,029	15,547		(26)		(26)		15,521		(233)	(233)	343	07/22/2020.	1FE
46645U AQ 0	JP MORGAN CHASE COMMERCIAL MORTGAGE SECU		03/01/2019.	PAYDOWN.		746	746	746	745				0		746			0	2	12/01/2049.	1FM
494550 BB 1	KINDER MORGAN ENERGY PARTNERS LP		02/20/2019.	WELLS FARGO SECS LLC.		15,526	15,000	16,082	15,622		(77)		(77)		15,545		(19)	(19)	534	02/15/2020.	2FE
494550 BR 6	KINDER MORGAN ENERGY PARTNERS LP		02/01/2019.	MATURITY.		10,000	10,000	10,103	10,004		(4)		(4)		10,000			0	133	02/01/2019.	2FE
50077L AH 9	KRAFT HEINZ FOODS CO.		01/25/2019.	MERRILL LYNCH PIERCE.		9,944	10,000	10,081	10,047		(3)		(3)		10,045		(101)	(101)	161	07/02/2020.	2FE
585055 BG 0	MEDTRONIC INC.		02/07/2019.	WELLS FARGO SECS LLC.		9,963	10,000	10,198	10,084		(8)		(8)		10,076		(113)	(113)	101	03/15/2020.	1FE
58769B AD 6	MERCEDES-BENZ AUTO RECEIVABLES TRUST 201		03/15/2019.	PAYDOWN.		1,972	1,972	1,971	1,972				0		1,972			0	4	02/16/2021.	1FE
61761J B3 2	MORGAN STANLEY.		01/25/2019.	MORGAN STANLEY & CO.		14,955	15,000	15,154	15,090		(5)		(5)		15,085		(130)	(130)	50	06/16/2020.	1FE
713448 DX 3	PEPSICO INC.		01/25/2019.	GOLDMAN SACHS & CO.		9,831	10,000	9,741	9,779		7		7		9,786		44	44	58	04/15/2021.	1FE
74432Q CB 9	PRUDENTIAL FINANCIAL INC.		02/26/2019.	TORONTO DOMINION SEC.		9,979	10,000	10,085	10,022		(6)		(6)		10,017		(37)	(37)	126	08/15/2019.	1FE
887317 AK 1	WARNER MEDIA LLC.		03/27/2019.	CALL 103.97617.		15,596	15,000	15,731	15,537		(54)		(54)		15,482		(482)	(482)	949	03/29/2021.	2FE
90131H AQ 8	21ST CENTURY FOX AMERICA INC.		01/25/2019.	CITIGROUP GLOBAL MKT.		15,413	15,000	15,600	15,451		(15)		(15)		15,436		(24)	(24)	306	02/15/2021.	2FE
911312 AM 8	UNITED PARCEL SERVICE INC.		03/08/2019.	GOLDMAN SACHS & CO.		10,101	10,000	10,179	10,126		(12)		(12)		10,115		(13)	(13)	206	01/15/2021.	1FE
92343V CN 2	VERIZON COMMUNICATIONS INC.		03/29/2019.	CALL 101.061.		15,159	15,000	14,931	14,939		5		5		14,944		56	56	344	11/01/2021.	2FE
95000G AW 4	WELLS FARGO COMMERCIAL MORTGAGE TRUST 20		03/01/2019.	PAYDOWN.		501	501	501	500				0		501			0	1	08/01/2049.	1FM
98161F AD 7	WORLD OMNI AUTOMOBILE LEASE SECURITIZATI		02/15/2019.	PAYDOWN.		1,903	1,903	1,903	1,903				0		1,903			0	3	08/15/2019.	1FE
05565Q CX 4	BP CAPITAL MARKETS PLC.	D	01/25/2019.	MORGAN STANLEY & CO.		9,935	10,000	10,081	10,031		(2)		(2)		10,029		(94)	(94)	107	02/13/2020.	1FE
82481L AB 5	SHIRE ACQUISITIONS INVESTMENTS IRELAND D	D	01/17/2019.	GOLDMAN SACHS & CO.		9,675	10,000	9,651	9,694		6		6		9,700		(26)	(26)	79	09/23/2021.	2FE
3899999. Total - Bonds - Industrial and Miscellaneous						522,295	523,912	529,045	526,236	0	(251)	0	(251)	0	525,990	0	(4,452)	(4,452)	5,688	XXX	XXX

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2	3	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	Foreign	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 and Administrative Symbol/ Market Indicator (a)
8399997.	Total - Bonds - Part 4					1,337,159	1,343,912	1,348,261	1,265,470	0	(237)	0	(237)	0	1,345,587	0	(9,183)	(9,183)	11,149	XXX	XXX
8399999.	Total - Bonds					1,337,159	1,343,912	1,348,261	1,265,470	0	(237)	0	(237)	0	1,345,587	0	(9,183)	(9,183)	11,149	XXX	XXX
9999999.	Total - Bonds, Preferred and Common Stocks					1,337,159	XXX	1,348,261	1,265,470	0	(237)	0	(237)	0	1,345,587	0	(9,183)	(9,183)	11,149	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues: 0.

Sch. DB - Pt. A - Sn. 1
NONE

Sch. DB - Pt. B - Sn. 1
NONE

Sch. DB - Pt. D - Sn. 1
NONE

Sch. DB - Pt. D - Sn. 2
NONE

Sch. DL - Pt. 1
NONE

Sch. DL - Pt. 2
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
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
Bank of New York Mellon, Investment -- Pittsburgh, PA					112,824	91,245	49,164	XXX
PNC Bank -- Kalamazoo, MI					994,431	372,780	815,103	XXX
0199999. Total Open Depositories	XXX	XXX	0	0	1,107,255	464,025	864,267	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	1,107,255	464,025	864,267	XXX
0599999. Total Cash	XXX	XXX	0	0	1,107,255	464,025	864,267	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due & Accrued	9 Amount Received During Year
Exempt Money Market Mutual Funds as Identified by the SVO								
825252 40 6	STIT - TREASURY PORTFOLIO		03/01/2019			313,433	613	1,741
8599999. Total - Exempt Money Market Mutual Funds as Identified by the SVO						313,433	613	1,741
8899999. Total - Cash Equivalents						313,433	613	1,741